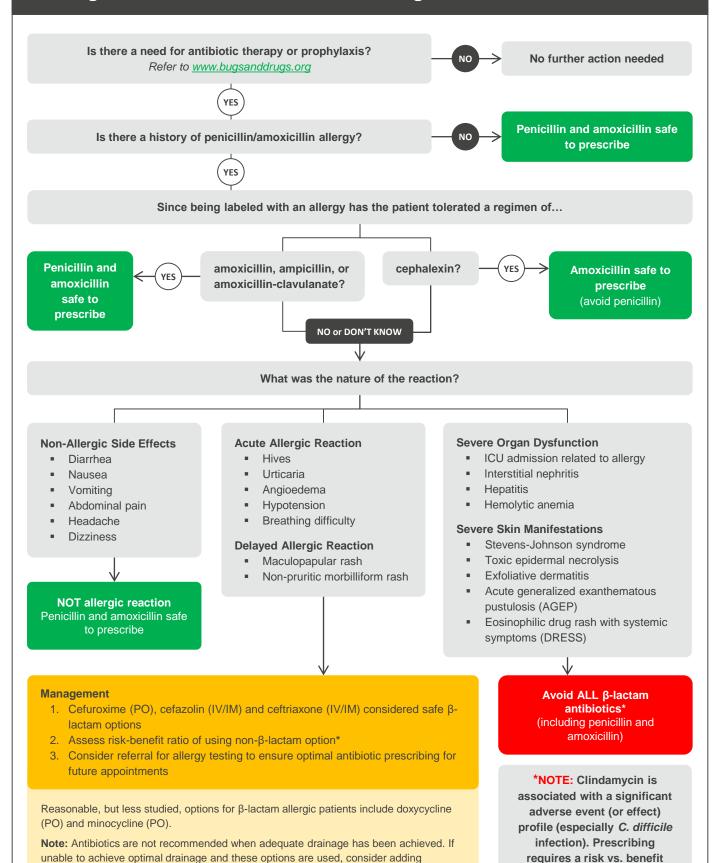
# Management of Penicillin/Amoxicillin Allergic Patients in Dental Practice



assessment.

metronidazole for anaerobic coverage.

## **Guide to Penicillin/Amoxicillin Allergy Management Tool**

- 1 Refer to <a href="www.bugsanddrugs.org">www.bugsanddrugs.org</a> for best practice recommendations and to confirm whether your patient requires an antibiotic.
- 2 If your patient states they have a penicillin allergy, consider asking the following questions:

#### Do you have an allergy to penicillin?

- True penicillin allergy is infrequent. About 10% of people report allergy to penicillin but less than 1% of people have a true allergy.
- Penicillin allergies are not genetic; a relative with an allergy does not prohibit use.

When was the last time you had penicillin? Half of patients with IgE-mediated penicillin allergy lose their sensitivity after five years (80% after 10 years).

What was the nature of your reaction? In children, a rash occurring during a viral infection and concurrent amoxicillin therapy is not indicative of an allergy.

Have you previously tolerated amoxicillin, ampicillin, amoxicillin-clavulanate, or cephalexin? See reverse side for recommendations in prescribing based on past history of antibiotic use.

Were you ever hospitalized due to a penicillin reaction? See reverse side for contraindications for penicillin based on medical history.

- Use the patient information to follow the allergy management tool on the reverse side.
- Provide the patient with education materials (available at <a href="www.antibioticwise.ca">www.antibioticwise.ca</a>).

## Seven actions you can take to fight antibiotic resistance

- 1. Don't prescribe antibiotics for irreversible pulpitis.
- 2. Don't prescribe antibiotics for acute dental abscess without signs of systemic involvement.
- 3. Don't give prophylactic antibiotics prior to dental procedures to patients with total joint replacement.
- 4. Limit pre-operative antibiotics to a single dose.
- 5. Don't give prophylactic antibiotics to patients with non-valvular cardiac or other indwelling devices.
- 6. Use penicillin rather than amoxicillin as drug of first choice for most dental indications.
- 7. Use this allergy management tool to avoid overuse of clindamycin.

### For more information

- Patient information resources available to print from <u>www.antibioticwise.ca</u>
- References available at www.bccdc.ca
- Please direct any comments or feedback on allergy management tool to info@antibioticwise.ca



