For IV infusion only

To reduce the development of drug-resistant bacteria and maintain the effectiveness of Doxy-ycline, it is essential that Doxycycline for Injection, USP is used only to treat infections that are strongly suspected to be caused by bacteria.

**CROUPY PHARYNGITIS**

Captoprime hydrochloride, Moxalactam, Penicillin

**Pneumococcal pneumonia**

Tetracycline hydrochloride, Ceftriaxone, Cefotaxime

**Paracoccidioidomycosis**

Amphotericin B, Itraconazole

**broncho- and rhinoscleroma**

Doxycycline, Azithromycin

**rubella**

Doxycycline, Rifampin

**rheumatic fever.**

Doxycycline, Penicillin

**Acinetobacter species**

Doxycycline, Piperacillin/Tazobactam

**Bacillus anthracis**

Doxycycline, Rifampin

**Brucella species**

Doxycycline, Azithromycin

**Pasteurella pestis**

Doxycycline, Ceftriaxone

**Shigella**

Doxycycline, Ciprofloxacin

**Streptococcus pneumoniae**

Doxycycline, Penicillin

**Streptococcus faecalis**

Doxycycline, Vancomycin

**Tetracycline**

Doxycycline, Oxytetracycline

**tuberculosis**

Doxycycline, Ethambutol

*Note: The current absence of resistance isolates precludes defining any results other than "Susceptible." If isolates yielding MIC results should provide the results of the standardized susceptibility test procedures required pathogens. These reports should be interpreted according to the criteria provided in Table 2. For the diffusion technique using the 30 mcg doxycycline disc, the criteria in Table 2 should be achieved.

**INDICATIONS AND USAGE:**

To reduce the development of drug-resistant bacteria and maintain the effectiveness of Doxy-ycline hydrochloride, Moxalactam, Penicillin is used only to treat infections that are strongly suspected to be caused by bacteria.
discontinuation of the drug alone. In moderate to severe cases, discontinuation should be given in a manner that allows for smooth withdrawal of the drug. It is generally recommended that patients receive a full course of therapy unless treatment is contraindicated.

Potentially fatal anaphylactic reactions have been reported in some individuals taking tetracyclines. Patients with a history of drug allergy should also be monitored closely.

Inhalation should be avoided at all times, and if accidental exposure occurs, those affected should be taken to the nearest hospital immediately.

INFORMATION ON TREATMENT OF OVERDOSE:

Considerations for overdose treatment depend on the particular tetracycline involved. In general, symptomatic treatment is recommended, along with supportive care such as fluid replacement and monitoring of vital signs. In some cases, specific antidotes may be available. Always consult a healthcare professional for guidance on how to manage an overdose.

REFERENCES:
