

IV / Central Line Access - Hemodynamics Monitoring

IV / Central Line Access

<input type="checkbox"/> Initiate and maintain IV	
<input type="checkbox"/> Ensure / Initiate and maintain IV access	Routine, Once As needed immediately insert 2 large bore (at least 20 gauge) peripheral IV lines or call attending MD for STAT central line, intraosseus (IO) or other access.
<input type="checkbox"/> sodium chloride 0.9 % flush	10 mL, intravenous, every 12 hours scheduled
<input type="checkbox"/> sodium chloride 0.9 % flush	10 mL, intravenous, PRN, line care

Hemodynamic Monitoring

****If patient has IJ or Subclavian Central Venous Line****

<input type="checkbox"/> Hemodynamic Monitoring - CVP	Routine, Every hour For 999 Occurrences Measure: CVP
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Nursing

Nursing - HMM, HMSL and HMB

<input checked="" type="checkbox"/> Vital signs - T/P/R/BP	Routine, Every hour For 3 Hours Monitor every 1 hour for 3 hours, or more frequently as indicated by clinical condition and assessment findings, then re-evaluate frequency of vitals assessment.
<input checked="" type="checkbox"/> Pulse oximetry	Routine, Daily Current FIO2 or Room Air: Place SpO2 monitor (near infrared spectroscopy)
<input checked="" type="checkbox"/> Daily weights	Routine, Daily Notify provider if weight is over 5 pounds from initial dry weight
<input checked="" type="checkbox"/> Activity: Bed rest initially then progress as tolerated	Routine, Until discontinued, Starting S Specify: Other activity (specify) Other: Bed rest initially then progress activity as tolerated
<input checked="" type="checkbox"/> Patient education	Routine, Prior to discharge Patient/Family: Education for: Other (specify) Specify: Sepsis Education

Nursing - HMWB and HMTW

<input checked="" type="checkbox"/> Vital signs - T/P/R/BP	Routine, Every hour For 3 Hours Monitor every 1 hour for 3 hours, or more frequently as indicated by clinical condition and assessment findings, then re-evaluate frequency of vitals assessment.
<input checked="" type="checkbox"/> Pulse oximetry	Routine, Daily Current FIO2 or Room Air: Monitor every 1 hour for 3 hours, or more frequently as indicated by clinical condition and assessment findings, then re-evaluate frequency of pulse oximetry assessment. Current FIO2 or Room Air: Place SpO2 monitor (near infrared spectroscopy).
<input checked="" type="checkbox"/> Daily weights	Routine, Daily Notify provider if weight is over 5 pounds from initial dry weight
<input checked="" type="checkbox"/> Activity: Bed rest initially then progress as tolerated	Routine, Until discontinued, Starting S Specify: Other activity (specify) Other: Bed rest initially then progress activity as tolerated

<input checked="" type="checkbox"/> Patient education	Routine, Prior to discharge Patient/Family: Education for: Other (specify) Specify: Sepsis Education
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Nursing - HMW and HMSTC

<input checked="" type="checkbox"/> Vital signs - T/P/R/BP	Routine, Every hour For 3 Hours Monitor every 1 hour for 3 hours, or more frequently as indicated by clinical condition and assessment findings, then re-evaluate frequency of vitals assessment.
<input checked="" type="checkbox"/> Pulse oximetry	Routine, Daily Current FIO2 or Room Air: Place SpO2 monitor (near infrared spectroscopy)
<input checked="" type="checkbox"/> Daily weights	Routine, Daily Notify provider if weight is over 5 pounds from initial dry weight
<input checked="" type="checkbox"/> Activity: Bed rest initially then progress as tolerated	Routine, Until discontinued, Starting S Specify: Other activity (specify) Other: Bed rest initially then progress activity as tolerated
<input checked="" type="checkbox"/> Patient education	Routine, Prior to discharge Patient/Family: Both Education for: Other (specify) Specify: Sepsis Education
<input type="checkbox"/> Insert and maintain Foley	
<input type="checkbox"/> Insert Foley catheter	Routine, Once Indication: Type: Temperature Sensing Size: Urinometer needed:
<input type="checkbox"/> Foley Catheter Care	Routine, Until discontinued, Starting S Orders: Maintain

Nursing - HMCL

<input checked="" type="checkbox"/> Vital signs - T/P/R/BP	Routine, Every hour For 3 Hours Monitor every 1 hour for 3 hours, or more frequently as indicated by clinical condition and assessment findings, then re-evaluate frequency of vitals assessment.
<input checked="" type="checkbox"/> Pulse oximetry	Routine, Daily Current FIO2 or Room Air: Place SpO2 monitor (near infrared spectroscopy)
<input checked="" type="checkbox"/> Daily weights	Routine, Daily Notify provider if weight is over 5 pounds from initial dry weight
<input checked="" type="checkbox"/> Activity: Bed rest initially then progress as tolerated	Routine, Until discontinued, Starting S Specify: Other activity (specify) Other: Bed rest initially then progress activity as tolerated
<input checked="" type="checkbox"/> Patient education	Routine, Prior to discharge Patient/Family: Education for: Other (specify) Specify: Sepsis Education
<input checked="" type="checkbox"/> Telemetry	"And" Linked Panel
<input checked="" type="checkbox"/> Telemetry monitoring	Routine, Continuous Order: Place in Centralized Telemetry Monitor: EKG Monitoring Only (Telemetry Box) Reason for telemetry: Can be off of Telemetry for tests and baths? Yes

<input checked="" type="checkbox"/> Telemetry Additional Setup Information	Routine, Continuous High Heart Rate (BPM): 120 Low Heart Rate(BPM): 50 High PVC's (per minute): 10 High SBP(mmHg): 175 Low SBP(mmHg): 100 High DBP(mmHg): 95 Low DBP(mmHg): 40 Low Mean BP: 60 High Mean BP: 120 Low SPO2(%): 94
<input type="checkbox"/> Insert and maintain Foley	
<input type="checkbox"/> Insert Foley catheter	Routine, Once Indication: Type: Temperature Sensing Size: Urinometer needed:
<input type="checkbox"/> Foley Catheter Care	Routine, Until discontinued, Starting S Orders: Maintain

Notify

<input type="checkbox"/> Notify Provider/Sepsis Team:	Routine, Until discontinued, Starting S, -for MAP LESS than 65 or GREATER than 80 -for heart rate LESS than 60 or GREATER than 120 -for urine output LESS than 30 mL/hour -immediately for any acute changes in patient condition (mental status, vital signs)
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Initial Management of Suspected Sepsis

Blood Cultures

<input checked="" type="checkbox"/> Blood culture x 2	"And" Linked Panel
<input checked="" type="checkbox"/> Blood Culture (Aerobic & Anaerobic)	Once, Blood Collect STAT before antibiotics given. Blood cultures should be ordered x2, with each set drawn from a different peripheral site. If unable to draw both sets from a peripheral site, one set may be drawn from a central line; an IV line should NEVER be used.
<input checked="" type="checkbox"/> Blood Culture (Aerobic & Anaerobic)	Once, Blood Collect STAT before antibiotics given. Blood cultures should be ordered x2, with each set drawn from a different peripheral site. If unable to draw both sets from a peripheral site, one set may be drawn from a central line; an IV line should NEVER be used.

Lactic Acid - STAT and repeat 2 times every 3 hours

<input checked="" type="checkbox"/> Lactic acid level, SEPSIS - Now and repeat 2x every 3 hours	Now and repeat 2x every 3 hours For 3 Occurrences STAT - SPECIMEN MUST BE DELIVERED IMMEDIATELY TO THE LABORATORY. Repeat lactic acid in 3 hours.
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Lactic Acid - STAT and repeat 2 times every 3 hours

<input checked="" type="checkbox"/> Lactic acid level, SEPSIS - Now and repeat 2x every 3 hours	Now and repeat 2x every 3 hours For 3 Occurrences STAT - SPECIMEN MUST BE DELIVERED IMMEDIATELY TO THE LABORATORY. Repeat lactic acid in 3 hours.
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Lactic Acid - STAT and repeat 2 times every 3 hours

unselect if already collected

<input checked="" type="checkbox"/> Lactic acid, I-Stat - Now and repeat 2x every 3 hours	Now and repeat 2x every 3 hours For 3 Occurrences STAT. Repeat lactic acid in 3 hours.
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Crystalloids for Fluid Resuscitation for hypotension, lactic acid greater than 2.0, or any one sign or symptom of acute organ dysfunction) (Single Response)

The target fluid bolus volume can be calculated using the ideal weight as long as the provider indicates that the patient is obese. If the provider does not indicate obesity, the actual weight will be used to calculate the target volume.

Is your patient obese? (BMI GREATER than 30)

Yes (Single Response) (Selection Required)

Given your response of "Yes", you have the option to dose IV fluids using Ideal Body Weight (IBW).

Calculate dose using Ideal Body Weight (IBW) (Single Response)

lactated ringers IV bolus and infusion + Vital Signs - For Obese Patients (Single Response)

lactated ringers IV bolus + Vitals Every 15 Minutes x 4 Hours - For Obese Patients **"And" Linked Panel**

lactated ringers bolus 30 mL/kg, intravenous, once, For 1 Doses
Reassess patient after IV fluid bolus given.
If target not met (MAP 65 to 70 mmHg or SBP GREATER than 90 mmHg), notify ordering provider prior to administration of second bolus.
Doses start immediately.
Notify provider immediately upon completion of fluid bolus administration.
Provider Response: YES, I choose to use the Ideal Body Weight (IBW), BMI GREATER than 30

Sepsis vital signs - T/P/R/BP STAT, Every 15 min For 4 Hours

lactated ringers IV infusion - For Obese Patients **"And" Linked Panel**

lactated ringer's infusion 126 mL/hr, intravenous, continuous
Reassess patient after 1 L of IV fluid given.
If target not met (MAP 65 to 70 mmHg or SBP GREATER than 90 mmHg), notify ordering provider prior to administration of additional fluids.
Doses start immediately.
Notify provider immediately upon completion of administration of 1 L of fluid.

sodium chloride 0.9% bolus + Vital Signs OR infusion - For Obese Patients (Single Response)

sodium chloride 0.9% bolus + Vitals Every 15 Minutes x 4 Hours - For Obese Patients **"And" Linked Panel**

sodium chloride 0.9 % bolus 30 mL/kg, intravenous, once, For 1 Doses
Reassess patient after IV fluid bolus given.
If target not met (MAP 65 to 70 mmHg or SBP GREATER than 90 mmHg), notify ordering provider prior to administration of second bolus.
Doses start immediately.
Notify provider immediately upon completion of fluid bolus administration.
Provider Response: YES, I choose to use the Ideal Body Weight (IBW), BMI GREATER than 30

Sepsis vital signs - T/P/R/BP STAT, Every 15 min For 4 Hours

sodium chloride 0.9% infusion - For Obese Patients **"And" Linked Panel**

sodium chloride 0.9% infusion 126 mL/hr, intravenous, continuous
Reassess patient after 1 L of IV fluid given.
If target not met (MAP 65 to 70 mmHg or SBP GREATER than 90 mmHg), notify ordering provider prior to administration of additional fluids.
Doses start immediately.
Notify provider immediately upon completion of administration of 1 L of fluid.

() Do NOT calculate dose using Ideal Body Weight (IBW) (Single Response)	
() lactated ringers IV bolus + Vital Signs OR infusion (Single Response)	
() lactated ringers IV bolus + Vitals Every 15 Minutes x 4 Hours	"And" Linked Panel
<input type="checkbox"/> lactated ringers bolus	30 mL/kg, intravenous, once, For 1 Doses Reassess patient after IV fluid bolus given. If target not met (MAP 65 to 70 mmHg or SBP GREATER than 90 mmHg), notify ordering provider prior to administration of second bolus. Doses start immediately. Notify provider immediately upon completion of fluid bolus administration.
<input type="checkbox"/> Sepsis vital signs - T/P/R/BP	STAT, Every 15 min For 4 Hours
() lactated ringers IV infusion	"And" Linked Panel
<input type="checkbox"/> lactated ringer's infusion	126 mL/hr, intravenous, continuous Reassess patient after 1 L of IV fluid given. If target not met (MAP 65 to 70 mmHg or SBP GREATER than 90 mmHg), notify ordering provider prior to administration of additional fluids. Doses start immediately. Notify provider immediately upon completion of administration of 1 L of fluid.
() sodium chloride 0.9% bolus + Vital Signs OR infusion - For Obese Patients (Single Response)	
() sodium chloride 0.9% bolus + Vitals Every 15 Minutes x 4 Hours - For Obese Patients	"And" Linked Panel
<input type="checkbox"/> sodium chloride 0.9 % bolus	30 mL/kg, intravenous, once, For 1 Doses Reassess patient after IV fluid bolus given. If target not met (MAP 65 to 70 mmHg or SBP GREATER than 90 mmHg), notify ordering provider prior to administration of second bolus. Doses start immediately. Notify provider immediately upon completion of fluid bolus administration.
<input type="checkbox"/> Sepsis vital signs - T/P/R/BP	STAT, Every 15 min For 4 Hours
() sodium chloride 0.9% infusion - For Obese Patients	"And" Linked Panel
<input type="checkbox"/> sodium chloride 0.9% infusion	126 mL/hr, intravenous, continuous Reassess patient after 1 L of IV fluid given. If target not met (MAP 65 to 70 mmHg or SBP GREATER than 90 mmHg), notify ordering provider prior to administration of additional fluids. Doses start immediately. Notify provider immediately upon completion of administration of 1 L of fluid.
() Patient does not have initial hypotension, severe sepsis, nor septic shock at this time. No additional crystalloid IV fluid resuscitation bolus indicated at this time (Single Response)	
() Patient does not have initial hypotension, severe sepsis, nor septic shock at this time. No additional crystalloid IV fluid resuscitation bolus indicated at this time	Routine, Once
() Patient does not have initial hypotension, severe sepsis, nor septic shock at this time. No additional crystalloid IV fluid resuscitation bolus indicated at this time (Single Response)	
() Patient does not have initial hypotension, severe sepsis, nor septic shock at this time. No additional crystalloid IV fluid resuscitation bolus indicated at this time	Routine, Once
() No (Single Response)	

lactated ringers IV bolus + Vital Signs OR infusion
(Single Response)

lactated ringers IV bolus + Vitals Every 15 Minutes x 4 Hours **"And" Linked Panel**

lactated ringers bolus 30 mL/kg, intravenous, once, For 1 Doses
Reassess patient after IV fluid bolus given.
If target not met (MAP 65 to 70 mmHg or SBP GREATER than 90 mmHg), notify ordering provider prior to administration of second bolus.
Doses start immediately.
Notify provider immediately upon completion of fluid bolus administration.

Sepsis vital signs - T/P/R/BP STAT, Every 15 min For 4 Hours

lactated ringers IV infusion **"And" Linked Panel**

lactated ringer's infusion 126 mL/hr, intravenous, continuous
Reassess patient after 1 L of IV fluid given.
If target not met (MAP 65 to 70 mmHg or SBP GREATER than 90 mmHg), notify ordering provider prior to administration of additional fluids.
Doses start immediately.
Notify provider immediately upon completion of administration of 1 L of fluid.

sodium chloride 0.9% bolus + Vital Signs OR infusion
(Single Response)

sodium chloride 0.9% bolus + Vitals Every 15 Minutes x 4 Hours **"And" Linked Panel**

sodium chloride 0.9 % bolus 30 mL/kg, intravenous, once, For 1 Doses
Reassess patient after IV fluid bolus given.
If target not met (MAP 65 to 70 mmHg or SBP GREATER than 90 mmHg), notify ordering provider prior to administration of second bolus.
Doses start immediately.
Notify provider immediately upon completion of fluid bolus administration.

Sepsis vital signs - T/P/R/BP STAT, Every 15 min For 4 Hours

sodium chloride 0.9% infusion **"And" Linked Panel**

sodium chloride 0.9% infusion 126 mL/hr, intravenous, continuous
Reassess patient after 1 L of IV fluid given.
If target not met (MAP 65 to 70 mmHg or SBP GREATER than 90 mmHg), notify ordering provider prior to administration of additional fluids.
Doses start immediately.
Notify provider immediately upon completion of administration of 1 L of fluid.

Patient does not have initial hypotension, severe sepsis, nor septic shock at this time. No additional crystalloid IV fluid resuscitation bolus indicated at this time (Single Response)

Patient does not have initial hypotension, severe sepsis, nor septic shock at this time. No additional crystalloid IV fluid resuscitation bolus indicated at this time Routine, Once

Antibiotics

** if not already started within the last 24 hours **

Please Select the appropriate indication(s) for antibiotic use below:

Community-Acquired Pneumonia (Single Response)

Does your patient have a SEVERE penicillin allergy?

