DUHS Adult Daptomycin Dosing Recommendations							
Indication†	Usual Dose*	CrCl <30 mL/min	Intermittent HD (dose administered after dialysis)	CRRT			
Skin and skin structure (complicated)			6 mg/kg q48h OR				
Urinary tract infection (complicated)	4 mg/kg q24h 4 mg/kg q48l		4 mg/kg for 48h inter-dialytic session AND 6 mg/kg for 72h inter-dialytic session	4 mg/kg q48h			
Bacteremia (non-Staph aureus or enterococci)							
Intra-abdominal	6 mg/kg q24h	6 mg/kg q48h	6 mg/kg q48h OR 6mg/kg for 48hr inter-dialytic session AND	6 mg/kg q48h			
Febrile Neutropenia (<u>empiric</u> use for VRE colonization or history of VRE)	0, 0, 1	3 0, 5 4	8 mg/kg for 72hr inter-dialytic session				
Bacteremia – (Staph aureus or							
Enterococci)			0 mg/kg a40h				
Endocarditis	8 mg/kg q24h	8 mg/kg q48h	8 mg/kg q48h OR 8mg/kg for 48hr inter-dialytic session AND 10 mg/kg for 72hr inter-dialytic session	8 mg/kg q48h [≠]			
Bone and Joint							
VRE bacteremia			10 mg/kg q48h				
Daptomycin SDD E. faecium	40 // 24	40 // 40/	OR				
Invasive, refractory enterococcal	10 mg/kg q24h	10 mg/kg q48h	10 mg/kg for 48hr inter-dialytic session AND	10 mg/kg q48h [≠]			
infections			12 mg/kg for 72hr inter-dialytic session				
Pneumonia	DO NOT LICE! D-	mbanassalm la langetissets		:			
Meningitis	DO NOT USE! Daptomycin is inactivated by lung surfactant and does not adequately cross the blood brain barrier.						

^{*}use total body weight (TBW). In obese patients (BMI >/= 30), use Adjusted Body Weight (ABW).

All daptomycin orders require ID consult with exceptions noted in the Febrile Neutropenia protocols. All daptomycin orders should be rounded to the nearest 50 mg in accordance with the dose-rounding protocol.

[‡]Consider q24h dosing in CRRT for patient receiving high effluent rates (ex. CVVHD >30ml/kg/hr) or those not responding to standard dosing, with close CK monitoring

DUHS Pediatric Daptomycin Dosing Recommendations

Criteria & Principles:

- Not first-line in pediatrics, limited dosing and safety data available
- Dose based on age and indication (see charts below)
- For patients > 17 yrs, refer to adult dosing guidelines
- ID Consult will make dosing recommendations for indications not listed below

Adjustment of Dose & Administration:

Adjustment required for creatinine clearance < 30 mL/min/1.73m²

Indication-Specific Adjustment:

Based on total body weight

Indication†	Recomm (1-17 yea						
	1 - <2 years	2 - 6 years	7 - 11 years	12 - 17 years	CrCl <30 mL/min including hemodialysis and CAPD		
Skin and skin structure (complicated)	10 mg/kg q24h	9 mg/kg q24h	7 mg/kg q24h	5 mg/kg q24h			
Urinary tract infection (complicated)	infused over 60 minutes	infused over 60 minutes	infused over 30 minutes	infused over 30 minutes	Use age- and		
Bacteremia Intra-abdominal	12 mg/kg q24h infused over 60 minutes	12 mg/kg q24h infused over 60 minutes	9 mg/kg q24h infused over 30 minutes	7 mg/kg q24h infused over 30 minutes	indication-based dosing (mg/kg) q48h		
Pneumonia	Do not use! Daptomycin is inactivated by lung surfactant and does not adequately cross the						
Meningitis	blood brain barrier.						

Drug-Specific Information:

- Dosing <12 months of age has not been established; however, daptomycin 6 mg/kg/dose IV q12h has been studied and shown to provide comparable peak and trough concentrations to adult patients treated with 4mg/kg/dose every 24 h
- Incompatible with dextrose containing solution
- Monitor CPK at baseline and weekly

References:

- 1. Arrieta Ac, Bradley JS, Popejoy MW, et al. Randomized Multicenter Study Comparing Safety and Efficacy of Daptomycin Versus Standard of Care in Pediatric Patients with Staphylococcal Bacteremia. Pediatr Infect Dis J. 2018;37:893-900.
- 2. Bradley J, Glasser C, Patino H, et al. Daptomycin for Complicated Skin Infections: A Randomized Trial. Pediatrics 2017;139(3):e20162477.