VCMC/SPH CLINICAL PRACTICE GUIDELINES
Management of Hospitalized Adults with Diabetic Foot Infections

The contents of this clinical practice guideline are to be used as a guide. Healthcare professionals should use sound clinical judgment and individualize patient care. This CPG is not meant to be a replacement for training, experience, CME or studying the latest literature and drug information.

**Mild Diabetic Foot Infection:**
Local infection involving only skin and subcutaneous tissue **without** involvement of deeper tissues and **without** signs of SIRS.
Outpatient management, wound care, and oral antibiotics

**Moderate to Severe Diabetic Foot Infection:**
Local diabetic foot infection involving the skin and subcutaneous tissue with erythema > 2 cm, or involving deeper structures (e.g. abscess, osteomyelitis, septic arthritis, fasciitis)

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**NO**

**Moderate infection**
- Please do not start antibiotics until after bone/tissue cultures obtained in OR
- Obtain blood cultures
- Call specialist to arrange source control and debridement/bone biopsy
- Obtain ESR & CRP

**Empiric Antibiotics:**
Ampicillin-Sulbactam monotherapy
- If h/o Pseudomonas:
  Piperacillin-Tazobactam monotherapy
- If purulence or h/o MRSA:
  Vancomycin + Ampicillin-Sulbactam
- If Penicillin Allergy: Fluoroquinolone

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**Signs of SIRS**

**Have all deep/sterile wound cultures been collected?**
- Make sure at least 4 samples collected in OR of tissue/bone for aerobic, anaerobic, fungal and afb cultures.
- Ok to start IV empiric antibiotics while awaiting culture results.
- Strongly consider MRI with or w/out contrast

**Concern for limb circulation issues?**
- Arterial ischemia
- Venous insufficiency

**YES**

**Consult Infectious Disease:**
- Need for long term IV therapy
- MDR organisms
- No surgical cure achieved
- Recurrence despite adequate treatment
- Extensive infection
- Severe drug allergies

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**Severe infection**
- Obtain blood cultures
- Start empiric antibiotics
- Call specialist to arrange source control and debridement/bone biopsy
- Obtain ESR & CRP

**Empiric Antibiotics:**
Piperacillin-Tazobactam + Vancomycin
If Cr > 2:
* Daptomycin or *Linezolid instead of vancomycin
- If severe Penicillin Allergy: *Meropenem instead of piperacillin-tazobactam or call ID

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* Follow Restricted Meds Protocol on ID website, call ID pharmacist for approval during 0800-1600 hours M-F

References:

Revised 11/2/17

Approvals: Antimicrobial Stewardship Committee: 9/19/2017
P&T Committee: 10/2017
Medicine Committee: 11/2017
MEC: 11/2017
Oversight: 11/2017
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