No (Single Response)

cefTRIAxone (ROCEPHIN) 1 g IV + azithromycin (ZITHROMAX) 500 mg IV **"And" Linked Panel**

<input type="checkbox"/> cefTRIAxone (ROCEPHIN) IV	<p>1 g, intravenous, for 30 Minutes, once, For 1 Doses Classification: Broad Spectrum Antibiotic</p> <p>When multiple antimicrobial agents are ordered, you may administer these immediately at the SAME TIME via different IV sites. Do not wait for the first antibiotic to infuse. If agents are Y-site compatible, they may be administered per Y-site protocols. IF the ordered agents are NOT Y site compatible, then administer the Broad-spectrum antibiotic first. Refer to available Y site compatibility information and determination of broad-spectrum antibiotic selection chart. Reason for Therapy: Bacterial Infection Suspected Indication: Sepsis Recommendation: Sepsis: Recommended duration is dependent upon patient's clinical response and source identification</p>
<input type="checkbox"/> azithromycin (ZITHROMAX) IV	<p>500 mg, intravenous, for 60 Minutes, once, For 1 Doses Classification: Narrow Spectrum Antibiotic</p> <p>When multiple antimicrobial agents are ordered, you may administer these immediately at the SAME TIME via different IV sites. Do not wait for the first antibiotic to infuse. If agents are Y-site compatible, they may be administered per Y-site protocols. IF the ordered agents are NOT Y site compatible, then administer the Broad-spectrum antibiotic first. Refer to available Y site compatibility information and determination of broad-spectrum antibiotic selection chart. Reason for Therapy: Bacterial Infection Suspected Indication: Sepsis Recommendation: Sepsis: Recommended duration is dependent upon patient's clinical response and source identification</p>
<input type="checkbox"/> cefTRIAxone (ROCEPHIN) 1 g IV + levofloxacin (LEVAQUIN) 750 mg IV	<p style="text-align: center;">"And" Linked Panel</p>
<input type="checkbox"/> cefTRIAxone (ROCEPHIN) IV	<p>1 g, intravenous, for 30 Minutes, once, For 1 Doses Classification: Broad Spectrum Antibiotic</p> <p>When multiple antimicrobial agents are ordered, you may administer these immediately at the SAME TIME via different IV sites. Do not wait for the first antibiotic to infuse. If agents are Y-site compatible, they may be administered per Y-site protocols. IF the ordered agents are NOT Y site compatible, then administer the Broad-spectrum antibiotic first. Refer to available Y site compatibility information and determination of broad-spectrum antibiotic selection chart. Reason for Therapy: Bacterial Infection Suspected Indication: Sepsis Recommendation: Sepsis: Recommended duration is dependent upon patient's clinical response and source identification</p>
<input type="checkbox"/> levofloxacin (LEVAQUIN) IV	<p>750 mg, intravenous, once, For 1 Doses Classification: Narrow Spectrum Antibiotic</p> <p>When multiple antimicrobial agents are ordered, you may administer these immediately at the SAME TIME via different IV sites. Do not wait for the first antibiotic to infuse. If agents are Y-site compatible, they may be administered per Y-site protocols. IF the ordered agents are NOT Y site compatible, then administer the Broad-spectrum antibiotic first. Refer to available Y site compatibility information and determination of broad-spectrum antibiotic selection chart. Reason for Therapy: Bacterial Infection Suspected Indication: Sepsis Recommendation: Sepsis: Recommended duration is dependent upon patient's clinical response and source identification</p>
<input type="checkbox"/> cefTRIAxone (ROCEPHIN) 1 g intraMUSCULAR + azithromycin (ZITHROMAX) 500 mg IV	<p style="text-align: center;">"And" Linked Panel</p>

<input type="checkbox"/> cefTRIAxone (ROCEPHIN) IM	<p>1 g, intramuscular, once, For 1 Doses Intramuscular route selected because no IV access available. Administer dose by deep IM into large muscle mass (e.g. gluteal muscles or lateral part of the thigh). IM Route Selection: I have opted to select the IM route because IV access could not be established Reason for Therapy: Bacterial Infection Suspected Indication: Sepsis Recommendation: Sepsis: Recommended duration is dependent upon patient's clinical response and source identification</p>
<input type="checkbox"/> azithromycin (ZITHROMAX) IV	<p>500 mg, intravenous, for 60 Minutes, once, For 1 Doses Classification: Narrow Spectrum Antibiotic</p> <p>When multiple antimicrobial agents are ordered, you may administer these immediately at the SAME TIME via different IV sites. Do not wait for the first antibiotic to infuse. If agents are Y-site compatible, they may be administered per Y-site protocols. IF the ordered agents are NOT Y site compatible, then administer the Broad-spectrum antibiotic first. Refer to available Y site compatibility information and determination of broad-spectrum antibiotic selection chart. Reason for Therapy: Bacterial Infection Suspected Indication: Sepsis Recommendation: Sepsis: Recommended duration is dependent upon patient's clinical response and source identification</p>
<input type="checkbox"/> cefTRIAxone (ROCEPHIN) 1 g intraMUSCULAR + levofloxacin (LEVAQUIN) 750 mg IV "And" Linked Panel	
<input type="checkbox"/> cefTRIAxone (ROCEPHIN) IM	<p>1 g, intramuscular, once, For 1 Doses Intramuscular route selected because no IV access available. Administer dose by deep IM into large muscle mass (e.g. gluteal muscles or lateral part of the thigh). Reason for Therapy: Bacterial Infection Suspected IM Route Selection: I have opted to select the IM route because IV access could not be established Indication: Sepsis Recommendation: Sepsis: Recommended duration is dependent upon patient's clinical response and source identification</p>
<input type="checkbox"/> levofloxacin (LEVAQUIN) IV	<p>750 mg, intravenous, once, For 1 Doses Classification: Narrow Spectrum Antibiotic</p> <p>When multiple antimicrobial agents are ordered, you may administer these immediately at the SAME TIME via different IV sites. Do not wait for the first antibiotic to infuse. If agents are Y-site compatible, they may be administered per Y-site protocols. IF the ordered agents are NOT Y site compatible, then administer the Broad-spectrum antibiotic first. Refer to available Y site compatibility information and determination of broad-spectrum antibiotic selection chart. Reason for Therapy: Bacterial Infection Suspected Indication: Sepsis Recommendation: Sepsis: Recommended duration is dependent upon patient's clinical response and source identification</p>
<input type="checkbox"/> Yes (Single Response)	
<input type="checkbox"/> aztreonam (AZACTAM) 2 g IV + azithromycin (ZITHROMAX) 500 mg IV	"And" Linked Panel

<input type="checkbox"/> aztreonam (AZACTAM) IV	<p>2 g, intravenous, once, For 1 Doses Classification: Broad Spectrum Antibiotic</p> <p>When multiple antimicrobial agents are ordered, you may administer these immediately at the SAME TIME via different IV sites. Do not wait for the first antibiotic to infuse. If agents are Y-site compatible, they may be administered per Y-site protocols. IF the ordered agents are NOT Y site compatible, then administer the Broad-spectrum antibiotic first. Refer to available Y site compatibility information and determination of broad-spectrum antibiotic selection chart. Reason for Therapy: Bacterial Infection Suspected Indication: Sepsis Reason for Therapy: Bacterial Infection Suspected Indication: Sepsis Recommendation: Sepsis: Recommended duration is dependent upon patient's clinical response and source identification</p>
<input type="checkbox"/> azithromycin (ZITHROMAX) IV	<p>500 mg, intravenous, for 60 Minutes, once, For 1 Doses Classification: Narrow Spectrum Antibiotic</p> <p>When multiple antimicrobial agents are ordered, you may administer these immediately at the SAME TIME via different IV sites. Do not wait for the first antibiotic to infuse. If agents are Y-site compatible, they may be administered per Y-site protocols. IF the ordered agents are NOT Y site compatible, then administer the Broad-spectrum antibiotic first. Refer to available Y site compatibility information and determination of broad-spectrum antibiotic selection chart. Reason for Therapy: Bacterial Infection Suspected Indication: Sepsis Recommendation: Sepsis: Recommended duration is dependent upon patient's clinical response and source identification</p>
"And" Linked Panel	
<input type="checkbox"/> aztreonam (AZACTAM) 2 g intraMUSCULAR + azithromycin (ZITHROMAX) 500 mg IV	
<input type="checkbox"/> aztreonam (AZACTAM) IM	<p>2 g, intramuscular, once, For 1 Doses Intramuscular route selected because no IV access available. Administer dose by deep IM into large muscle mass (e.g. gluteal muscles or lateral part of the thigh). Reason for Therapy: Bacterial Infection Suspected Indication: Sepsis IM Route Selection: I have opted to select the IM route because IV access could not be established</p>
<input type="checkbox"/> azithromycin (ZITHROMAX) IV	<p>500 mg, intravenous, for 60 Minutes, once, For 1 Doses Classification: Narrow Spectrum Antibiotic</p> <p>When multiple antimicrobial agents are ordered, you may administer these immediately at the SAME TIME via different IV sites. Do not wait for the first antibiotic to infuse. If agents are Y-site compatible, they may be administered per Y-site protocols. IF the ordered agents are NOT Y site compatible, then administer the Broad-spectrum antibiotic first. Refer to available Y site compatibility information and determination of broad-spectrum antibiotic selection chart. Reason for Therapy: Bacterial Infection Suspected IM Route Selection: I have opted to select the IM route because IV access could not be established Indication: Sepsis Recommendation: Sepsis: Recommended duration is dependent upon patient's clinical response and source identification</p>

Nosocomial Pneumonia OR Community-Acquired Pneumonia with Multi Drug-Resistant Risk (Single Response)

(e.g. Nursing home resident, IV antibiotic exposure or hospitalization within previous 90 days, chronic dialysis, immunosuppressed, on home infusion therapy or home wound care)
Combined use of piperacillin/tazobactam and vancomycin may be associated with an increased incidence of acute kidney injury.

Does your patient have a SEVERE penicillin AND/OR vancomycin allergy?

No SEVERE Penicillin OR Vancomycin Allergy (Single Response)

Use meropenem (MERREM) if history of infection with ESBL-producing organism or recent prolonged treatment with piperacillin/tazobactam or cefepime.

ceFEPime 2 g IV + vancomycin 15 mg/kg IV

ceFEPime (MAXIPIME) IV 2 g, intravenous, once, For 1 Doses
Classification: Broad Spectrum Antibiotic

When multiple antimicrobial agents are ordered, you may administer these immediately at the SAME TIME via different IV sites. Do not wait for the first antibiotic to infuse. If agents are Y-site compatible, they may be administered per Y-site protocols. IF the ordered agents are NOT Y site compatible, then administer the Broad-spectrum antibiotic first. Refer to available Y site compatibility information and determination of broad-spectrum antibiotic selection chart.

Reason for Therapy: Bacterial Infection Suspected

Indication: Sepsis

Recommendation: Sepsis: Recommended duration is dependent upon patient's clinical response and source identification

vancomycin (VANCOCIN) IV + Pharmacy Consult to Dose (Selection Required)

vancomycin (VANCOCIN) 15 mg/kg, intravenous, once, For 1 Doses
Classification: Narrow Spectrum Antibiotic

When multiple antimicrobial agents are ordered, you may administer these immediately at the SAME TIME via different IV sites. Do not wait for the first antibiotic to infuse. If agents are Y-site compatible, they may be administered per Y-site protocols. IF the ordered agents are NOT Y site compatible, then administer the Broad-spectrum antibiotic first. Refer to available Y site compatibility information and determination of broad-spectrum antibiotic selection chart.

Reason for Therapy: Bacterial Infection Suspected

Indication: Sepsis

Recommendation: Sepsis: Recommended duration is dependent upon patient's clinical response and source identification

Pharmacy consult to manage vancomycin

STAT, Once For 1 Occurrences

Reason for Therapy: Bacterial Infection Suspected

Indication: Sepsis

Recommendation: Sepsis: Recommended duration is dependent upon patient's clinical response and source identification

Duration of Therapy (Days): 1

Adjunct Antibiotics - amikacin (AMIKIN) 15 mg/kg IV +/- levofloxacin 750 mg IV (Single Response)

amikacin (AMIKIN) IV 15 mg/kg, intravenous, for 30 Minutes, once, For 1 Doses
Classification: Narrow Spectrum Antibiotic

When multiple antimicrobial agents are ordered, you may administer these immediately at the SAME TIME via different IV sites. Do not wait for the first antibiotic to infuse. If agents are Y-site compatible, they may be administered per Y-site protocols. IF the ordered agents are NOT Y site compatible, then administer the Broad-spectrum antibiotic first. Refer to available Y site compatibility information and determination of broad-spectrum antibiotic selection chart.

Reason for Therapy: Bacterial Infection Suspected

Indication: Sepsis

<input type="checkbox"/> levofloxacin (LEVAQUIN) IV	750 mg, intravenous, once, For 1 Doses Classification: Narrow Spectrum Antibiotic
When multiple antimicrobial agents are ordered, you may administer these immediately at the SAME TIME via different IV sites. Do not wait for the first antibiotic to infuse. If agents are Y-site compatible, they may be administered per Y-site protocols. IF the ordered agents are NOT Y site compatible, then administer the Broad-spectrum antibiotic first. Refer to available Y site compatibility information and determination of broad-spectrum antibiotic selection chart. Reason for Therapy: Bacterial Infection Suspected Indication: Sepsis Recommendation: Sepsis: Recommended duration is dependent upon patient's clinical response and source identification	
<input type="checkbox"/> Optional IV Antibiotic Addition - tobramycin (TOBREX) 7 mg/kg IV	
<input type="checkbox"/> tobramycin (TOBREX) IV	7 mg/kg, intravenous, for 60 Minutes, once, For 1 Doses Pharmacy Consult to dose based on renal function
Classification: Narrow Spectrum Antibiotic When multiple antimicrobial agents are ordered, you may administer these immediately at the SAME TIME via different IV sites. Do not wait for the first antibiotic to infuse. If agents are Y-site compatible, they may be administered per Y-site protocols. IF the ordered agents are NOT Y site compatible, then administer the Broad-spectrum antibiotic first. Refer to available Y site compatibility information and determination of broad-spectrum antibiotic selection chart. Reason for Therapy: Bacterial Infection Suspected Indication: Sepsis	
<input type="checkbox"/> Pharmacy consult to dose tobramycin	Routine, Once For 1 Occurrences Which aminoglycoside do you need help dosing? tobramycin Indication: Sepsis - Nosocomial Pneumonia OR Community-Acquired Pneumonia with Multi Drug-Resistant Risk
<input type="checkbox"/> piperacillin-tazobactam (ZOSYN) 4.5 g IV + vancomycin 15 mg/kg IV (NOT HMW)	
<input type="checkbox"/> piperacillin-tazobactam (ZOSYN) IV	4.5 g, intravenous, once, For 1 Doses Classification: Broad Spectrum Antibiotic
When multiple antimicrobial agents are ordered, you may administer these immediately at the SAME TIME via different IV sites. Do not wait for the first antibiotic to infuse. If agents are Y-site compatible, they may be administered per Y-site protocols. IF the ordered agents are NOT Y site compatible, then administer the Broad-spectrum antibiotic first. Refer to available Y site compatibility information and determination of broad-spectrum antibiotic selection chart. Reason for Therapy: Bacterial Infection Suspected Indication: Sepsis Recommendation: Sepsis: Recommended duration is dependent upon patient's clinical response and source identification	
<input type="checkbox"/> vancomycin (VANCOCIN) IV + Pharmacy Consult to Dose (Selection Required)	

