

Epidural abscess

Empiric therapy:

1. Consult Ortho-Spine or Neurosurgery. Surgical decompression/drainage with systemic antibiotics is the treatment of choice for many patients (acute or progressive neurologic deficits, spinal instability, enhancing lesions on MRI, or disease progression on antibiotic therapy)
2. Antibiotics should be started as soon as the diagnosis of epidural abscess is suspected, immediately following the collection of two sets of blood cultures
 1. **Vancomycin** 15-20mg/kg IV q8-12h (adjusted for renal function) + **ceftriaxone** 2g IV q24h (or q12hr if there is secondary meningitis)
 2. Use cefepime 2g IV q8h instead of ceftriaxone if concern for Pseudomonas
3. Infectious Diseases consultation is strongly encouraged

Antibiotic duration: Infectious Diseases guidance