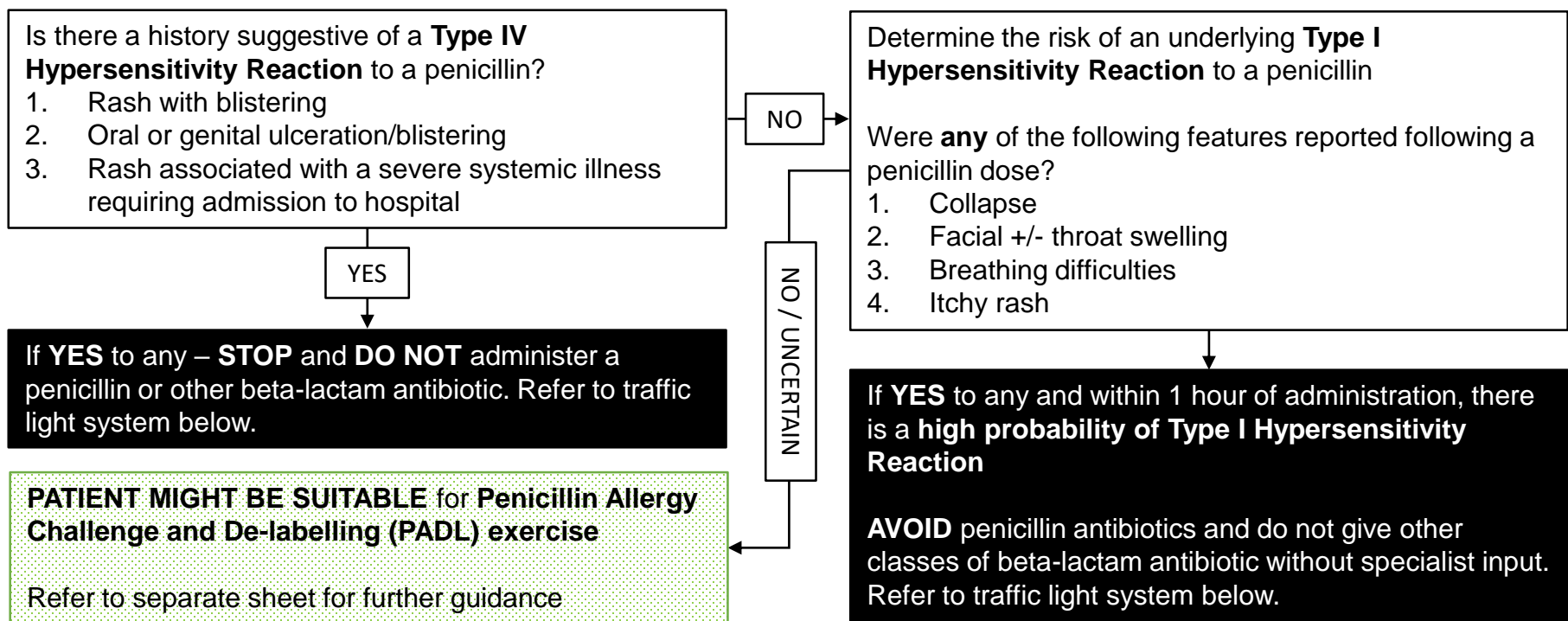
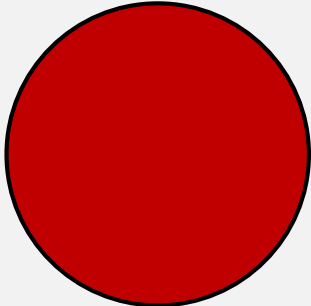
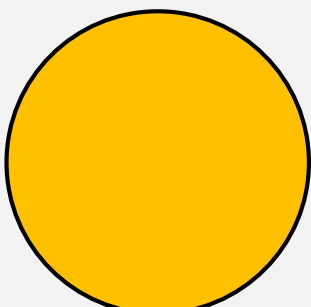
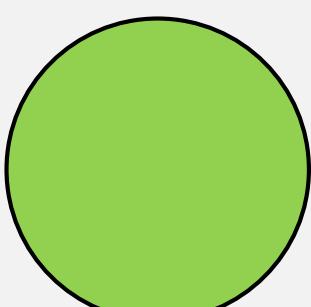


# DOES YOUR PATIENT HAVE A DOCUMENTED ALLERGY TO PENICILLIN?



|   |   |
|---|---|
|  | <p>These drugs are <b>CONTRAINDICATED</b> in suspected Type I or IV Hypersensitivity Reaction to any penicillin. Penicillin and Cephalosporins should not be prescribed to these patients</p> <p>Amoxicillin, Co-amoxiclav, Flucloxacillin, Pivmecillinam, Temocillin<br/>Penicillin V (Phenoxymethylpenicillin), Penicillin G (Benzylpenicillin)<br/>Piperacillin-Tazobactam (Tazocin), Ampicillin</p> <p><i>This is a not an exhaustive list!</i></p>                 |
|  | <p>These drugs are not for use in patients with severe penicillin allergy, unless at discretion of ID/Microbiology. Can be <b>USED WITH CAUTION</b> with history of minor allergy symptoms</p> <p>Cephalosporins: Cefalexin, Cefazolin, Cefadroxil, Cefixime, Cefotaxime, Cefuroxime, Ceftazidime, Ceftriaxone, Ceftaroline<br/>Other beta-lactams: Meropenem, Ertapenem, Aztreonam</p> <p><i>This is a not an exhaustive list!</i></p>                                 |
|  | <p>These drugs are <b>CONSIDERED SAFE</b> to use in patients with a penicillin allergy</p> <p>Azithromycin, Chloramphenicol, Clindamycin, Ciprofloxacin, Colistin, Co-trimoxazole, Dalbavancin, Doxycycline, Erythromycin, Fosfomycin, Gentamicin, Levofloxacin, Linezolid, Metronidazole, Nitrofurantoin, Ofloxacin, Rifampicin, Sodium Fusidate, Tetracycline, Teicoplanin, Tigecycline, Trimethoprim, Vancomycin</p> <p><i>This is a not an exhaustive list!</i></p> |

Did you know...

1. Approximately **10%** of the UK population have a documented penicillin allergy, the actual risk of anaphylactic reaction from a penicillin antibiotic is about **0.002%** of treated patients
2. Up to **90%** of patients who report a penicillin allergy may have a non-allergic reaction, such as gastrointestinal upset.
3. Mislabeling of patients with penicillin allergy leads to unnecessary use of broad-spectrum antibiotics which fosters **antimicrobial resistance** and increase the risk of adverse outcomes, such as clostridium difficile infection. These alternative antibiotics also tend to more expensive.
4. Correctly identifying penicillin non-allergy and **utilizing beta-lactam antibiotics where possible improves patient outcomes and reduces rates of antibiotic adverse events!**



Penicillin Allergy and De-labelling Full Guidance