

Cellulitis

POAC Provider Check List

- Area marked with washable pen
- No exclusions to Community Pathway
- No allergies or hypersensitivity to the prescribed medications
- Patient information given
- Follow up appointment arranged
- Clinical notes sent to A&M Centre if follow up required over weekend
- Referral to District Nursing Team (if appropriate) and script
Phone: (06) 350 8100 **Email:** districtnursingreferrals@midcentraldhb.govt.nz
- Cellulitis Medications Pack checked against script.

CrCl (mL/min) / eGFR	Cefazolin dose	Probenecid dose
> 60	2 g every 24 hours	1 g daily
40 to 60	2 g every 24 hours	No probenecid
20 to 40	1 g every 24 hours	No probenecid
< 20	500 mg every 24 hours	No probenecid

- Prescriber to ensure correct patient details on Cellulitis Medications Pack.
- Medications **dispensed by DOCTOR** and given to patient for home administration.