

Brain Abscess

Empiric therapy:

1. Neurosurgical consultation
2. Obtain blood cultures
3. Empiric antibiotics:
 - a. IV Vancomycin (target trough 15 - 20 mcg/mL) + ceftriaxone **2g IV q12h** + metronidazole 500mg IV/PO q6-8h
 - b. If concern for extension from otitis externa, use an antipseudomonal cephalosporin (cefepime 2g IV Q8h) instead of ceftriaxone
4. Infectious Diseases consultation

*Aminoglycosides, macrolides, tetracyclines (e.g. doxycycline), clindamycin, beta-lactam/beta-lactamase combinations (e.g. Zosyn) and first-generation cephalosporins (e.g. cefazolin) should **NOT** be used as they do not cross the blood-brain barrier at high concentration.*

Brain abscesses are generally polymicrobial, therefore broad-spectrum antibiotics are indicated

Consider HIV testing in any patient with a brain lesion.

Antibiotic Duration: Based on surgical drainage and Infectious Diseases guidance