[] vancomycin (VANCOGIN)	15 mg/kg, intravenous, once, For 1 Doses Classification: Narrow Spectrum Antibiotic
	<p>When multiple antimicrobial agents are ordered, you may administer these immediately at the SAME TIME via different IV sites. Do not wait for the first antibiotic to infuse. If agents are Y-site compatible, they may be administered per Y-site protocols. IF the ordered agents are NOT Y site compatible, then administer the Broad-spectrum antibiotic first. Refer to available Y site compatibility information and determination of broad-spectrum antibiotic selection chart.</p> <p>Reason for Therapy: Bacterial Infection Suspected Indication: Sepsis Recommendation: Sepsis: Recommended duration is dependent upon patient's clinical response and source identification</p>
[] Pharmacy consult to manage vancomycin	<p>STAT, Once For 1 Occurrences Reason for Therapy: Bacterial Infection Suspected Indication: Sepsis Recommendation: Sepsis: Recommended duration is dependent upon patient's clinical response and source identification Duration of Therapy (Days): 1</p>
[] Adjunct Antibiotics - amikacin (AMIKIN) 15 mg/kg IV +/- levofloxacin 750 mg IV (Single Response)	
() amikacin (AMIKIN) IV	15 mg/kg, intravenous, for 30 Minutes, once, For 1 Doses Classification: Narrow Spectrum Antibiotic
	<p>When multiple antimicrobial agents are ordered, you may administer these immediately at the SAME TIME via different IV sites. Do not wait for the first antibiotic to infuse. If agents are Y-site compatible, they may be administered per Y-site protocols. IF the ordered agents are NOT Y site compatible, then administer the Broad-spectrum antibiotic first. Refer to available Y site compatibility information and determination of broad-spectrum antibiotic selection chart.</p> <p>Reason for Therapy: Bacterial Infection Suspected Indication: Sepsis</p>
() levofloxacin (LEVAQUIN) IV	750 mg, intravenous, once, For 1 Doses Classification: Narrow Spectrum Antibiotic
	<p>When multiple antimicrobial agents are ordered, you may administer these immediately at the SAME TIME via different IV sites. Do not wait for the first antibiotic to infuse. If agents are Y-site compatible, they may be administered per Y-site protocols. IF the ordered agents are NOT Y site compatible, then administer the Broad-spectrum antibiotic first. Refer to available Y site compatibility information and determination of broad-spectrum antibiotic selection chart.</p> <p>Reason for Therapy: Bacterial Infection Suspected Indication: Sepsis Recommendation: Sepsis: Recommended duration is dependent upon patient's clinical response and source identification</p>
[] Optional IV Antibiotic Addition - tobramycin (TOBREX) 7 mg/kg IV	
[] tobramycin (TOBREX) IV	7 mg/kg, intravenous, for 60 Minutes, once, For 1 Doses Pharmacy Consult to dose based on renal function
	<p>Classification: Narrow Spectrum Antibiotic</p> <p>When multiple antimicrobial agents are ordered, you may administer these immediately at the SAME TIME via different IV sites. Do not wait for the first antibiotic to infuse. If agents are Y-site compatible, they may be administered per Y-site protocols. IF the ordered agents are NOT Y site compatible, then administer the Broad-spectrum antibiotic first. Refer to available Y site compatibility information and determination of broad-spectrum antibiotic selection chart.</p> <p>Reason for Therapy: Bacterial Infection Suspected Indication: Sepsis</p>

[] Pharmacy consult to dose tobramycin	Routine, Once For 1 Occurrences Which aminoglycoside do you need help dosing? tobramycin Indication: Sepsis - Nosocomial Pneumonia OR Community-Acquired Pneumonia with Multi Drug-Resistant Risk
() piperacillin-tazobactam (ZOSYN) EI 4.5 g IV + vancomycin 15 mg/kg IV (HMW Only)	
[] piperacillin-tazobactam EI (ZOSYN) 4.5 g IV (HMW Only)	"Followed by" Linked Panel
[] piperacillin-tazobactam (ZOSYN) 4.5 g IV Once	4.5 g, intravenous, for .5 Hours, once, For 1 Doses Classification: Broad Spectrum Antibiotic
<p>When multiple antimicrobial agents are ordered, you may administer these immediately at the SAME TIME via different IV sites. Do not wait for the first antibiotic to infuse. If agents are Y-site compatible, they may be administered per Y-site protocols. IF the ordered agents are NOT Y site compatible, then administer the Broad-spectrum antibiotic first. Refer to available Y site compatibility information and determination of broad-spectrum antibiotic selection chart.</p> <p>Reason for Therapy: Bacterial Infection Suspected Indication: Sepsis Recommendation: Sepsis: Recommended duration is dependent upon patient's clinical response and source identification</p>	
[] piperacillin-tazobactam (ZOSYN) 4.5 g IV every 8 hours	4.5 g, intravenous, for 4 Hours, once, Starting H+6 Hours, For 1 Doses Classification: Broad Spectrum Antibiotic
<p>When multiple antimicrobial agents are ordered, you may administer these immediately at the SAME TIME via different IV sites. Do not wait for the first antibiotic to infuse. If agents are Y-site compatible, they may be administered per Y-site protocols. IF the ordered agents are NOT Y site compatible, then administer the Broad-spectrum antibiotic first. Refer to available Y site compatibility information and determination of broad-spectrum antibiotic selection chart.</p> <p>Reason for Therapy: Bacterial Infection Suspected Indication: Sepsis Recommendation: Sepsis: Recommended duration is dependent upon patient's clinical response and source identification</p>	
[] vancomycin (VANCOCIN) IV + Pharmacy Consult to Dose (Selection Required)	
[] vancomycin (VANCOCIN)	15 mg/kg, intravenous, once, For 1 Doses Classification: Narrow Spectrum Antibiotic
<p>When multiple antimicrobial agents are ordered, you may administer these immediately at the SAME TIME via different IV sites. Do not wait for the first antibiotic to infuse. If agents are Y-site compatible, they may be administered per Y-site protocols. IF the ordered agents are NOT Y site compatible, then administer the Broad-spectrum antibiotic first. Refer to available Y site compatibility information and determination of broad-spectrum antibiotic selection chart.</p> <p>Reason for Therapy: Bacterial Infection Suspected Indication: Sepsis Recommendation: Sepsis: Recommended duration is dependent upon patient's clinical response and source identification</p>	
[] Pharmacy consult to manage vancomycin	STAT, Once For 1 Occurrences Reason for Therapy: Bacterial Infection Suspected Indication: Sepsis Recommendation: Sepsis: Recommended duration is dependent upon patient's clinical response and source identification Duration of Therapy (Days): 1
[] Adjunct Antibiotics - amikacin (AMIKIN) 15 mg/kg IV +/- levofloxacin 750 mg IV (Single Response)	

<input type="checkbox"/> amikacin (AMIKIN) IV	15 mg/kg, intravenous, for 30 Minutes, once, For 1 Doses Classification: Narrow Spectrum Antibiotic
When multiple antimicrobial agents are ordered, you may administer these immediately at the SAME TIME via different IV sites. Do not wait for the first antibiotic to infuse. If agents are Y-site compatible, they may be administered per Y-site protocols. IF the ordered agents are NOT Y site compatible, then administer the Broad-spectrum antibiotic first. Refer to available Y site compatibility information and determination of broad-spectrum antibiotic selection chart. Reason for Therapy: Bacterial Infection Suspected Indication: Sepsis	
<input type="checkbox"/> levofloxacin (LEVAQUIN) IV	750 mg, intravenous, once, For 1 Doses Classification: Narrow Spectrum Antibiotic
When multiple antimicrobial agents are ordered, you may administer these immediately at the SAME TIME via different IV sites. Do not wait for the first antibiotic to infuse. If agents are Y-site compatible, they may be administered per Y-site protocols. IF the ordered agents are NOT Y site compatible, then administer the Broad-spectrum antibiotic first. Refer to available Y site compatibility information and determination of broad-spectrum antibiotic selection chart. Per Med Staff Policy, R.Ph. will automatically renally dose this medication based on current SCr and CrCl values. Per Med Staff Policy, R.Ph. will automatically switch IV to equivalent PO dose when above approved criteria are satisfied: Reason for Therapy:	
<input type="checkbox"/> Optional IV Antibiotic Addition - tobramycin (TOBREX) 7 mg/kg IV	
<input type="checkbox"/> tobramycin (TOBREX) IV	7 mg/kg, intravenous, for 60 Minutes, once, For 1 Doses Pharmacy Consult to dose based on renal function
Classification: Narrow Spectrum Antibiotic	
When multiple antimicrobial agents are ordered, you may administer these immediately at the SAME TIME via different IV sites. Do not wait for the first antibiotic to infuse. If agents are Y-site compatible, they may be administered per Y-site protocols. IF the ordered agents are NOT Y site compatible, then administer the Broad-spectrum antibiotic first. Refer to available Y site compatibility information and determination of broad-spectrum antibiotic selection chart. Reason for Therapy: Bacterial Infection Suspected Indication: Sepsis	
<input type="checkbox"/> Pharmacy consult to dose tobramycin	Routine, Once For 1 Occurrences Which aminoglycoside do you need help dosing? tobramycin Indication: Sepsis - Nosocomial Pneumonia OR Community-Acquired Pneumonia with Multi Drug-Resistant Risk
<input type="checkbox"/> meropenem (MERREM) 500 mg IV + vancomycin 15 mg/kg IV	
<input type="checkbox"/> meropenem (MERREM) IV	500 mg, intravenous, once, For 1 Doses Classification: Broad Spectrum Antibiotic
When multiple antimicrobial agents are ordered, you may administer these immediately at the SAME TIME via different IV sites. Do not wait for the first antibiotic to infuse. If agents are Y-site compatible, they may be administered per Y-site protocols. IF the ordered agents are NOT Y site compatible, then administer the Broad-spectrum antibiotic first. Refer to available Y site compatibility information and determination of broad-spectrum antibiotic selection chart. Reason for Therapy: Bacterial Infection Suspected Indication: Sepsis Recommendation: Sepsis: Recommended duration is dependent upon patient's clinical response and source identification	

[] vancomycin (VANCOCIN) IV + Pharmacy Consult to Dose (Selection Required)	
[] vancomycin (VANCOCIN)	<p>15 mg/kg, intravenous, once, For 1 Doses Classification: Narrow Spectrum Antibiotic</p> <p>When multiple antimicrobial agents are ordered, you may administer these immediately at the SAME TIME via different IV sites. Do not wait for the first antibiotic to infuse. If agents are Y-site compatible, they may be administered per Y-site protocols. IF the ordered agents are NOT Y site compatible, then administer the Broad-spectrum antibiotic first. Refer to available Y site compatibility information and determination of broad-spectrum antibiotic selection chart. Reason for Therapy: Bacterial Infection Suspected Indication: Sepsis Recommendation: Sepsis: Recommended duration is dependent upon patient's clinical response and source identification</p>
[] Pharmacy consult to manage vancomycin	<p>STAT, Once For 1 Occurrences Reason for Therapy: Bacterial Infection Suspected Indication: Sepsis Recommendation: Sepsis: Recommended duration is dependent upon patient's clinical response and source identification Duration of Therapy (Days): 1</p>
[] Adjunct Antibiotics - amikacin (AMIKIN) 15 mg/kg IV +/- levofloxacin 750 mg IV (Single Response)	
() amikacin (AMIKIN) IV	<p>15 mg/kg, intravenous, for 30 Minutes, once, For 1 Doses Classification: Narrow Spectrum Antibiotic</p> <p>When multiple antimicrobial agents are ordered, you may administer these immediately at the SAME TIME via different IV sites. Do not wait for the first antibiotic to infuse. If agents are Y-site compatible, they may be administered per Y-site protocols. IF the ordered agents are NOT Y site compatible, then administer the Broad-spectrum antibiotic first. Refer to available Y site compatibility information and determination of broad-spectrum antibiotic selection chart. Reason for Therapy: Bacterial Infection Suspected Indication: Sepsis</p>
() levofloxacin (LEVAQUIN) IV	<p>750 mg, intravenous, once, For 1 Doses Classification: Narrow Spectrum Antibiotic</p> <p>When multiple antimicrobial agents are ordered, you may administer these immediately at the SAME TIME via different IV sites. Do not wait for the first antibiotic to infuse. If agents are Y-site compatible, they may be administered per Y-site protocols. IF the ordered agents are NOT Y site compatible, then administer the Broad-spectrum antibiotic first. Refer to available Y site compatibility information and determination of broad-spectrum antibiotic selection chart. Reason for Therapy: Bacterial Infection Suspected Indication: Sepsis Recommendation: Sepsis: Recommended duration is dependent upon patient's clinical response and source identification</p>
[] Optional IV Antibiotic Addition - tobramycin (TOBREX) 7 mg/kg IV	

[] tobramycin (TOBREX) IV	7 mg/kg, intravenous, for 60 Minutes, once, For 1 Doses Pharmacy Consult to dose based on renal function
	Classification: Narrow Spectrum Antibiotic
	When multiple antimicrobial agents are ordered, you may administer these immediately at the SAME TIME via different IV sites. Do not wait for the first antibiotic to infuse. If agents are Y-site compatible, they may be administered per Y-site protocols. IF the ordered agents are NOT Y site compatible, then administer the Broad-spectrum antibiotic first. Refer to available Y site compatibility information and determination of broad-spectrum antibiotic selection chart. Reason for Therapy: Bacterial Infection Suspected Indication: Sepsis
[] Pharmacy consult to dose tobramycin	Routine, Once For 1 Occurrences Which aminoglycoside do you need help dosing? tobramycin Indication: Sepsis - Nosocomial Pneumonia OR Community-Acquired Pneumonia with Multi Drug-Resistant Risk
() ceFEPime 2 g intraMUSCULAR + vancomycin 15 mg/kg IV	
[] cefepime (MAXIPIME) IM	2 g, intramuscular, once, For 1 Doses Intramuscular route selected because no IV access available. Administer dose by deep IM into large muscle mass (e.g. gluteal muscles or lateral part of the thigh). Reason for Therapy: Bacterial Infection Suspected Indication: Sepsis Recommendation: Sepsis: Recommended duration is dependent upon patient's clinical response and source identification IM Route Selection: I have opted to select the IM route because IV access could not be established
[] vancomycin (VANCOCIN) IV + Pharmacy Consult to Dose (Selection Required)	
[] vancomycin (VANCOCIN)	15 mg/kg, intravenous, once, For 1 Doses Classification: Narrow Spectrum Antibiotic
	When multiple antimicrobial agents are ordered, you may administer these immediately at the SAME TIME via different IV sites. Do not wait for the first antibiotic to infuse. If agents are Y-site compatible, they may be administered per Y-site protocols. IF the ordered agents are NOT Y site compatible, then administer the Broad-spectrum antibiotic first. Refer to available Y site compatibility information and determination of broad-spectrum antibiotic selection chart. Reason for Therapy: Bacterial Infection Suspected Indication: Sepsis Recommendation: Sepsis: Recommended duration is dependent upon patient's clinical response and source identification
[] Pharmacy consult to manage vancomycin	STAT, Once For 1 Occurrences Reason for Therapy: Bacterial Infection Suspected Indication: Sepsis Recommendation: Sepsis: Recommended duration is dependent upon patient's clinical response and source identification Duration of Therapy (Days): 1
[] Adjunct Antibiotics - amikacin (AMIKIN) 15 mg/kg IV +/- levofloxacin 750 mg IV (Single Response)	

<input type="checkbox"/> amikacin (AMIKIN) IV	15 mg/kg, intravenous, for 30 Minutes, once, For 1 Doses Classification: Narrow Spectrum Antibiotic
When multiple antimicrobial agents are ordered, you may administer these immediately at the SAME TIME via different IV sites. Do not wait for the first antibiotic to infuse. If agents are Y-site compatible, they may be administered per Y-site protocols. IF the ordered agents are NOT Y site compatible, then administer the Broad-spectrum antibiotic first. Refer to available Y site compatibility information and determination of broad-spectrum antibiotic selection chart. Reason for Therapy: Bacterial Infection Suspected Indication: Sepsis	
<input type="checkbox"/> levofloxacin (LEVAQUIN) IV	750 mg, intravenous, once, For 1 Doses Classification: Narrow Spectrum Antibiotic
When multiple antimicrobial agents are ordered, you may administer these immediately at the SAME TIME via different IV sites. Do not wait for the first antibiotic to infuse. If agents are Y-site compatible, they may be administered per Y-site protocols. IF the ordered agents are NOT Y site compatible, then administer the Broad-spectrum antibiotic first. Refer to available Y site compatibility information and determination of broad-spectrum antibiotic selection chart. Reason for Therapy: Bacterial Infection Suspected Indication: Sepsis Recommendation: Sepsis: Recommended duration is dependent upon patient's clinical response and source identification	
<input type="checkbox"/> Optional IV Antibiotic Addition - tobramycin (TOBREX) 7 mg/kg IV	
<input type="checkbox"/> tobramycin (TOBREX) IV	7 mg/kg, intravenous, for 60 Minutes, once, For 1 Doses Pharmacy Consult to dose based on renal function
Classification: Narrow Spectrum Antibiotic	
When multiple antimicrobial agents are ordered, you may administer these immediately at the SAME TIME via different IV sites. Do not wait for the first antibiotic to infuse. If agents are Y-site compatible, they may be administered per Y-site protocols. IF the ordered agents are NOT Y site compatible, then administer the Broad-spectrum antibiotic first. Refer to available Y site compatibility information and determination of broad-spectrum antibiotic selection chart. Reason for Therapy: Bacterial Infection Suspected Indication: Sepsis	
<input type="checkbox"/> Pharmacy consult to dose tobramycin	Routine, Once For 1 Occurrences Which aminoglycoside do you need help dosing? tobramycin Indication: Sepsis - Nosocomial Pneumonia OR Community-Acquired Pneumonia with Multi Drug-Resistant Risk
<input type="checkbox"/> meropenem (MERREM) 500 mg intraMUSCULAR + vancomycin 15 mg/kg IV	
<input type="checkbox"/> meropenem (MERREM) intraMUSCULAR	0.5 g, intramuscular, once, For 1 Doses Administer dose by deep IM into large muscle mass (e.g. gluteal muscles or lateral part of the thigh) Reason for Therapy: Bacterial Infection Suspected Indication: Sepsis Recommendation: Sepsis: Recommended duration is dependent upon patient's clinical response and source identification IM Route Selection: I have opted to select the IM route because IV access could not be established
<input type="checkbox"/> vancomycin (VANCOCIN) IV + Pharmacy Consult to Dose (Selection Required)	

