

# Targeted Duration of Adult Antimicrobial Therapy for Outpatients

- Duration recommendations are provided as a general guideline for therapy with a goal of minimizing unintended consequences to the patient.
- Need more information?** Visit [customid.org](http://customid.org) for treatment and dosing guidance by diagnosis.

INFECTION	TARGETED DURATION
<i>Clostridium difficile</i>	Discontinue offending antibiotic if receiving and possible then treat 10 days
<b>Skin and skin structure infections</b>	
Cellulitis, uncomplicated	5 days
Cellulitis, complicated	7 days
<b>Diabetic foot infections</b>	
Soft tissue only, mild	1 week (less if clinical signs & symptoms of infection have resolved)
Soft tissue only, moderate	1 week
Soft tissue only, severe	2 weeks
<b>Respiratory tract infections</b>	
Bacterial rhinosinusitis	5 days
Streptococcal pharyngitis	Beta-lactam, clindamycin, clarithromycin: 10 days Azithromycin: 5 days
COPD exacerbation	No change in character of sputum: no antibiotics 5 days if increase in volume and purulence of sputum
Community-acquired pneumonia (CAP)	3-5 days Duration determination: ensure afebrile for 48-72 h and have ≤1 CAP-associated sign of clinical instability
<b>Genitourinary infections (Bacterial) UTI: Urinary Tract Infection; uUTI: uncomplicated; cUTI: complicated</b>	
<b>uUTI</b> Confined to bladder in afebrile women or men; CA-UTI WITHOUT systemic symptoms	Nitrofurantoin: 5 days Trimethoprim/sulfamethoxazole: 3 days Fluoroquinolones: 3 days Beta-lactams: 7 days
<b>cUTI</b> Upper Tract, above the bladder including kidney and ureters; CA-UTI WITH systemic symptoms <ul style="list-style-type: none"> <li>Pyelonephritis</li> <li>Febrile or bacteremic UTI</li> </ul>	Improving clinically on effective therapy <ul style="list-style-type: none"> <li>5-7 days fluoroquinolone</li> <li>7 days non-fluoroquinolone</li> </ul>
Prostatitis	Acute: 2 weeks; Chronic: 4-6 weeks
<b>Genitourinary infections (Candida sp.)</b>	
Vulvovaginal candidiasis	Fluconazole 150 mg once
Asymptomatic candiduria	Treatment not recommended unless patient is high risk: Neutropenic, low birth-wt neonates, or undergoing invasive urologic procedures
Symptomatic candiduria	Fluconazole: 14 days Fluconazole-resistant strain: amphotericin B x 1-7 days or flucytosine x 7 days
Candida pyelonephritis	14 days

## References:

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