

# CEFAZOLIN Use in Patients with a History of $\beta$ -Lactam Allergy

## REPORTED REACTION TO A $\beta$ -LACTAM

### LOW RISK

History of a **NONSEVERE (NONANAPHYLACTIC)** or **UNKNOWN PCN or CEPH** allergy

#### **Benign cutaneous rash**

*Maculopapular exanthem or morbilliform cutaneous eruption occurring several hours to days after initial therapy without mucus membrane\* involvement, lasting several days*

#### **Mild remote urticarial rash**

*Transient hives lasting < 24 hrs and occurring  $\geq$  5 years ago without systemic symptoms and no blistering or exfoliation of the skin or mucus membrane\* involvement*

#### **Unknown allergy**

*Not aware of the allergy label or clinical signs or symptoms of a reaction*

### MODERATE RISK

History of a **REMOTE PCN or CEPH** allergy concerning for a **non-life-threatening IgE-mediated feature (excluding anaphylaxis<sup>#</sup>)**:

**An IgE feature occurring within minutes to a few hours  $\geq$  10 years ago**

#### Cutaneous Symptoms:

*itching, flushing, hives, angioedema*

#### Respiratory System:

*shortness of breath, rhinitis, wheezing, or bronchospasm*

#### Cardiovascular System:

*arrhythmia, syncope, or chest tightness*

**OR**

#### GI System:

*nausea, vomiting, diarrhea, or abdominal pain*

### HIGH RISK

History of **ANAPHYLAXIS<sup>#</sup>** to penicillins

**Severe delayed (days to weeks) immunologic reactions**  
*SCARs<sup>^</sup>  
Serum sickness  
Drug fever*

**Organ-specific reactions**  
*Drug-induced liver injury  
Acute interstitial nephritis  
Hemolytic anemia*

**Recurrent reaction with re-exposure**

**History of ANAPHYLAXIS<sup>#</sup> to cephalosporins**

**Reported reaction to cefazolin**

## USE CEFAZOLIN

Cefazolin may be given without prior testing in patients with history of anaphylaxis to a penicillin

## AVOID CEFAZOLIN

Use an alternative antibiotic

#### References:

Khan DA, Banerji A, Blumenthal KG, et al. Drug allergy: A 2022 practice parameter update. *J Allergy Clin Immunol* 2022.

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Sexton ME, Kuruvilla ME. Management of Penicillin Allergy in the Perioperative Setting. *Antibiotics* 2024.

Sousa-Pinto B, Blumenthal KG, Courtney L, et al. Assessment of the Frequency of Dual Allergy to Penicillins and Cefazolin: A Systematic Review and Meta-analysis. *JAMA Surgery* 2021.

\* **Mucus membrane:** the eyes, mouth, nose, genitourinary.

<sup>#</sup> **Anaphylaxis:** life threatening multi-system allergic reaction (CUTANEOUS + RESP, GI and/or CARDIOVASCULAR systems) requiring prompt treatment with epinephrine, supportive care, and adjunctive antihistamines, corticosteroids, and albuterol, as needed. [Back to](#)

<sup>^</sup> **Severe cutaneous adverse reactions (SCARs):** drug reaction with eosinophilia and systemic symptoms (DRESS), acute generalized exanthematus pustulosis (AGEP), Stevens-Johnson syndrome (SJS)/toxic epidermal necrolysis (TEN). [Assessment Pathway](#)