[] vancomycin (VANCOGIN)	15 mg/kg, intravenous, once, For 1 Doses Classification: Narrow Spectrum Antibiotic
	<p>When multiple antimicrobial agents are ordered, you may administer these immediately at the SAME TIME via different IV sites. Do not wait for the first antibiotic to infuse. If agents are Y-site compatible, they may be administered per Y-site protocols. IF the ordered agents are NOT Y site compatible, then administer the Broad-spectrum antibiotic first. Refer to available Y site compatibility information and determination of broad-spectrum antibiotic selection chart.</p> <p>Reason for Therapy: Bacterial Infection Suspected Indication: Sepsis Recommendation: Sepsis: Recommended duration is dependent upon patient's clinical response and source identification</p>
[] Pharmacy consult to manage vancomycin	<p>STAT, Once For 1 Occurrences Reason for Therapy: Bacterial Infection Suspected Indication: Sepsis Recommendation: Sepsis: Recommended duration is dependent upon patient's clinical response and source identification Duration of Therapy (Days): 1</p>
[] Adjunct Antibiotics - amikacin (AMIKIN) 15 mg/kg IV +/- levofloxacin 750 mg IV (Single Response)	
() amikacin (AMIKIN) IV	15 mg/kg, intravenous, for 30 Minutes, once, For 1 Doses Classification: Narrow Spectrum Antibiotic
	<p>When multiple antimicrobial agents are ordered, you may administer these immediately at the SAME TIME via different IV sites. Do not wait for the first antibiotic to infuse. If agents are Y-site compatible, they may be administered per Y-site protocols. IF the ordered agents are NOT Y site compatible, then administer the Broad-spectrum antibiotic first. Refer to available Y site compatibility information and determination of broad-spectrum antibiotic selection chart.</p> <p>Reason for Therapy: Bacterial Infection Suspected Indication: Sepsis</p>
() levofloxacin (LEVAQUIN) IV	750 mg, intravenous, once, For 1 Doses Classification: Narrow Spectrum Antibiotic
	<p>When multiple antimicrobial agents are ordered, you may administer these immediately at the SAME TIME via different IV sites. Do not wait for the first antibiotic to infuse. If agents are Y-site compatible, they may be administered per Y-site protocols. IF the ordered agents are NOT Y site compatible, then administer the Broad-spectrum antibiotic first. Refer to available Y site compatibility information and determination of broad-spectrum antibiotic selection chart.</p> <p>Reason for Therapy: Bacterial Infection Suspected Indication: Sepsis Recommendation: Sepsis: Recommended duration is dependent upon patient's clinical response and source identification</p>
[] Optional IV Antibiotic Addition - tobramycin (TOBREX) 7 mg/kg IV	
[] tobramycin (TOBREX) IV	7 mg/kg, intravenous, for 60 Minutes, once, For 1 Doses Pharmacy Consult to dose based on renal function
	<p>Classification: Narrow Spectrum Antibiotic</p> <p>When multiple antimicrobial agents are ordered, you may administer these immediately at the SAME TIME via different IV sites. Do not wait for the first antibiotic to infuse. If agents are Y-site compatible, they may be administered per Y-site protocols. IF the ordered agents are NOT Y site compatible, then administer the Broad-spectrum antibiotic first. Refer to available Y site compatibility information and determination of broad-spectrum antibiotic selection chart.</p> <p>Reason for Therapy: Bacterial Infection Suspected Indication: Sepsis</p>

[] Pharmacy consult to dose tobramycin	Routine, Once For 1 Occurrences Which aminoglycoside do you need help dosing? tobramycin Indication: Sepsis - Nosocomial Pneumonia OR Community-Acquired Pneumonia with Multi Drug-Resistant Risk
<input type="checkbox"/> SEVERE Penicillin Allergy (Single Response) (i.e. Type 1 immediate hypersensitivity reaction - anaphylaxis, bronchospasm, angioedema, urticaria)	
<input type="checkbox"/> aztreonam (AZACTAM) 2 g IV + vancomycin 15 mg/kg IV	
[] aztreonam (AZACTAM) IV	2 g, intravenous, once, For 1 Doses Classification: Broad Spectrum Antibiotic When multiple antimicrobial agents are ordered, you may administer these immediately at the SAME TIME via different IV sites. Do not wait for the first antibiotic to infuse. If agents are Y-site compatible, they may be administered per Y-site protocols. IF the ordered agents are NOT Y site compatible, then administer the Broad-spectrum antibiotic first. Refer to available Y site compatibility information and determination of broad-spectrum antibiotic selection chart. Reason for Therapy: Bacterial Infection Suspected Indication: Sepsis
<input type="checkbox"/> vancomycin (VANCOCIN) IV + Pharmacy Consult to Dose (Selection Required)	
[] vancomycin (VANCOCIN)	15 mg/kg, intravenous, once, For 1 Doses Classification: Narrow Spectrum Antibiotic When multiple antimicrobial agents are ordered, you may administer these immediately at the SAME TIME via different IV sites. Do not wait for the first antibiotic to infuse. If agents are Y-site compatible, they may be administered per Y-site protocols. IF the ordered agents are NOT Y site compatible, then administer the Broad-spectrum antibiotic first. Refer to available Y site compatibility information and determination of broad-spectrum antibiotic selection chart. Reason for Therapy: Bacterial Infection Suspected Indication: Sepsis Recommendation: Sepsis: Recommended duration is dependent upon patient's clinical response and source identification
<input type="checkbox"/> Pharmacy consult to manage vancomycin	
STAT, Once For 1 Occurrences Reason for Therapy: Bacterial Infection Suspected Indication: Sepsis Recommendation: Sepsis: Recommended duration is dependent upon patient's clinical response and source identification Duration of Therapy (Days): 1	
<input type="checkbox"/> Adjunct Antibiotics - amikacin (AMIKIN) 15 mg/kg IV +/- levofloxacin 750 mg IV (Single Response)	
<input type="checkbox"/> amikacin (AMIKIN) IV	15 mg/kg, intravenous, for 30 Minutes, once, For 1 Doses Classification: Narrow Spectrum Antibiotic When multiple antimicrobial agents are ordered, you may administer these immediately at the SAME TIME via different IV sites. Do not wait for the first antibiotic to infuse. If agents are Y-site compatible, they may be administered per Y-site protocols. IF the ordered agents are NOT Y site compatible, then administer the Broad-spectrum antibiotic first. Refer to available Y site compatibility information and determination of broad-spectrum antibiotic selection chart. Reason for Therapy: Bacterial Infection Suspected Indication: Sepsis

<input type="checkbox"/> levofloxacin (LEVAQUIN) IV	750 mg, intravenous, once, For 1 Doses Classification: Narrow Spectrum Antibiotic
When multiple antimicrobial agents are ordered, you may administer these immediately at the SAME TIME via different IV sites. Do not wait for the first antibiotic to infuse. If agents are Y-site compatible, they may be administered per Y-site protocols. IF the ordered agents are NOT Y site compatible, then administer the Broad-spectrum antibiotic first. Refer to available Y site compatibility information and determination of broad-spectrum antibiotic selection chart. Reason for Therapy: Bacterial Infection Suspected Indication: Sepsis Recommendation: Sepsis: Recommended duration is dependent upon patient's clinical response and source identification	
<input type="checkbox"/> Suspected Anaerobe Coverage: metroNIDAZOLE (FLAGYL) 500 mg IV	
<input type="checkbox"/> metroNIDAZOLE (FLAGYL) IV	500 mg, intravenous, once, For 1 Doses Classification: Narrow Spectrum Antibiotic
When multiple antimicrobial agents are ordered, you may administer these immediately at the SAME TIME via different IV sites. Do not wait for the first antibiotic to infuse. If agents are Y-site compatible, they may be administered per Y-site protocols. IF the ordered agents are NOT Y site compatible, then administer the Broad-spectrum antibiotic first. Refer to available Y site compatibility information and determination of broad-spectrum antibiotic selection chart. Reason for Therapy: Bacterial Infection Suspected Indication: Sepsis	
<input type="checkbox"/> aztreonam (AZACTAM) 2 g intraMUSCULAR + vancomycin 15 mg/kg IV	
<input type="checkbox"/> aztreonam (AZACTAM) intraMUSCULAR	2 g, intramuscular, once, For 1 Doses (Administer dose by deep IM into large muscle mass (e.g. gluteal muscles or lateral part of the thigh). Reason for Therapy: Bacterial Infection Suspected Indication: Sepsis IM Route Selection: I have opted to select the IM route because IV access could not be established
<input type="checkbox"/> vancomycin (VANCOCIN) IV + Pharmacy Consult to Dose (Selection Required)	
<input type="checkbox"/> vancomycin (VANCOCIN)	15 mg/kg, intravenous, once, For 1 Doses Classification: Narrow Spectrum Antibiotic
When multiple antimicrobial agents are ordered, you may administer these immediately at the SAME TIME via different IV sites. Do not wait for the first antibiotic to infuse. If agents are Y-site compatible, they may be administered per Y-site protocols. IF the ordered agents are NOT Y site compatible, then administer the Broad-spectrum antibiotic first. Refer to available Y site compatibility information and determination of broad-spectrum antibiotic selection chart. Reason for Therapy: Bacterial Infection Suspected Indication: Sepsis Recommendation: Sepsis: Recommended duration is dependent upon patient's clinical response and source identification	
<input type="checkbox"/> Pharmacy consult to manage vancomycin	STAT, Once For 1 Occurrences Reason for Therapy: Bacterial Infection Suspected Indication: Sepsis Recommendation: Sepsis: Recommended duration is dependent upon patient's clinical response and source identification Duration of Therapy (Days): 1
<input type="checkbox"/> Adjunct Antibiotics - amikacin (AMIKIN) 15 mg/kg IV +/- levofloxacin 750 mg IV (Single Response)	

amikacin (AMIKIN) IV 15 mg/kg, intravenous, for 30 Minutes, once, For 1 Doses
Classification: Narrow Spectrum Antibiotic

When multiple antimicrobial agents are ordered, you may administer these immediately at the SAME TIME via different IV sites. Do not wait for the first antibiotic to infuse. If agents are Y-site compatible, they may be administered per Y-site protocols. IF the ordered agents are NOT Y site compatible, then administer the Broad-spectrum antibiotic first. Refer to available Y site compatibility information and determination of broad-spectrum antibiotic selection chart.
Reason for Therapy: Bacterial Infection Suspected
Indication: Sepsis

levofloxacin (LEVAQUIN) IV 750 mg, intravenous, once, For 1 Doses
Classification: Narrow Spectrum Antibiotic

When multiple antimicrobial agents are ordered, you may administer these immediately at the SAME TIME via different IV sites. Do not wait for the first antibiotic to infuse. If agents are Y-site compatible, they may be administered per Y-site protocols. IF the ordered agents are NOT Y site compatible, then administer the Broad-spectrum antibiotic first. Refer to available Y site compatibility information and determination of broad-spectrum antibiotic selection chart.
Reason for Therapy: Bacterial Infection Suspected
Indication: Sepsis
Recommendation: Sepsis: Recommended duration is dependent upon patient's clinical response and source identification

Suspected Anaerobe Coverage: metroNIDAZOLE (FLAGYL) 500 mg IV

metroNIDAZOLE (FLAGYL) IV 500 mg, intravenous, once, For 1 Doses
Classification: Narrow Spectrum Antibiotic

When multiple antimicrobial agents are ordered, you may administer these immediately at the SAME TIME via different IV sites. Do not wait for the first antibiotic to infuse. If agents are Y-site compatible, they may be administered per Y-site protocols. IF the ordered agents are NOT Y site compatible, then administer the Broad-spectrum antibiotic first. Refer to available Y site compatibility information and determination of broad-spectrum antibiotic selection chart.
Reason for Therapy: Bacterial Infection Suspected
Indication: Sepsis

SEVERE Vancomycin Allergy (Single Response)

Use meropenem (MERREM) if history of infection with ESBL-producing organism or recent prolonged treatment with piperacillin/tazobactam or cefepime.

ceFEPime 2 g IV + linezolid (ZYVOX) 600 mg IVPB

ceFEPime (MAXIPIME) IV 2 g, intravenous, once, For 1 Doses
Classification: Broad Spectrum Antibiotic

When multiple antimicrobial agents are ordered, you may administer these immediately at the SAME TIME via different IV sites. Do not wait for the first antibiotic to infuse. If agents are Y-site compatible, they may be administered per Y-site protocols. IF the ordered agents are NOT Y site compatible, then administer the Broad-spectrum antibiotic first. Refer to available Y site compatibility information and determination of broad-spectrum antibiotic selection chart.
Reason for Therapy: Bacterial Infection Suspected
Indication: Sepsis
Recommendation: Sepsis: Recommended duration is dependent upon patient's clinical response and source identification

<input type="checkbox"/> linezolid in dextrose 5% (ZYVOX) 600 mg/300 mL IVPB	<p>600 mg, intravenous, for 60 Minutes, once, For 1 Doses Classification: Narrow Spectrum Antibiotic</p> <p>When multiple antimicrobial agents are ordered, you may administer these immediately at the SAME TIME via different IV sites. Do not wait for the first antibiotic to infuse. If agents are Y-site compatible, they may be administered per Y-site protocols. IF the ordered agents are NOT Y site compatible, then administer the Broad-spectrum antibiotic first. Refer to available Y site compatibility information and determination of broad-spectrum antibiotic selection chart. Reason for Therapy: Bacterial Infection Suspected Indication: Sepsis Recommendation: Sepsis: Recommended duration is dependent upon patient's clinical response and source identification</p>
<input type="checkbox"/> Adjunct Antibiotics - amikacin (AMIKIN) 15 mg/kg IV +/- levofloxacin 750 mg IV (Single Response)	
<input type="checkbox"/> amikacin (AMIKIN) IV	<p>15 mg/kg, intravenous, for 30 Minutes, once, For 1 Doses Classification: Narrow Spectrum Antibiotic</p> <p>When multiple antimicrobial agents are ordered, you may administer these immediately at the SAME TIME via different IV sites. Do not wait for the first antibiotic to infuse. If agents are Y-site compatible, they may be administered per Y-site protocols. IF the ordered agents are NOT Y site compatible, then administer the Broad-spectrum antibiotic first. Refer to available Y site compatibility information and determination of broad-spectrum antibiotic selection chart. Reason for Therapy: Bacterial Infection Suspected Indication: Sepsis</p>
<input type="checkbox"/> levofloxacin (LEVAQUIN) IV	<p>750 mg, intravenous, once, For 1 Doses Classification: Narrow Spectrum Antibiotic</p> <p>When multiple antimicrobial agents are ordered, you may administer these immediately at the SAME TIME via different IV sites. Do not wait for the first antibiotic to infuse. If agents are Y-site compatible, they may be administered per Y-site protocols. IF the ordered agents are NOT Y site compatible, then administer the Broad-spectrum antibiotic first. Refer to available Y site compatibility information and determination of broad-spectrum antibiotic selection chart. Reason for Therapy: Bacterial Infection Suspected Indication: Sepsis Recommendation: Sepsis: Recommended duration is dependent upon patient's clinical response and source identification</p>
<input type="checkbox"/> Optional IV Antibiotic Addition - tobramycin (TOBREX) 7 mg/kg IV	
<input type="checkbox"/> tobramycin (TOBREX) IV	<p>7 mg/kg, intravenous, for 60 Minutes, once, For 1 Doses Pharmacy Consult to dose based on renal function</p> <p>Classification: Narrow Spectrum Antibiotic</p> <p>When multiple antimicrobial agents are ordered, you may administer these immediately at the SAME TIME via different IV sites. Do not wait for the first antibiotic to infuse. If agents are Y-site compatible, they may be administered per Y-site protocols. IF the ordered agents are NOT Y site compatible, then administer the Broad-spectrum antibiotic first. Refer to available Y site compatibility information and determination of broad-spectrum antibiotic selection chart. Reason for Therapy: Bacterial Infection Suspected Indication: Sepsis</p>
<input type="checkbox"/> Pharmacy consult to dose tobramycin	<p>Routine, Once For 1 Occurrences Which aminoglycoside do you need help dosing? tobramycin Indication: Sepsis - Nosocomial Pneumonia OR Community-Acquired Pneumonia with Multi Drug-Resistant Risk</p>
<input type="checkbox"/> ceFEPime 2 g intraMUSCULAR + linezolid (ZYVOX) 600 mg IVPB	

