

**Mild to Moderate Primary Peritonitis (Spontaneous Bacterial Peritonitis) OR**

**Mild to Moderate Biliary Tract Infection**

- Ceftriaxone 1g IV daily

*If anaphylaxis to PCN &/or Severe Cephalosporin allergy*

- Aztreonam 2g IV q8h  
Vancomycin pharmacy to dose

**Mild to Moderate Community-Acquired Secondary Peritonitis OR Diverticulitis**

- Ceftriaxone 1g IV daily  
Metronidazole 500mg IV q8h

*If anaphylaxis to PCN &/or Severe Cephalosporin allergy*

- Aztreonam 2g IV q8h  
Metronidazole 500mg IV q8h  
Vancomycin pharmacy to dose

**Severe Community-Acquired Peritonitis, Biliary Tract Infection, Diverticulitis OR**

**Health Care-Associated Secondary Peritonitis**

- Piperacillin/tazobactam 3.375g IV q8h (extended infusion)

**Health Care-Associated Secondary Peritonitis w/ Risk Factors\***

- Piperacillin/tazobactam 3.375g IV q8h (extended infusion)  
Vancomycin pharmacy to dose

**Infected Necrotizing Pancreatitis**

- CT scan with gas in the pancreas and/or percutaneous or surgical specimen with organisms evident on gram stain or culture
- Piperacillin/tazobactam 3.375g IV q8h (extended infusion)

*If severe PCN allergy but tolerates cephalosporins, replace piperacillin/tazobactam with:*

- Cefepime 1g IV q6h  
Metronidazole 500mg IV q8h

*If anaphylaxis to PCN &/or Severe Cephalosporin allergy, replace piperacillin/tazobactam with:*

- Aztreonam 2g IV q8h  
Metronidazole 500mg IV q8h  
Vancomycin pharmacy to dose

*\*Risk Factors: Known colonizer of MRSA, recent abdominal surgery, recent broad spectrum antibiotic use, patient hemodynamically unstable, peritoneal dialysis related peritonitis*