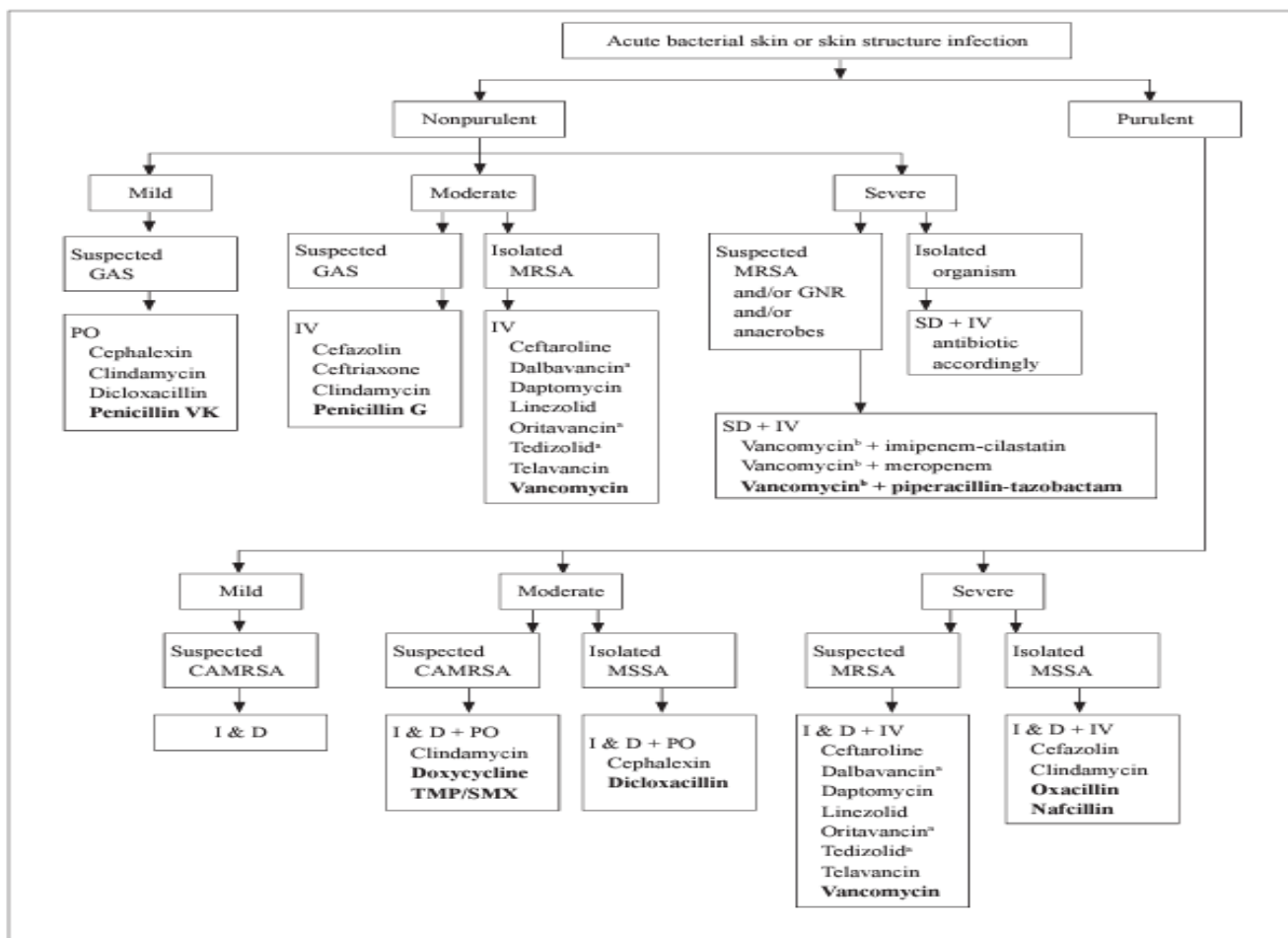# Bacterial Skin and Soft Tissues Infections

CHI Formulary Treatment algorithm

Treatment algorithm- January 2024

Supporting treatment algorithms for the clinical management of

Bacterial Skin and Soft Tissues Infections

Figures 1 and 2 outline a comprehensive treatment algorithm on **Bacterial Skin and Soft Tissues Infections**, aimed at addressing the different lines of treatment after thorough review of medical and economic evidence by CHI committees.

For further evidence, please refer to CHI **Bacterial Skin and Soft Tissues Infections** full report. You can stay updated on the upcoming changes to our formulary by visiting our website at https://chi.gov.sa/AboutCCHI/CCHIprograms/Pages/IDF.aspx

Our treatment algorithm offers a robust framework for enhancing patient care and optimizing treatment outcomes across a range of treatment options, holding great promise for improving healthcare delivery.
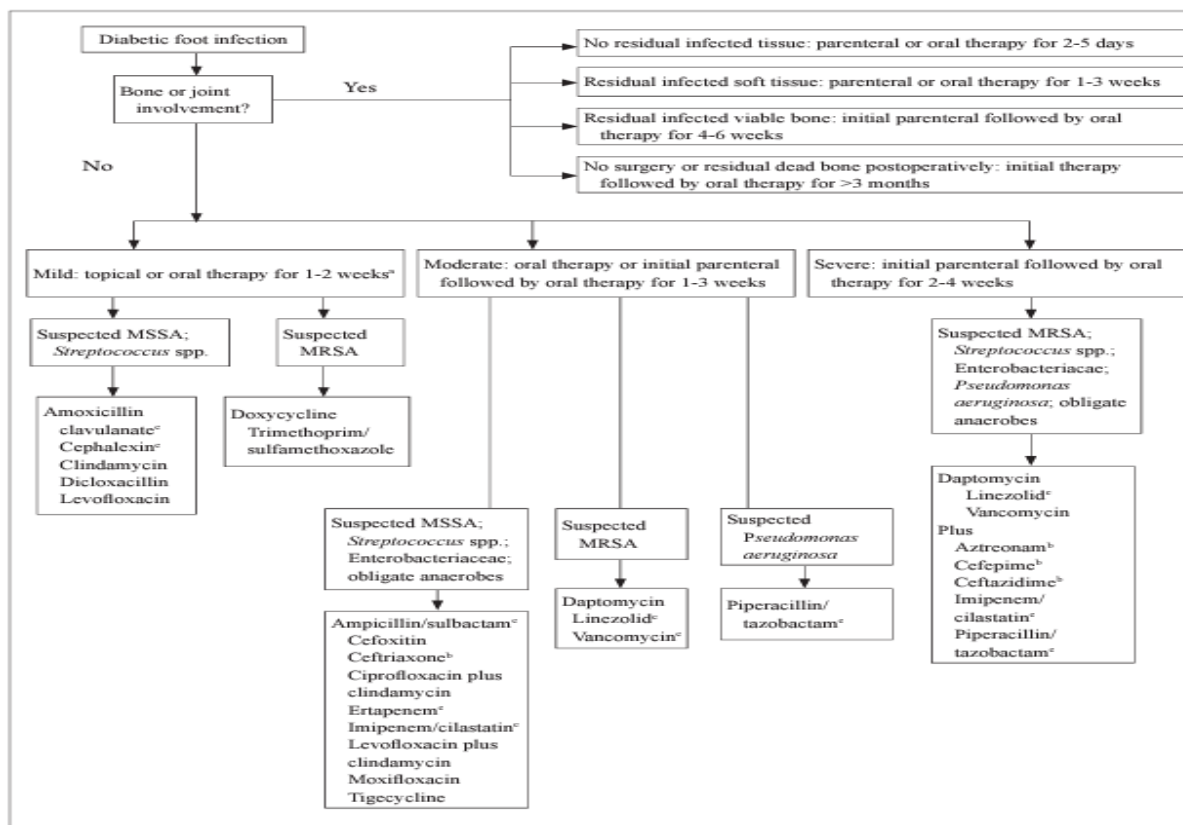

Figure 1: General Approach to the Management of Acute Bacterial Skin and Skin Structure Infections. Bolding Indicates Antibiotic of Choice

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1 [a] Not included in the 2014 IDSA guidelines for the management of skin and soft tissue infections.
[b] An alternative new anti-MRSA antibiotic can also be used.

Figure 2: General approach to the Management of Diabetic Foot Infection. Note: Agents Similar to those Listed in this Algorithm Can Be Substituted Based on Clinical, Epidemiologic, and Financial Considerations

CAMRSA = community-associated methicillin-resistant Staphylococcus aureus; GAS = Group A β-hemolytic Streptococcus; GNR = gram-negative rods; I & D = incision and drainage; IV = intravenous; MRSA = methicillin-resistant Staphylococcus aureus; MSSA = methicillin-sensitive Staphylococcus aureus; PO = oral; SD = surgical debridement. Information from: Stevens DL, Bisno AL, Chambers HF, et al. Practice guidelines for the diagnosis and management of skin and soft tissue infections: 2014 update by the Infectious Diseases Society of America. Clin Infect Dis 2014;59:e10-52.

[2] [a]May extend up to 4 weeks if slow to resolve. [b]Consider adding an antibiotic with activity against obligate anaerobes cAgents commonly used as comparators in clinical trials for the treatment of diabetic foot infections. MRSA = methicillin-resistant Staphylococcus aureus; MSSA = methicillin-sensitive Staphylococcus aureus. Information from: Lipsky BA, Berendt AR, Cornia PB, et al. 2012 Infectious Diseases Society of America clinical practice guideline for the diagnosis and treatment of diabetic foot infections. Clin Infect Dis 2012;54:e132-73.