<input type="checkbox"/> cefepime (MAXIPIME) IM	<p>2 g, intramuscular, once, For 1 Doses Intramuscular route selected because no IV access available. Administer dose by deep IM into large muscle mass (e.g. gluteal muscles or lateral part of the thigh). Reason for Therapy: Bacterial Infection Suspected Indication: Sepsis Recommendation: Sepsis: Recommended duration is dependent upon patient's clinical response and source identification IM Route Selection: I have opted to select the IM route because IV access could not be established</p>
<input type="checkbox"/> linezolid in dextrose 5% (ZYVOX) IVPB	<p>600 mg, intravenous, for 60 Minutes, once, For 1 Doses Classification: Narrow Spectrum Antibiotic</p> <p>When multiple antimicrobial agents are ordered, you may administer these immediately at the SAME TIME via different IV sites. Do not wait for the first antibiotic to infuse. If agents are Y-site compatible, they may be administered per Y-site protocols. IF the ordered agents are NOT Y site compatible, then administer the Broad-spectrum antibiotic first. Refer to available Y site compatibility information and determination of broad-spectrum antibiotic selection chart. Reason for Therapy: Bacterial Infection Suspected Indication: Sepsis Recommendation: Sepsis: Recommended duration is dependent upon patient's clinical response and source identification</p>
<input type="checkbox"/> Adjunct Antibiotics - amikacin (AMIKIN) 15 mg/kg IV +/- levofloxacin 750 mg IV (Single Response)	
<input type="checkbox"/> amikacin (AMIKIN) IV	<p>15 mg/kg, intravenous, for 30 Minutes, once, For 1 Doses Classification: Narrow Spectrum Antibiotic</p> <p>When multiple antimicrobial agents are ordered, you may administer these immediately at the SAME TIME via different IV sites. Do not wait for the first antibiotic to infuse. If agents are Y-site compatible, they may be administered per Y-site protocols. IF the ordered agents are NOT Y site compatible, then administer the Broad-spectrum antibiotic first. Refer to available Y site compatibility information and determination of broad-spectrum antibiotic selection chart. Reason for Therapy: Bacterial Infection Suspected Indication: Sepsis</p>
<input type="checkbox"/> levofloxacin (LEVAQUIN) IV	<p>750 mg, intravenous, once, For 1 Doses Classification: Narrow Spectrum Antibiotic</p> <p>When multiple antimicrobial agents are ordered, you may administer these immediately at the SAME TIME via different IV sites. Do not wait for the first antibiotic to infuse. If agents are Y-site compatible, they may be administered per Y-site protocols. IF the ordered agents are NOT Y site compatible, then administer the Broad-spectrum antibiotic first. Refer to available Y site compatibility information and determination of broad-spectrum antibiotic selection chart. Reason for Therapy: Bacterial Infection Suspected Indication: Sepsis Recommendation: Sepsis: Recommended duration is dependent upon patient's clinical response and source identification</p>
<input type="checkbox"/> Optional IV Antibiotic Addition - tobramycin (TOBREX) 7 mg/kg IV	

[] tobramycin (TOBREX) IV	7 mg/kg, intravenous, for 60 Minutes, once, For 1 Doses Pharmacy Consult to dose based on renal function
	Classification: Narrow Spectrum Antibiotic
	When multiple antimicrobial agents are ordered, you may administer these immediately at the SAME TIME via different IV sites. Do not wait for the first antibiotic to infuse. If agents are Y-site compatible, they may be administered per Y-site protocols. IF the ordered agents are NOT Y site compatible, then administer the Broad-spectrum antibiotic first. Refer to available Y site compatibility information and determination of broad-spectrum antibiotic selection chart. Reason for Therapy: Bacterial Infection Suspected Indication: Sepsis
[] Pharmacy consult to dose tobramycin	Routine, Once For 1 Occurrences Which aminoglycoside do you need help dosing? tobramycin Indication: Sepsis - Nosocomial Pneumonia OR Community-Acquired Pneumonia with Multi Drug-Resistant Risk
() piperacillin-tazobactam (ZOSYN) 4.5 g IV + linezolid (ZYVOX) 600 mg IVPB (NOT HMW)	
[] piperacillin-tazobactam (ZOSYN) IV	4.5 g, intravenous, once, For 1 Doses Classification: Broad Spectrum Antibiotic
	When multiple antimicrobial agents are ordered, you may administer these immediately at the SAME TIME via different IV sites. Do not wait for the first antibiotic to infuse. If agents are Y-site compatible, they may be administered per Y-site protocols. IF the ordered agents are NOT Y site compatible, then administer the Broad-spectrum antibiotic first. Refer to available Y site compatibility information and determination of broad-spectrum antibiotic selection chart. Reason for Therapy: Bacterial Infection Suspected Indication: Sepsis Recommendation: Sepsis: Recommended duration is dependent upon patient's clinical response and source identification
[] linezolid in dextrose 5% (ZYVOX) IVPB	600 mg, intravenous, for 60 Minutes, once, For 1 Doses Classification: Narrow Spectrum Antibiotic
	When multiple antimicrobial agents are ordered, you may administer these immediately at the SAME TIME via different IV sites. Do not wait for the first antibiotic to infuse. If agents are Y-site compatible, they may be administered per Y-site protocols. IF the ordered agents are NOT Y site compatible, then administer the Broad-spectrum antibiotic first. Refer to available Y site compatibility information and determination of broad-spectrum antibiotic selection chart. Reason for Therapy: Bacterial Infection Suspected Indication: Sepsis Recommendation: Sepsis: Recommended duration is dependent upon patient's clinical response and source identification
[] Adjunct Antibiotics - amikacin (AMIKIN) 15 mg/kg IV +/- levofloxacin 750 mg IV (Single Response)	
() amikacin (AMIKIN) IV	15 mg/kg, intravenous, for 30 Minutes, once, For 1 Doses Classification: Narrow Spectrum Antibiotic
	When multiple antimicrobial agents are ordered, you may administer these immediately at the SAME TIME via different IV sites. Do not wait for the first antibiotic to infuse. If agents are Y-site compatible, they may be administered per Y-site protocols. IF the ordered agents are NOT Y site compatible, then administer the Broad-spectrum antibiotic first. Refer to available Y site compatibility information and determination of broad-spectrum antibiotic selection chart. Reason for Therapy: Bacterial Infection Suspected Indication: Sepsis

<input type="checkbox"/> levofloxacin (LEVAQUIN) IV	750 mg, intravenous, once, For 1 Doses Classification: Narrow Spectrum Antibiotic
When multiple antimicrobial agents are ordered, you may administer these immediately at the SAME TIME via different IV sites. Do not wait for the first antibiotic to infuse. If agents are Y-site compatible, they may be administered per Y-site protocols. IF the ordered agents are NOT Y site compatible, then administer the Broad-spectrum antibiotic first. Refer to available Y site compatibility information and determination of broad-spectrum antibiotic selection chart. Reason for Therapy: Bacterial Infection Suspected Indication: Sepsis Recommendation: Sepsis: Recommended duration is dependent upon patient's clinical response and source identification	
<input type="checkbox"/> Optional IV Antibiotic Addition - tobramycin (TOBREX) 7 mg/kg IV	
<input type="checkbox"/> tobramycin (TOBREX) IV	7 mg/kg, intravenous, for 60 Minutes, once, For 1 Doses Pharmacy Consult to dose based on renal function
Classification: Narrow Spectrum Antibiotic When multiple antimicrobial agents are ordered, you may administer these immediately at the SAME TIME via different IV sites. Do not wait for the first antibiotic to infuse. If agents are Y-site compatible, they may be administered per Y-site protocols. IF the ordered agents are NOT Y site compatible, then administer the Broad-spectrum antibiotic first. Refer to available Y site compatibility information and determination of broad-spectrum antibiotic selection chart. Reason for Therapy: Bacterial Infection Suspected Indication: Sepsis	
<input type="checkbox"/> Pharmacy consult to dose tobramycin	Routine, Once For 1 Occurrences Which aminoglycoside do you need help dosing? tobramycin Indication: Sepsis - Nosocomial Pneumonia OR Community-Acquired Pneumonia with Multi Drug-Resistant Risk
<input type="checkbox"/> piperacillin-tazobactam (ZOSYN) EI IV + linezolid (ZYVOX) 600 mg IVPB (HMW Only)	
<input type="checkbox"/> piperacillin-tazobactam (ZOSYNI) EI IV	4.5 g, intravenous, for 4 Hours, once, For 1 Doses Classification: Broad Spectrum Antibiotic
When multiple antimicrobial agents are ordered, you may administer these immediately at the SAME TIME via different IV sites. Do not wait for the first antibiotic to infuse. If agents are Y-site compatible, they may be administered per Y-site protocols. IF the ordered agents are NOT Y site compatible, then administer the Broad-spectrum antibiotic first. Refer to available Y site compatibility information and determination of broad-spectrum antibiotic selection chart. Reason for Therapy: Bacterial Infection Suspected Indication: Sepsis Recommendation: Sepsis: Recommended duration is dependent upon patient's clinical response and source identification	
<input type="checkbox"/> linezolid in dextrose 5% (ZYVOX) IVPB	600 mg, intravenous, for 60 Minutes, once, For 1 Doses Classification: Narrow Spectrum Antibiotic
When multiple antimicrobial agents are ordered, you may administer these immediately at the SAME TIME via different IV sites. Do not wait for the first antibiotic to infuse. If agents are Y-site compatible, they may be administered per Y-site protocols. IF the ordered agents are NOT Y site compatible, then administer the Broad-spectrum antibiotic first. Refer to available Y site compatibility information and determination of broad-spectrum antibiotic selection chart. Reason for Therapy: Bacterial Infection Suspected Indication: Sepsis Recommendation: Sepsis: Recommended duration is dependent upon patient's clinical response and source identification	

[] Adjunct Antibiotics - amikacin (AMIKIN) 15 mg/kg IV +/- levofloxacin 750 mg IV (Single Response)	15 mg/kg, intravenous, for 30 Minutes, once, For 1 Doses Classification: Narrow Spectrum Antibiotic
[] amikacin (AMIKIN) IV	When multiple antimicrobial agents are ordered, you may administer these immediately at the SAME TIME via different IV sites. Do not wait for the first antibiotic to infuse. If agents are Y-site compatible, they may be administered per Y-site protocols. IF the ordered agents are NOT Y site compatible, then administer the Broad-spectrum antibiotic first. Refer to available Y site compatibility information and determination of broad-spectrum antibiotic selection chart. Reason for Therapy: Bacterial Infection Suspected Indication: Sepsis
[] levofloxacin (LEVAQUIN) IV	750 mg, intravenous, once, For 1 Doses Classification: Narrow Spectrum Antibiotic
When multiple antimicrobial agents are ordered, you may administer these immediately at the SAME TIME via different IV sites. Do not wait for the first antibiotic to infuse. If agents are Y-site compatible, they may be administered per Y-site protocols. IF the ordered agents are NOT Y site compatible, then administer the Broad-spectrum antibiotic first. Refer to available Y site compatibility information and determination of broad-spectrum antibiotic selection chart. Reason for Therapy: Bacterial Infection Suspected Indication: Sepsis Recommendation: Sepsis: Recommended duration is dependent upon patient's clinical response and source identification	
[] Optional IV Antibiotic Addition - tobramycin (TOBREX) 7 mg/kg IV	
[] tobramycin (TOBREX) IV	7 mg/kg, intravenous, for 60 Minutes, once, For 1 Doses Pharmacy Consult to dose based on renal function
Classification: Narrow Spectrum Antibiotic	
When multiple antimicrobial agents are ordered, you may administer these immediately at the SAME TIME via different IV sites. Do not wait for the first antibiotic to infuse. If agents are Y-site compatible, they may be administered per Y-site protocols. IF the ordered agents are NOT Y site compatible, then administer the Broad-spectrum antibiotic first. Refer to available Y site compatibility information and determination of broad-spectrum antibiotic selection chart. Reason for Therapy: Bacterial Infection Suspected Indication: Sepsis	
[] Pharmacy consult to dose tobramycin	Routine, Once For 1 Occurrences Which aminoglycoside do you need help dosing? tobramycin Indication: Sepsis - Nosocomial Pneumonia
[] meropenem (MERREM) 500 mg IV + linezolid (ZYVOX) 600 mg IV	
[] meropenem (MERREM) IV	500 mg, intravenous, once, For 1 Doses Classification: Broad Spectrum Antibiotic
When multiple antimicrobial agents are ordered, you may administer these immediately at the SAME TIME via different IV sites. Do not wait for the first antibiotic to infuse. If agents are Y-site compatible, they may be administered per Y-site protocols. IF the ordered agents are NOT Y site compatible, then administer the Broad-spectrum antibiotic first. Refer to available Y site compatibility information and determination of broad-spectrum antibiotic selection chart. Reason for Therapy: Bacterial Infection Suspected Indication: Sepsis Recommendation: Sepsis: Recommended duration is dependent upon patient's clinical response and source identification	

<input type="checkbox"/> linezolid in dextrose 5% (ZYVOX) IVPB	<p>600 mg, intravenous, for 60 Minutes, once, For 1 Doses Classification: Narrow Spectrum Antibiotic</p> <p>When multiple antimicrobial agents are ordered, you may administer these immediately at the SAME TIME via different IV sites. Do not wait for the first antibiotic to infuse. If agents are Y-site compatible, they may be administered per Y-site protocols. IF the ordered agents are NOT Y site compatible, then administer the Broad-spectrum antibiotic first. Refer to available Y site compatibility information and determination of broad-spectrum antibiotic selection chart. Reason for Therapy: Bacterial Infection Suspected Indication: Sepsis Recommendation: Sepsis: Recommended duration is dependent upon patient's clinical response and source identification</p>
<input type="checkbox"/> Adjunct Antibiotics - amikacin (AMIKIN) 15 mg/kg IV +/- levofloxacin 750 mg IV (Single Response)	
<input type="checkbox"/> amikacin (AMIKIN) IV	<p>15 mg/kg, intravenous, for 30 Minutes, once, For 1 Doses Classification: Narrow Spectrum Antibiotic</p> <p>When multiple antimicrobial agents are ordered, you may administer these immediately at the SAME TIME via different IV sites. Do not wait for the first antibiotic to infuse. If agents are Y-site compatible, they may be administered per Y-site protocols. IF the ordered agents are NOT Y site compatible, then administer the Broad-spectrum antibiotic first. Refer to available Y site compatibility information and determination of broad-spectrum antibiotic selection chart. Reason for Therapy: Bacterial Infection Suspected Indication: Sepsis</p>
<input type="checkbox"/> levofloxacin (LEVAQUIN) IV	<p>750 mg, intravenous, once, For 1 Doses Classification: Narrow Spectrum Antibiotic</p> <p>When multiple antimicrobial agents are ordered, you may administer these immediately at the SAME TIME via different IV sites. Do not wait for the first antibiotic to infuse. If agents are Y-site compatible, they may be administered per Y-site protocols. IF the ordered agents are NOT Y site compatible, then administer the Broad-spectrum antibiotic first. Refer to available Y site compatibility information and determination of broad-spectrum antibiotic selection chart. Reason for Therapy: Bacterial Infection Suspected Indication: Sepsis Recommendation: Sepsis: Recommended duration is dependent upon patient's clinical response and source identification</p>
<input type="checkbox"/> Optional IV Antibiotic Addition - tobramycin (TOBREX) 7 mg/kg IV	
<input type="checkbox"/> tobramycin (TOBREX) IV	<p>7 mg/kg, intravenous, for 60 Minutes, once, For 1 Doses Pharmacy Consult to dose based on renal function</p> <p>Classification: Narrow Spectrum Antibiotic</p> <p>When multiple antimicrobial agents are ordered, you may administer these immediately at the SAME TIME via different IV sites. Do not wait for the first antibiotic to infuse. If agents are Y-site compatible, they may be administered per Y-site protocols. IF the ordered agents are NOT Y site compatible, then administer the Broad-spectrum antibiotic first. Refer to available Y site compatibility information and determination of broad-spectrum antibiotic selection chart. Reason for Therapy: Bacterial Infection Suspected Indication: Sepsis</p>
<input type="checkbox"/> Pharmacy consult to dose tobramycin	<p>Routine, Once For 1 Occurrences Which aminoglycoside do you need help dosing? tobramycin Indication: Sepsis - Nosocomial Pneumonia</p>
<input type="checkbox"/> SEVERE Penicillin AND Vancomycin Allergy (Single Response)	

(i.e. Type 1 immediate hypersensitivity reaction - anaphylaxis, bronchospasm, angioedema, urticaria)

() aztreonam (AZACTAM) 2 g IV + linezolid (ZYVOX) 600 mg IVPB

[] aztreonam (AZACTAM) IV

2 g, intravenous, once, For 1 Doses
Classification: Broad Spectrum Antibiotic

When multiple antimicrobial agents are ordered, you may administer these immediately at the SAME TIME via different IV sites. Do not wait for the first antibiotic to infuse. If agents are Y-site compatible, they may be administered per Y-site protocols. IF the ordered agents are NOT Y site compatible, then administer the Broad-spectrum antibiotic first. Refer to available Y site compatibility information and determination of broad-spectrum antibiotic selection chart.
Reason for Therapy: Bacterial Infection Suspected
Indication: Sepsis

[] linezolid in dextrose 5% (ZYVOX) IVPB

600 mg, intravenous, for 60 Minutes, once, For 1 Doses
Classification: Narrow Spectrum Antibiotic

When multiple antimicrobial agents are ordered, you may administer these immediately at the SAME TIME via different IV sites. Do not wait for the first antibiotic to infuse. If agents are Y-site compatible, they may be administered per Y-site protocols. IF the ordered agents are NOT Y site compatible, then administer the Broad-spectrum antibiotic first. Refer to available Y site compatibility information and determination of broad-spectrum antibiotic selection chart.
Reason for Therapy: Bacterial Infection Suspected
Indication: Sepsis
Recommendation: Sepsis: Recommended duration is dependent upon patient's clinical response and source identification

[] Adjunct Antibiotics - amikacin (AMIKIN) 15 mg/kg IV +/- levofloxacin 750 mg IV (Single Response)

() amikacin (AMIKIN) IV

15 mg/kg, intravenous, for 30 Minutes, once, For 1 Doses
Classification: Narrow Spectrum Antibiotic

When multiple antimicrobial agents are ordered, you may administer these immediately at the SAME TIME via different IV sites. Do not wait for the first antibiotic to infuse. If agents are Y-site compatible, they may be administered per Y-site protocols. IF the ordered agents are NOT Y site compatible, then administer the Broad-spectrum antibiotic first. Refer to available Y site compatibility information and determination of broad-spectrum antibiotic selection chart.
Reason for Therapy: Bacterial Infection Suspected
Indication: Sepsis

() levofloxacin (LEVAQUIN) IV

750 mg, intravenous, once, For 1 Doses
Classification: Narrow Spectrum Antibiotic

When multiple antimicrobial agents are ordered, you may administer these immediately at the SAME TIME via different IV sites. Do not wait for the first antibiotic to infuse. If agents are Y-site compatible, they may be administered per Y-site protocols. IF the ordered agents are NOT Y site compatible, then administer the Broad-spectrum antibiotic first. Refer to available Y site compatibility information and determination of broad-spectrum antibiotic selection chart.
Reason for Therapy: Bacterial Infection Suspected
Indication: Sepsis
Recommendation: Sepsis: Recommended duration is dependent upon patient's clinical response and source identification

[] Suspected Anaerobe Coverage: metroNIDAZOLE (FLAGYL) 500 mg IV

[] metronIDAZOLE (FLAGYL) IV	500 mg, intravenous, once, For 1 Doses Classification: Narrow Spectrum Antibiotic
<p>When multiple antimicrobial agents are ordered, you may administer these immediately at the SAME TIME via different IV sites. Do not wait for the first antibiotic to infuse. If agents are Y-site compatible, they may be administered per Y-site protocols. IF the ordered agents are NOT Y site compatible, then administer the Broad-spectrum antibiotic first. Refer to available Y site compatibility information and determination of broad-spectrum antibiotic selection chart.</p> <p>Reason for Therapy: Bacterial Infection Suspected Indication: Sepsis</p>	
<p>() aztreonam (AZACTAM) 2 g intraMUSCULAR + linezolid (ZYVOX) 600 mg IVPB</p>	
[] aztreonam (AZACTAM) injection	<p>2 g, intramuscular, once, For 1 Doses (Administer dose by deep IM into large muscle mass (e.g. gluteal muscles or lateral part of the thigh). Reason for Therapy: Bacterial Infection Suspected Indication: Sepsis IM Route Selection: I have opted to select the IM route because IV access could not be established</p>
[] linezolid in dextrose 5% (ZYVOX) IVPB	<p>600 mg, intravenous, for 60 Minutes, once, For 1 Doses Classification: Narrow Spectrum Antibiotic</p>
<p>When multiple antimicrobial agents are ordered, you may administer these immediately at the SAME TIME via different IV sites. Do not wait for the first antibiotic to infuse. If agents are Y-site compatible, they may be administered per Y-site protocols. IF the ordered agents are NOT Y site compatible, then administer the Broad-spectrum antibiotic first. Refer to available Y site compatibility information and determination of broad-spectrum antibiotic selection chart.</p> <p>Reason for Therapy: Bacterial Infection Suspected Indication: Sepsis Recommendation: Sepsis: Recommended duration is dependent upon patient's clinical response and source identification</p>	
<p>[] Adjunct Antibiotics - amikacin (AMIKIN) 15 mg/kg IV +/- levofloxacin 750 mg IV (Single Response)</p>	
() amikacin (AMIKIN) IV	<p>15 mg/kg, intravenous, for 30 Minutes, once, For 1 Doses Classification: Narrow Spectrum Antibiotic</p>
<p>When multiple antimicrobial agents are ordered, you may administer these immediately at the SAME TIME via different IV sites. Do not wait for the first antibiotic to infuse. If agents are Y-site compatible, they may be administered per Y-site protocols. IF the ordered agents are NOT Y site compatible, then administer the Broad-spectrum antibiotic first. Refer to available Y site compatibility information and determination of broad-spectrum antibiotic selection chart.</p> <p>Reason for Therapy: Bacterial Infection Suspected Indication: Sepsis</p>	
() levofloxacin (LEVAQUIN) IV	<p>750 mg, intravenous, once, For 1 Doses Classification: Narrow Spectrum Antibiotic</p>
<p>When multiple antimicrobial agents are ordered, you may administer these immediately at the SAME TIME via different IV sites. Do not wait for the first antibiotic to infuse. If agents are Y-site compatible, they may be administered per Y-site protocols. IF the ordered agents are NOT Y site compatible, then administer the Broad-spectrum antibiotic first. Refer to available Y site compatibility information and determination of broad-spectrum antibiotic selection chart.</p> <p>Reason for Therapy: Bacterial Infection Suspected Indication: Sepsis Recommendation: Sepsis: Recommended duration is dependent upon patient's clinical response and source identification</p>	

Suspected Anaerobe Coverage: metroNIDAZOLE (FLAGYL) 500 mg IV

metroNIDAZOLE (FLAGYL) IV

500 mg, intravenous, once, For 1 Doses
Classification: Narrow Spectrum Antibiotic

When multiple antimicrobial agents are ordered, you may administer these immediately at the SAME TIME via different IV sites. Do not wait for the first antibiotic to infuse. If agents are Y-site compatible, they may be administered per Y-site protocols. IF the ordered agents are NOT Y site compatible, then administer the Broad-spectrum antibiotic first. Refer to available Y site compatibility information and determination of broad-spectrum antibiotic selection chart.
Reason for Therapy: Bacterial Infection Suspected
Indication: Sepsis

Urinary Tract Infection (Single Response)

Does your patient have a SEVERE penicillin allergy?

No (Single Response)

cefTRIAxone (ROCEPHIN) 1 g IV

cefTRIAxone (ROCEPHIN) IV

1 g, intravenous, for 30 Minutes, once, For 1 Doses
Classification: Broad Spectrum Antibiotic

When multiple antimicrobial agents are ordered, you may administer these immediately at the SAME TIME via different IV sites. Do not wait for the first antibiotic to infuse. If agents are Y-site compatible, they may be administered per Y-site protocols. IF the ordered agents are NOT Y site compatible, then administer the Broad-spectrum antibiotic first. Refer to available Y site compatibility information and determination of broad-spectrum antibiotic selection chart.
Reason for Therapy: Bacterial Infection Suspected
Indication: Sepsis
Recommendation: Sepsis: Recommended duration is dependent upon patient's clinical response and source identification

Optional IV Antibiotic Addition - tobramycin (TOBREX) 7 mg/kg IV

tobramycin (TOBREX) IV

7 mg/kg, intravenous, for 60 Minutes, once, For 1 Doses
Pharmacy Consult to dose based on renal function

Classification: Narrow Spectrum Antibiotic

When multiple antimicrobial agents are ordered, you may administer these immediately at the SAME TIME via different IV sites. Do not wait for the first antibiotic to infuse. If agents are Y-site compatible, they may be administered per Y-site protocols. IF the ordered agents are NOT Y site compatible, then administer the Broad-spectrum antibiotic first. Refer to available Y site compatibility information and determination of broad-spectrum antibiotic selection chart.
Reason for Therapy: Bacterial Infection Suspected
Indication: Sepsis

Pharmacy consult to dose tobramycin

Routine, Until discontinued, Starting S
Which aminoglycoside do you need help dosing? tobramycin
Indication:

cefTRIAxone (ROCEPHIN) 1 g intraMUSCULAR

cefTRIAxone (ROCEPHIN) 1 g intraMUSCULAR

1 g, intramuscular, once, For 1 Doses
Intramuscular route selected because no IV access available. Administer dose by deep IM into large muscle mass (e.g. gluteal muscles or lateral part of the thigh).
Reason for Therapy: Bacterial Infection Suspected
Indication: Sepsis
Recommendation: Sepsis: Recommended duration is dependent upon patient's clinical response and source identification
IM Route Selection: I have opted to select the IM route because IV access could not be established

<input type="checkbox"/> Optional IV Antibiotic Addition - tobramycin (TOBREX) 7 mg/kg IV	
<input type="checkbox"/> tobramycin (TOBREX) IV	<p>7 mg/kg, intravenous, for 60 Minutes, once, For 1 Doses Pharmacy Consult to dose based on renal function</p> <p>Classification: Narrow Spectrum Antibiotic</p> <p>When multiple antimicrobial agents are ordered, you may administer these immediately at the SAME TIME via different IV sites. Do not wait for the first antibiotic to infuse. If agents are Y-site compatible, they may be administered per Y-site protocols. IF the ordered agents are NOT Y site compatible, then administer the Broad-spectrum antibiotic first. Refer to available Y site compatibility information and determination of broad-spectrum antibiotic selection chart. Reason for Therapy: Bacterial Infection Suspected Indication: Sepsis</p>
<input type="checkbox"/> Pharmacy consult to dose tobramycin	<p>Routine, Once For 1 Occurrences Which aminoglycoside do you need help dosing? tobramycin Indication:</p>
<input type="checkbox"/> ceFEPime 1 g IV	
<input type="checkbox"/> ceFEPime (MAXIPIME) IV	<p>1 g, intravenous, once, For 1 Doses Classification: Broad Spectrum Antibiotic</p> <p>When multiple antimicrobial agents are ordered, you may administer these immediately at the SAME TIME via different IV sites. Do not wait for the first antibiotic to infuse. If agents are Y-site compatible, they may be administered per Y-site protocols. IF the ordered agents are NOT Y site compatible, then administer the Broad-spectrum antibiotic first. Refer to available Y site compatibility information and determination of broad-spectrum antibiotic selection chart. Reason for Therapy: Bacterial Infection Suspected Indication: Sepsis Recommendation: Sepsis: Recommended duration is dependent upon patient's clinical response and source identification</p>
<input type="checkbox"/> Optional IV Antibiotic Addition - tobramycin (TOBREX) 7 mg/kg IV	
<input type="checkbox"/> tobramycin (TOBREX) IV	<p>7 mg/kg, intravenous, for 60 Minutes, once, For 1 Doses Pharmacy Consult to dose based on renal function</p> <p>Classification: Narrow Spectrum Antibiotic</p> <p>When multiple antimicrobial agents are ordered, you may administer these immediately at the SAME TIME via different IV sites. Do not wait for the first antibiotic to infuse. If agents are Y-site compatible, they may be administered per Y-site protocols. IF the ordered agents are NOT Y site compatible, then administer the Broad-spectrum antibiotic first. Refer to available Y site compatibility information and determination of broad-spectrum antibiotic selection chart. Reason for Therapy: Bacterial Infection Suspected Indication: Sepsis</p>
<input type="checkbox"/> Pharmacy consult to dose tobramycin	<p>Routine, Once For 1 Occurrences Which aminoglycoside do you need help dosing? tobramycin Indication: Sepsis - Urinary Tract Infection</p>
<input type="checkbox"/> ceFEPime 2 g intraMUSCULAR	

[] cefepime (MAXIPIME) intraMUSCULAR	<p>2 g, intramuscular, once, For 1 Doses Intramuscular route selected because no IV access available. Administer dose by deep IM into large muscle mass (e.g. gluteal muscles or lateral part of the thigh). Reason for Therapy: Bacterial Infection Suspected Indication: Sepsis Recommendation: Sepsis: Recommended duration is dependent upon patient's clinical response and source identification IM Route Selection: I have opted to select the IM route because IV access could not be established</p>
[] Optional IV Antibiotic Addition - tobramycin (TOBREX) 7 mg/kg IV	<p>[] tobramycin (TOBREX) IV</p> <p>7 mg/kg, intravenous, for 60 Minutes, once, For 1 Doses Pharmacy Consult to dose based on renal function</p> <p>Classification: Narrow Spectrum Antibiotic</p> <p>When multiple antimicrobial agents are ordered, you may administer these immediately at the SAME TIME via different IV sites. Do not wait for the first antibiotic to infuse. If agents are Y-site compatible, they may be administered per Y-site protocols. IF the ordered agents are NOT Y site compatible, then administer the Broad-spectrum antibiotic first. Refer to available Y site compatibility information and determination of broad-spectrum antibiotic selection chart. Reason for Therapy: Bacterial Infection Suspected Indication: Sepsis</p>
[] Pharmacy consult to dose tobramycin	<p>Routine, Once For 1 Occurrences Which aminoglycoside do you need help dosing? tobramycin Indication: Sepsis - Urinary Tract Infection</p>
() piperacillin-tazobactam (ZOSYN) 4.5 g IV (NOT HMW)	<p>[] piperacillin-tazobactam (ZOSYN) IV</p> <p>4.5 g, intravenous, once, For 1 Doses Classification: Broad Spectrum Antibiotic</p> <p>When multiple antimicrobial agents are ordered, you may administer these immediately at the SAME TIME via different IV sites. Do not wait for the first antibiotic to infuse. If agents are Y-site compatible, they may be administered per Y-site protocols. IF the ordered agents are NOT Y site compatible, then administer the Broad-spectrum antibiotic first. Refer to available Y site compatibility information and determination of broad-spectrum antibiotic selection chart. Reason for Therapy: Bacterial Infection Suspected Indication: Sepsis Recommendation: Sepsis: Recommended duration is dependent upon patient's clinical response and source identification</p>
[] Optional IV Antibiotic Addition - tobramycin (TOBREX) 7 mg/kg IV	<p>[] tobramycin (TOBREX) IV</p> <p>7 mg/kg, intravenous, for 60 Minutes, once, For 1 Doses Pharmacy Consult to dose based on renal function</p> <p>Classification: Narrow Spectrum Antibiotic</p> <p>When multiple antimicrobial agents are ordered, you may administer these immediately at the SAME TIME via different IV sites. Do not wait for the first antibiotic to infuse. If agents are Y-site compatible, they may be administered per Y-site protocols. IF the ordered agents are NOT Y site compatible, then administer the Broad-spectrum antibiotic first. Refer to available Y site compatibility information and determination of broad-spectrum antibiotic selection chart. Reason for Therapy: Bacterial Infection Suspected Indication: Sepsis</p>
[] Pharmacy consult to dose tobramycin	<p>Routine, Once For 1 Occurrences Which aminoglycoside do you need help dosing? tobramycin Indication:</p>

