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Table 3. Antibiotics for Treatment of Incisional Surgical Site Infections

Surgery of Intestinal or Genitourinary Tract	
Single-drug regimens	
Ticarcillin-clavulanate 3.1 g every 6 h IV	
Piperacillin-tazobactam 3.375 g every 6 h or 4.5 g every 8 h IV	
Imipenem-cilastatin 500 mg every 6 h IV	
Meropenem 1 g every 8 h IV	
Ertapenem 1 g every 24 h IV	
Combination regimens	
Ceftriaxone 1 g every 24 h + metronidazole 500 mg every 8 h IV	
Ciprofloxacin 400 mg IV every 12 h or 750 mg po every 12 h + metronidazole 500 mg every 8 h IV	
Levofloxacin 750 mg IV every 24 h + metronidazole 500 mg every 8 h IV	
Ampicillin-sulbactam 3 g every 6 h + gentamicin or tobramycin 5 mg/kg every 24 h IV	
Surgery of trunk or extremity away from axilla or perineum	
Oxacillin or nafcillin 2 g every 6 h IV	
Cefazolin 0.5–1 g every 8 h IV	
Cephalexin 500 mg every 6 h po	
SMX-TMP 160–800 mg po every 6 h	
Vancomycin 15 mg/kg every 12 h IV	
Surgery of axilla or perineum ^a	
Metronidazole 500 mg every 8 h IV	
plus	
Ciprofloxacin 400 mg IV every 12 h or 750 mg po every 12 h IV po	
Levofloxacin 750 mg every 24 h IV po	
Ceftriaxone 1 g every 24 h	

Abbreviations: IV, intravenous; po, by mouth; SMX-TMP, sulfamethoxazole-trimethoprim.

^a May also need to cover for methicillin-resistant *Staphylococcus aureus* with vancomycin 15 mg/kg every 12 h.

Table 1. Standard Deviation of Antilog Spore

Antilog Spore	Deviation	SD	CV
1000	100	10%	0.10
10000	1000	10%	0.10
100000	10000	10%	0.10
1000000	100000	10%	0.10
10000000	1000000	10%	0.10
100000000	10000000	10%	0.10
1000000000	100000000	10%	0.10

The Foot Examination

Standards of Care at Diagnosis & Annually

- Careful inspection
 - Skin, shoes, shape of foot
- Vascular integrity
 - Pulses
 - Capillary refill
- Neurological examination and function
 - Light touch (5.07/ 10g monofilament)
 - Vibratory sensation (128-Hz tuning fork)
 - Reflexes

Source: Staged Diabetes Management, 5th edition, Quick Guide, pages 7-26. All rights reserved. International Diabetes Center, Inc. All rights reserved.

Table 2. IWGDF and IDSA Classification of DFIs

Clinical Manifestation of Infection	PEDIS	IDSA
No signs or symptoms of infection	1	Uninfected
Infection present, as defined by presence of ≥2 of the following: erythema, local swelling or induration, local tenderness or pain, local warmth, purulent discharge	N/A	N/A
Local infection involving only skin and SC tissue; if erythema present, must be >0.5-≤2 cm around ulcer; exclude other causes of inflammatory response of skin	2	Mild
Local infection as described above, with erythema >2 cm or involving structures deeper than skin and SC tissues; no SIRS	3	Moderate
Local infection as described above, with signs of SIRS as manifested by ≥2 of the following: T >38°C or <36°C, HR >90 beats/min, RR >20 breaths/min or PaCO ₂ <32 mmHg, WBC count >12,000 or <4,000 cells/ml or ≥10% bands	4	Severe

DFI: diabetic foot infection; HR: heart rate; IDSA: Infectious Diseases Society of America; IWGDF: International Working Group on the Diabetic Foot; min: minute; N/A: not applicable; PaCO₂: partial pressure of carbon dioxide, arterial; PEDIS: perfusion, extent, depth, infection, sensation; RR: respiratory rate; SC: subcutaneous; SIRS: systemic inflammatory response syndrome; T: temperature. Source: References 6, 13.



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