

**VA Pharmaceutical Sciences CSU
PARENTERAL ANTIBIOTIC ALLERGY CROSS-SENSITIVITY CHART**

	Amikacin	Ampicillin	Azithromycin	Cefazolin	Cefotaxime	Cefoxitin	Ceftazidime	Ceftriaxone	Cefuroxime	Chloramphenicol	Ciprofloxacin	Clindamycin	Cloxacillin	Cotrimoxazole (Sulfa)	Daptomycin	Ertapenem	Erythromycin	Gentamicin	Imipenem	Levofloxacin	Meropenem	Metronidazole	Moxifloxacin	Penicillin	Piperacillin/Tazobactam	Streptomycin	Tigecycline	Tobramycin	Vancomycin
Amikacin	■																X								X		X		
Ampicillin		■		a	b	b	b	b	b			X			c		c	c		c			X	X					
Azithromycin			■													X													
Cefazolin		a		■	X	X	X	X	X			a			a		a	a		a	a			a	a				
Cefotaxime		b	X	■	X	X	X	X	X			b			c		c	c		c	c			b	b				
Cefoxitin		b	X	X	■	X	X	X	X			b			c		c	c		c	c			b	b				
Ceftazidime		b	X	X	X	■	X	X	X			b			c		c	c		c	c			b	b				
Ceftriaxone		b	X	X	X	X	■	X	X			b			c		c	c		c	c			b	b				
Cefuroxime		b	X	X	X	X	X	■	X			b			c		c	c		c	c			b	b				
Chloramphenicol										■																			
Ciprofloxacin											■									X			X						
Clindamycin												■																	
Cloxacillin		X		a	b	b	b	b	b			■			c		c	c		c			X	X					
Cotrimoxazole (Sulfa)													■																
Daptomycin														■															
Ertapenem		c		a	c	c	c	c	c			c			■			X	X		X			c	c				
Erythromycin			X													■													
Gentamicin	X																■								X		X		
Imipenem		c		a	c	c	c	c	c			c			X						X			c	c				
Levofloxacin											X										■		X						
Meropenem		c		a	c	c	c	c	c			c			X							■		c	c				
Metronidazole																													
Moxifloxacin											X									X				■					
Penicillin		X		a	b	b	b	b	b			X			c		c	c		c				■	X				
Piperacillin/Tazobactam		X		a	b	b	b	b	b			X			c		c	c		c			X	■					
Streptomycin	X																X									■		X	
Tigecycline																											■		
Tobramycin	X																X								X		■		
Vancomycin																												■	

a = Cefazolin may be safely administered to patients with history of allergy to penicillins including anaphylaxis, EXCEPT in those with severe delayed skin reactions - e.g. Stevens-Johnson syndrome, toxic epidermal necrolysis, drug reaction with eosinophilia and systemic symptoms (DRESS).

b = May consider using if non-anaphylactic reaction to the penicillin or cephalosporin; monitor closely

c = There is little potential for cross-reactivity between penicillin/cephalosporins and carbapenems; however, monitor closely if previous anaphylactic reaction to penicillins or cephalosporins

X = Potential for cross-sensitivity

Blank = Not cross-sensitive

Updated: Aug 2018 ASPIRES/PHARMACY