<input type="checkbox"/> piperacillin-tazobactam (ZOSYN) EI 4.5 g IV (HMW Only)	
<input type="checkbox"/> piperacillin-tazobactam (ZOSYN) EI IV	4.5 g, intravenous, for 4 Hours, once, For 1 Doses Classification: Broad Spectrum Antibiotic
	<p>When multiple antimicrobial agents are ordered, you may administer these immediately at the SAME TIME via different IV sites. Do not wait for the first antibiotic to infuse. If agents are Y-site compatible, they may be administered per Y-site protocols. IF the ordered agents are NOT Y site compatible, then administer the Broad-spectrum antibiotic first. Refer to available Y site compatibility information and determination of broad-spectrum antibiotic selection chart.</p> <p>Reason for Therapy: Bacterial Infection Suspected Indication: Sepsis Recommendation: Sepsis: Recommended duration is dependent upon patient's clinical response and source identification</p>
<input type="checkbox"/> Optional IV Antibiotic Addition - tobramycin (TOBREX) 7 mg/kg IV	
<input type="checkbox"/> tobramycin (TOBREX) IV	7 mg/kg, intravenous, for 60 Minutes, once, For 1 Doses Pharmacy Consult to dose based on renal function
	<p>Classification: Narrow Spectrum Antibiotic</p> <p>When multiple antimicrobial agents are ordered, you may administer these immediately at the SAME TIME via different IV sites. Do not wait for the first antibiotic to infuse. If agents are Y-site compatible, they may be administered per Y-site protocols. IF the ordered agents are NOT Y site compatible, then administer the Broad-spectrum antibiotic first. Refer to available Y site compatibility information and determination of broad-spectrum antibiotic selection chart.</p> <p>Reason for Therapy: Bacterial Infection Suspected Indication: Sepsis</p>
<input type="checkbox"/> Pharmacy consult to dose tobramycin	Routine, Once For 1 Occurrences Which aminoglycoside do you need help dosing? tobramycin Indication: Sepsis - Urinary Tract Infection
<input type="checkbox"/> ertapenem (INVANZ) 1 g IV	
<input type="checkbox"/> ertapenem (INVanz) IV	1 g, intravenous, once, For 1 Doses Classification: Broad Spectrum Antibiotic
	<p>When multiple antimicrobial agents are ordered, you may administer these immediately at the SAME TIME via different IV sites. Do not wait for the first antibiotic to infuse. If agents are Y-site compatible, they may be administered per Y-site protocols. IF the ordered agents are NOT Y site compatible, then administer the Broad-spectrum antibiotic first. Refer to available Y site compatibility information and determination of broad-spectrum antibiotic selection chart.</p> <p>Reason for Therapy: Bacterial Infection Suspected Indication: Sepsis Recommendation: Sepsis: Recommended duration is dependent upon patient's clinical response and source identification</p>
<input type="checkbox"/> Optional IV Antibiotic Addition - tobramycin (TOBREX) 7 mg/kg IV	

[] tobramycin (TOBREX) IV	7 mg/kg, intravenous, for 60 Minutes, once, For 1 Doses Pharmacy Consult to dose based on renal function
	Classification: Narrow Spectrum Antibiotic
	When multiple antimicrobial agents are ordered, you may administer these immediately at the SAME TIME via different IV sites. Do not wait for the first antibiotic to infuse. If agents are Y-site compatible, they may be administered per Y-site protocols. IF the ordered agents are NOT Y site compatible, then administer the Broad-spectrum antibiotic first. Refer to available Y site compatibility information and determination of broad-spectrum antibiotic selection chart. Reason for Therapy: Bacterial Infection Suspected Indication: Sepsis
[] Pharmacy consult to dose tobramycin	Routine, Once For 1 Occurrences Which aminoglycoside do you need help dosing? tobramycin Indication: Sepsis - Urinary Tract Infection
() ertapenem (INVANZ) 1 g in lidocaine (PF) intraMUSCULAR	
[] ertapenem in lidocaine PF (INVanz) intraMUSCULAR	1 g, intramuscular, once, For 1 Doses Intramuscular route selected because no IV access available. Administer dose by deep IM into large muscle mass (e.g. gluteal muscles or lateral part of the thigh). Reason for Therapy: Bacterial Infection Suspected Indication: Sepsis Recommendation: Sepsis: Recommended duration is dependent upon patient's clinical response and source identification IM Route Selection: I have opted to select the IM route because IV access could not be established
[] Optional IV Antibiotic Addition - tobramycin (TOBREX) 7 mg/kg IV	
[] tobramycin (TOBREX) IV	7 mg/kg, intravenous, for 60 Minutes, once, For 1 Doses Pharmacy Consult to dose based on renal function
	Classification: Narrow Spectrum Antibiotic
	When multiple antimicrobial agents are ordered, you may administer these immediately at the SAME TIME via different IV sites. Do not wait for the first antibiotic to infuse. If agents are Y-site compatible, they may be administered per Y-site protocols. IF the ordered agents are NOT Y site compatible, then administer the Broad-spectrum antibiotic first. Refer to available Y site compatibility information and determination of broad-spectrum antibiotic selection chart. Reason for Therapy: Bacterial Infection Suspected Indication: Sepsis
[] Pharmacy consult to dose tobramycin	Routine, Once For 1 Occurrences Which aminoglycoside do you need help dosing? tobramycin Indication: Sepsis - Urinary Tract Infection
() meropenem (MERREM) IV	
[] meropenem (MERREM) IV	1 g, intravenous, once, For 1 Doses Classification: Broad Spectrum Antibiotic When multiple antimicrobial agents are ordered, you may administer these immediately at the SAME TIME via different IV sites. Do not wait for the first antibiotic to infuse. If agents are Y-site compatible, they may be administered per Y-site protocols. IF the ordered agents are NOT Y site compatible, then administer the Broad-spectrum antibiotic first. Refer to available Y site compatibility information and determination of broad-spectrum antibiotic selection chart. Reason for Therapy: Bacterial Infection Suspected Indication: Sepsis Recommendation: Sepsis: Recommended duration is dependent upon patient's clinical response and source identification

Optional IV Antibiotic Addition - tobramycin (TOBREX) 7 mg/kg IV

tobramycin (TOBREX) IV

7 mg/kg, intravenous, for 60 Minutes, once, For 1 Doses
Pharmacy Consult to dose based on renal function

Classification: Narrow Spectrum Antibiotic

When multiple antimicrobial agents are ordered, you may administer these immediately at the SAME TIME via different IV sites. Do not wait for the first antibiotic to infuse. If agents are Y-site compatible, they may be administered per Y-site protocols. IF the ordered agents are NOT Y site compatible, then administer the Broad-spectrum antibiotic first. Refer to available Y site compatibility information and determination of broad-spectrum antibiotic selection chart.

Reason for Therapy: Bacterial Infection Suspected

Indication: Sepsis

Pharmacy consult to dose tobramycin

Routine, Once For 1 Occurrences

Which aminoglycoside do you need help dosing? tobramycin

Indication: Sepsis - Urinary Tract Infection

meropenem (MERREM) 1 g intraMUSCULAR

meropenem (MERREM) intraMUSCULAR

1 g, intramuscular, once, For 1 Doses

Intramuscular route selected because no IV access available.

Administer dose by deep IM into large muscle mass (e.g. gluteal muscles or lateral part of the thigh).

Reason for Therapy: Bacterial Infection Suspected

Indication: Sepsis

Recommendation: Sepsis: Recommended duration is dependent upon patient's clinical response and source identification

IM Route Selection: I have opted to select the IM route because IV access could not be established

Optional IV Antibiotic Addition - tobramycin (TOBREX) 7 mg/kg IV

tobramycin (TOBREX) IV

7 mg/kg, intravenous, for 60 Minutes, once, For 1 Doses
Pharmacy Consult to dose based on renal function

Classification: Narrow Spectrum Antibiotic

When multiple antimicrobial agents are ordered, you may administer these immediately at the SAME TIME via different IV sites. Do not wait for the first antibiotic to infuse. If agents are Y-site compatible, they may be administered per Y-site protocols. IF the ordered agents are NOT Y site compatible, then administer the Broad-spectrum antibiotic first. Refer to available Y site compatibility information and determination of broad-spectrum antibiotic selection chart.

Reason for Therapy: Bacterial Infection Suspected

Indication: Sepsis

Pharmacy consult to dose tobramycin

Routine, Once For 1 Occurrences

Which aminoglycoside do you need help dosing? tobramycin

Indication:

Yes (Single Response)

aztreonam (AZACTAM) 2 g IV

aztreonam (AZACTAM) 2 g IV

2 g, intravenous, once, For 1 Doses

Classification: Narrow Spectrum Antibiotic

When multiple antimicrobial agents are ordered, you may administer these immediately at the SAME TIME via different IV sites. Do not wait for the first antibiotic to infuse. If agents are Y-site compatible, they may be administered per Y-site protocols. IF the ordered agents are NOT Y site compatible, then administer the Broad-spectrum antibiotic first. Refer to available Y site compatibility information and determination of broad-spectrum antibiotic selection chart.

Reason for Therapy: Bacterial Infection Suspected

Indication: Sepsis

Optional IV Antibiotic Addition - tobramycin (TOBREX) 7 mg/kg IV + Pharmacy Consult to Dose

tobramycin (TOBREX) 7 mg/kg IVPB 7 mg/kg, intravenous, for 60 Minutes, once, For 1 Doses
Pharmacy Consult to dose based on renal function
Reason for Therapy: Bacterial Infection Suspected
Indication: Sepsis

Pharmacy consult to dose tobramycin STAT, Once For 1 Occurrences
Which aminoglycoside do you need help dosing? tobramycin
Indication: Sepsis - Urinary Tract Infection

aztreonam (AZACTAM) intraMUSCULAR

aztreonam (AZACTAM) intraMUSCULAR 2 g, intramuscular, once, For 1 Doses
Administer dose by deep IM into large muscle mass (e.g. gluteal muscles or lateral part of the thigh).
Reason for Therapy: Bacterial Infection Suspected
Indication: Sepsis
IM Route Selection: I have opted to select the IM route because IV access could not be established

Optional IV Antibiotic Addition - tobramycin (TOBREX) 7 mg/kg IV + Pharmacy Consult to Dose

tobramycin (TOBREX) 7 mg/kg IVPB 7 mg/kg, intravenous, for 60 Minutes, once, For 1 Doses
Pharmacy Consult to dose based on renal function
Reason for Therapy: Bacterial Infection Suspected
Indication: Sepsis

Pharmacy consult to dose tobramycin STAT, Once For 1 Occurrences
Which aminoglycoside do you need help dosing? tobramycin
Indication: Sepsis - Urinary Tract Infection

Skin and Soft Tissue Infection - Uncomplicated Cellulitis (Single Response)

Does your patient have a SEVERE vancomycin allergy?

No (Single Response)

cefTRIAxone (ROCEPHIN) 1 g IV + vancomycin IV 20 mg/kg

cefTRIAxone (ROCEPHIN) IV 1 g, intravenous, for 30 Minutes, once, For 1 Doses
Classification: Broad Spectrum Antibiotic

When multiple antimicrobial agents are ordered, you may administer these immediately at the SAME TIME via different IV sites. Do not wait for the first antibiotic to infuse. If agents are Y-site compatible, they may be administered per Y-site protocols. IF the ordered agents are NOT Y site compatible, then administer the Broad-spectrum antibiotic first. Refer to available Y site compatibility information and determination of broad-spectrum antibiotic selection chart.

Reason for Therapy: Bacterial Infection Suspected
Indication: Sepsis

Recommendation: Sepsis: Recommended duration is dependent upon patient's clinical response and source identification

vancomycin (VANCOCIN) IV + Pharmacy Consult to Dose (Selection Required)

vancomycin (VANCOCIN) 20 mg/kg, intravenous, once, For 1 Doses
Classification: Narrow Spectrum Antibiotic

When multiple antimicrobial agents are ordered, you may administer these immediately at the SAME TIME via different IV sites. Do not wait for the first antibiotic to infuse. If agents are Y-site compatible, they may be administered per Y-site protocols. IF the ordered agents are NOT Y site compatible, then administer the Broad-spectrum antibiotic first. Refer to available Y site compatibility information and determination of broad-spectrum antibiotic selection chart.

Reason for Therapy: Bacterial Infection Suspected
Indication: Sepsis

Recommendation: Sepsis: Recommended duration is dependent upon patient's clinical response and source identification

[] Pharmacy consult to manage vancomycin	STAT, Until discontinued, Starting S Reason for Therapy: Bacterial Infection Suspected Duration of Therapy (Days): 1 Indication: Sepsis Recommendation: Sepsis: Recommended duration is dependent upon patient's clinical response and source identification
() cefTRIAxone (ROCEPHIN) 1 g intraMUSCULAR + vancomycin IV 20 mg/kg	
[] cefTRIAxone (ROCEPHIN) IM	1 g, intramuscular, once, For 1 Doses Intramuscular route selected because no IV access available. Administer dose by deep IM into large muscle mass (e.g. gluteal muscles or lateral part of the thigh). Reason for Therapy: Bacterial Infection Suspected Indication: Sepsis Recommendation: Sepsis: Recommended duration is dependent upon patient's clinical response and source identification IM Route Selection: I have opted to select the IM route because IV access could not be established
[] vancomycin (VANCOCIN) IV + Pharmacy Consult to Dose (Selection Required)	
[] vancomycin (VANCOCIN)	20 mg/kg, intravenous, once, For 1 Doses Classification: Narrow Spectrum Antibiotic When multiple antimicrobial agents are ordered, you may administer these immediately at the SAME TIME via different IV sites. Do not wait for the first antibiotic to infuse. If agents are Y-site compatible, they may be administered per Y-site protocols. IF the ordered agents are NOT Y site compatible, then administer the Broad-spectrum antibiotic first. Refer to available Y site compatibility information and determination of broad-spectrum antibiotic selection chart. Reason for Therapy: Bacterial Infection Suspected Indication: Sepsis Recommendation: Sepsis: Recommended duration is dependent upon patient's clinical response and source identification
[] Pharmacy consult to manage vancomycin	STAT, Until discontinued, Starting S Reason for Therapy: Bacterial Infection Suspected Duration of Therapy (Days): 1 Indication: Sepsis Recommendation: Sepsis: Recommended duration is dependent upon patient's clinical response and source identification
() Yes (Single Response)	
() cefTRIAxone (ROCEPHIN) 1 g IV + linezolid (ZYVOX) 600 mg IV	
[] cefTRIAxone (ROCEPHIN) IV	1 g, intravenous, for 30 Minutes, once, For 1 Doses Classification: Broad Spectrum Antibiotic When multiple antimicrobial agents are ordered, you may administer these immediately at the SAME TIME via different IV sites. Do not wait for the first antibiotic to infuse. If agents are Y-site compatible, they may be administered per Y-site protocols. IF the ordered agents are NOT Y site compatible, then administer the Broad-spectrum antibiotic first. Refer to available Y site compatibility information and determination of broad-spectrum antibiotic selection chart. Reason for Therapy: Bacterial Infection Suspected Indication: Sepsis Recommendation: Sepsis: Recommended duration is dependent upon patient's clinical response and source identification

linezolid in dextrose 5% (ZYVOX) IVPB

600 mg, intravenous, for 60 Minutes, once, For 1 Doses
Classification: Narrow Spectrum Antibiotic

When multiple antimicrobial agents are ordered, you may administer these immediately at the SAME TIME via different IV sites. Do not wait for the first antibiotic to infuse. If agents are Y-site compatible, they may be administered per Y-site protocols. IF the ordered agents are NOT Y site compatible, then administer the Broad-spectrum antibiotic first. Refer to available Y site compatibility information and determination of broad-spectrum antibiotic selection chart.

Reason for Therapy: Bacterial Infection Suspected

Indication: Sepsis

Recommendation: Sepsis: Recommended duration is dependent upon patient's clinical response and source identification

cefTRIAxone (ROCEPHIN) 1 g intraMUSCULAR +
linezolid (ZYVOX) 600 mg IV

cefTRIAxone (ROCEPHIN) IM

1 g, intramuscular, once, For 1 Doses

Intramuscular route selected because no IV access available.

Administer dose by deep IM into large muscle mass (e.g. gluteal muscles or lateral part of the thigh).

