

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

KEY TO SYMBOLS:

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