Reason for Therapy: Bacterial Infection Suspected

Indication: Sepsis

Recommendation: Sepsis: Recommended duration is dependent upon patient's clinical response and source identification

IM Route Selection: I have opted to select the IM route because IV access could not be established

linezolid in dextrose 5% (ZYVOX) IVPB

600 mg, intravenous, for 60 Minutes, once, For 1 Doses
Classification: Narrow Spectrum Antibiotic

When multiple antimicrobial agents are ordered, you may administer these immediately at the SAME TIME via different IV sites. Do not wait for the first antibiotic to infuse. If agents are Y-site compatible, they may be administered per Y-site protocols. IF the ordered agents are NOT Y site compatible, then administer the Broad-spectrum antibiotic first. Refer to available Y site compatibility information and determination of broad-spectrum antibiotic selection chart.

Reason for Therapy: Bacterial Infection Suspected

Indication: Sepsis

Skin and Soft Tissue Infection - Complicated (necrotizing fasciitis, gangrene, diabetic foot) (Single Response)

Does your patient have a SEVERE penicillin AND/OR vancomycin allergy?

No SEVERE Penicillin OR Vancomycin Allergy

piperacillin-tazobactam (ZOSYN) 4.5 g IV + vancomycin
15 mg/kg IV (NOT HMW)

piperacillin-tazobactam (ZOSYN) IV

3.375 g, intravenous, for .5 Hours, once, For 1 Doses
Classification: Broad Spectrum Antibiotic

When multiple antimicrobial agents are ordered, you may administer these immediately at the SAME TIME via different IV sites. Do not wait for the first antibiotic to infuse. If agents are Y-site compatible, they may be administered per Y-site protocols. IF the ordered agents are NOT Y site compatible, then administer the Broad-spectrum antibiotic first. Refer to available Y site compatibility information and determination of broad-spectrum antibiotic selection chart.

Reason for Therapy: Bacterial Infection Suspected

Indication: Sepsis

Recommendation: Sepsis: Recommended duration is dependent upon patient's clinical response and source identification

vancomycin (VANCOCIN) IV + Pharmacy Consult to
Dose (Selection Required)

[] vancomycin (VANCOGIN)	15 mg/kg, intravenous, every 12 hours Classification: Narrow Spectrum Antibiotic
	<p>When multiple antimicrobial agents are ordered, you may administer these immediately at the SAME TIME via different IV sites. Do not wait for the first antibiotic to infuse. If agents are Y-site compatible, they may be administered per Y-site protocols. IF the ordered agents are NOT Y site compatible, then administer the Broad-spectrum antibiotic first. Refer to available Y site compatibility information and determination of broad-spectrum antibiotic selection chart.</p> <p>Reason for Therapy: Bacterial Infection Suspected Indication: Sepsis Recommendation: Sepsis: Recommended duration is dependent upon patient's clinical response and source identification</p>
[] Pharmacy consult to manage vancomycin	<p>STAT, Until discontinued, Starting S Reason for Therapy: Bacterial Infection Suspected Duration of Therapy (Days): Indication: Sepsis Recommendation: Sepsis: Recommended duration is dependent upon patient's clinical response and source identification</p>
[] Optional Adjunct: clindamycin (CLEOCIN) 900 mg IV	900 mg, intravenous, for 30 Minutes, once, For 1 Doses Classification: Narrow Spectrum Antibiotic
	<p>When multiple antimicrobial agents are ordered, you may administer these immediately at the SAME TIME via different IV sites. Do not wait for the first antibiotic to infuse. If agents are Y-site compatible, they may be administered per Y-site protocols. IF the ordered agents are NOT Y site compatible, then administer the Broad-spectrum antibiotic first. Refer to available Y site compatibility information and determination of broad-spectrum antibiotic selection chart.</p> <p>Reason for Therapy: Bacterial Infection Suspected Indication: Sepsis</p>
[] piperacillin-tazobactam (ZOSYN) EI 4.5 g IV + vancomycin 15 mg/kg IV (HMW Only)	
[] piperacillin-tazobactam (ZOSYN) EI IV	4.5 g, intravenous Classification: Broad Spectrum Antibiotic
	<p>When multiple antimicrobial agents are ordered, you may administer these immediately at the SAME TIME via different IV sites. Do not wait for the first antibiotic to infuse. If agents are Y-site compatible, they may be administered per Y-site protocols. IF the ordered agents are NOT Y site compatible, then administer the Broad-spectrum antibiotic first. Refer to available Y site compatibility information and determination of broad-spectrum antibiotic selection chart.</p> <p>Reason for Therapy: Bacterial Infection Suspected Indication: Sepsis Recommendation: Sepsis: Recommended duration is dependent upon patient's clinical response and source identification</p>
[] vancomycin (VANCOGIN) IV + Pharmacy Consult to Dose (Selection Required)	
[] vancomycin (VANCOGIN)	15 mg/kg, intravenous, every 12 hours Classification: Narrow Spectrum Antibiotic
	<p>When multiple antimicrobial agents are ordered, you may administer these immediately at the SAME TIME via different IV sites. Do not wait for the first antibiotic to infuse. If agents are Y-site compatible, they may be administered per Y-site protocols. IF the ordered agents are NOT Y site compatible, then administer the Broad-spectrum antibiotic first. Refer to available Y site compatibility information and determination of broad-spectrum antibiotic selection chart.</p> <p>Reason for Therapy: Bacterial Infection Suspected Indication: Sepsis Recommendation: Sepsis: Recommended duration is dependent upon patient's clinical response and source identification</p>

[] Pharmacy consult to manage vancomycin	STAT, Until discontinued, Starting S Reason for Therapy: Bacterial Infection Suspected Duration of Therapy (Days): Indication: Sepsis Recommendation: Sepsis: Recommended duration is dependent upon patient's clinical response and source identification
[] Optional Adjunct: clindamycin (CLEOCIN) 900 mg IV	900 mg, intravenous, for 30 Minutes, once, For 1 Doses Classification: Narrow Spectrum Antibiotic When multiple antimicrobial agents are ordered, you may administer these immediately at the SAME TIME via different IV sites. Do not wait for the first antibiotic to infuse. If agents are Y-site compatible, they may be administered per Y-site protocols. IF the ordered agents are NOT Y site compatible, then administer the Broad-spectrum antibiotic first. Refer to available Y site compatibility information and determination of broad-spectrum antibiotic selection chart. Reason for Therapy: Bacterial Infection Suspected Indication: Sepsis
() SEVERE Penicillin Allergy (Single Response)	
() aztreonam (AZACTAM) 2 g IV + tobramycin (TOBREX) 7 mg/kg IV + vancomycin 15 mg/kg IV + clindamycin (CLEOCIN) 600 mg IV	
[] aztreonam (AZACTAM) IV	2 g, intravenous, once, For 1 Doses Classification: Broad Spectrum Antibiotic When multiple antimicrobial agents are ordered, you may administer these immediately at the SAME TIME via different IV sites. Do not wait for the first antibiotic to infuse. If agents are Y-site compatible, they may be administered per Y-site protocols. IF the ordered agents are NOT Y site compatible, then administer the Broad-spectrum antibiotic first. Refer to available Y site compatibility information and determination of broad-spectrum antibiotic selection chart. Reason for Therapy: Bacterial Infection Suspected Indication: Sepsis
[] tobramycin (TOBREX) 7 mg/kg IV	7 mg/kg, intravenous, for 60 Minutes, every 24 hours Pharmacy Consult to dose based on renal function
[] tobramycin (TOBREX) IV	Classification: Narrow Spectrum Antibiotic When multiple antimicrobial agents are ordered, you may administer these immediately at the SAME TIME via different IV sites. Do not wait for the first antibiotic to infuse. If agents are Y-site compatible, they may be administered per Y-site protocols. IF the ordered agents are NOT Y site compatible, then administer the Broad-spectrum antibiotic first. Refer to available Y site compatibility information and determination of broad-spectrum antibiotic selection chart. Reason for Therapy: Bacterial Infection Suspected Indication: Sepsis
[] Pharmacy consult to dose tobramycin	Routine, Until discontinued, Starting S Which aminoglycoside do you need help dosing? tobramycin Indication: Sepsis - Complicated Skin and Soft Tissue Infection
[] vancomycin (VANCOCIN) IV + Pharmacy Consult to Dose (Selection Required)	

[] vancomycin (VANCOGIN)	15 mg/kg, intravenous, every 12 hours Classification: Narrow Spectrum Antibiotic
	<p>When multiple antimicrobial agents are ordered, you may administer these immediately at the SAME TIME via different IV sites. Do not wait for the first antibiotic to infuse. If agents are Y-site compatible, they may be administered per Y-site protocols. IF the ordered agents are NOT Y site compatible, then administer the Broad-spectrum antibiotic first. Refer to available Y site compatibility information and determination of broad-spectrum antibiotic selection chart.</p> <p>Reason for Therapy: Bacterial Infection Suspected Indication: Sepsis Recommendation: Sepsis: Recommended duration is dependent upon patient's clinical response and source identification</p>
[] Pharmacy consult to manage vancomycin	<p>STAT, Until discontinued, Starting S Reason for Therapy: Bacterial Infection Suspected Duration of Therapy (Days): Indication: Sepsis Recommendation: Sepsis: Recommended duration is dependent upon patient's clinical response and source identification</p>
[] clindamycin (CLEOCIN) IV	900 mg, intravenous, for 30 Minutes, once, For 1 Doses Classification: Narrow Spectrum Antibiotic
	<p>When multiple antimicrobial agents are ordered, you may administer these immediately at the SAME TIME via different IV sites. Do not wait for the first antibiotic to infuse. If agents are Y-site compatible, they may be administered per Y-site protocols. IF the ordered agents are NOT Y site compatible, then administer the Broad-spectrum antibiotic first. Refer to available Y site compatibility information and determination of broad-spectrum antibiotic selection chart.</p> <p>Reason for Therapy: Bacterial Infection Suspected Indication: Sepsis</p>
() aztreonam (AZACTAM) 2 g IV + tobramycin (TOBREX) 7 mg/kg IV + vancomycin 15 mg/kg IV + metroNIDAZOLE (FLAGYL) 500 mg IV	
[] aztreonam (AZACTAM) IV	2 g, intravenous, once, For 1 Doses Classification: Broad Spectrum Antibiotic
	<p>When multiple antimicrobial agents are ordered, you may administer these immediately at the SAME TIME via different IV sites. Do not wait for the first antibiotic to infuse. If agents are Y-site compatible, they may be administered per Y-site protocols. IF the ordered agents are NOT Y site compatible, then administer the Broad-spectrum antibiotic first. Refer to available Y site compatibility information and determination of broad-spectrum antibiotic selection chart.</p> <p>Reason for Therapy: Bacterial Infection Suspected Indication: Sepsis</p>
[] tobramycin (TOBREX) 7 mg/kg IV	
[] tobramycin (TOBREX) IV	7 mg/kg, intravenous, for 60 Minutes, every 24 hours Pharmacy Consult to dose based on renal function
	<p>Classification: Narrow Spectrum Antibiotic</p> <p>When multiple antimicrobial agents are ordered, you may administer these immediately at the SAME TIME via different IV sites. Do not wait for the first antibiotic to infuse. If agents are Y-site compatible, they may be administered per Y-site protocols. IF the ordered agents are NOT Y site compatible, then administer the Broad-spectrum antibiotic first. Refer to available Y site compatibility information and determination of broad-spectrum antibiotic selection chart.</p> <p>Reason for Therapy: Bacterial Infection Suspected Indication: Sepsis</p>

[] Pharmacy consult to dose tobramycin	Routine, Until discontinued, Starting S Which aminoglycoside do you need help dosing? tobramycin Indication: Sepsis - Complicated Skin and Soft Tissue Infection
[] vancomycin (VANCOCIN) IV + Pharmacy Consult to Dose (Selection Required)	
[] vancomycin (VANCOCIN)	15 mg/kg, intravenous, every 12 hours Classification: Narrow Spectrum Antibiotic
	When multiple antimicrobial agents are ordered, you may administer these immediately at the SAME TIME via different IV sites. Do not wait for the first antibiotic to infuse. If agents are Y-site compatible, they may be administered per Y-site protocols. IF the ordered agents are NOT Y site compatible, then administer the Broad-spectrum antibiotic first. Refer to available Y site compatibility information and determination of broad-spectrum antibiotic selection chart. Reason for Therapy: Bacterial Infection Suspected Indication: Sepsis Recommendation: Sepsis: Recommended duration is dependent upon patient's clinical response and source identification
[] Pharmacy consult to manage vancomycin	STAT, Until discontinued, Starting S Reason for Therapy: Bacterial Infection Suspected Duration of Therapy (Days): Indication: Sepsis - Complicated Skin and Soft Tissue Infection Indication: Sepsis Recommendation: Sepsis: Recommended duration is dependent upon patient's clinical response and source identification
[] metroNIDAZOLE (FLAGYL) IV	500 mg, intravenous, once, For 1 Doses Classification: Narrow Spectrum Antibiotic
	When multiple antimicrobial agents are ordered, you may administer these immediately at the SAME TIME via different IV sites. Do not wait for the first antibiotic to infuse. If agents are Y-site compatible, they may be administered per Y-site protocols. IF the ordered agents are NOT Y site compatible, then administer the Broad-spectrum antibiotic first. Refer to available Y site compatibility information and determination of broad-spectrum antibiotic selection chart. Reason for Therapy: Bacterial Infection Suspected Indication: Sepsis
() aztreonam (AZACTAM) 2 g intraMUSCULAR + tobramycin (TOBREX) 7 mg/kg IV + vancomycin 15 mg/kg IV + clindamycin (CLEOCIN) 600 mg IV	
[] aztreonam (AZACTAM) intraMUSCULAR	2 g, intramuscular, once, For 1 Doses (Administer dose by deep IM into large muscle mass (e.g. gluteal muscles or lateral part of the thigh). Reason for Therapy: Bacterial Infection Suspected Indication: Sepsis IM Route Selection: I have opted to select the IM route because IV access could not be established
[] tobramycin (TOBREX) 7 mg/kg IV	
[] tobramycin (TOBREX) IV	7 mg/kg, intravenous, for 60 Minutes, every 24 hours Pharmacy Consult to dose based on renal function
	Classification: Narrow Spectrum Antibiotic When multiple antimicrobial agents are ordered, you may administer these immediately at the SAME TIME via different IV sites. Do not wait for the first antibiotic to infuse. If agents are Y-site compatible, they may be administered per Y-site protocols. IF the ordered agents are NOT Y site compatible, then administer the Broad-spectrum antibiotic first. Refer to available Y site compatibility information and determination of broad-spectrum antibiotic selection chart. Reason for Therapy: Bacterial Infection Suspected Indication: Sepsis

[] Pharmacy consult to dose tobramycin	Routine, Until discontinued, Starting S Which aminoglycoside do you need help dosing? tobramycin Indication: Sepsis - Complicated Skin and Soft Tissue Infection
[] vancomycin (VANCOCIN) IV + Pharmacy Consult to Dose (Selection Required)	
[] vancomycin (VANCOCIN)	15 mg/kg, intravenous, every 12 hours Classification: Narrow Spectrum Antibiotic When multiple antimicrobial agents are ordered, you may administer these immediately at the SAME TIME via different IV sites. Do not wait for the first antibiotic to infuse. If agents are Y-site compatible, they may be administered per Y-site protocols. IF the ordered agents are NOT Y site compatible, then administer the Broad-spectrum antibiotic first. Refer to available Y site compatibility information and determination of broad-spectrum antibiotic selection chart. Reason for Therapy: Bacterial Infection Suspected Indication: Sepsis Recommendation: Sepsis: Recommended duration is dependent upon patient's clinical response and source identification
[] Pharmacy consult to manage vancomycin	STAT, Until discontinued, Starting S Reason for Therapy: Bacterial Infection Suspected Duration of Therapy (Days): Indication: Sepsis Recommendation: Sepsis: Recommended duration is dependent upon patient's clinical response and source identification
[] clindamycin (CLEOCIN) IV	900 mg, intravenous, for 30 Minutes, once, For 1 Doses Classification: Narrow Spectrum Antibiotic When multiple antimicrobial agents are ordered, you may administer these immediately at the SAME TIME via different IV sites. Do not wait for the first antibiotic to infuse. If agents are Y-site compatible, they may be administered per Y-site protocols. IF the ordered agents are NOT Y site compatible, then administer the Broad-spectrum antibiotic first. Refer to available Y site compatibility information and determination of broad-spectrum antibiotic selection chart. Reason for Therapy: Bacterial Infection Suspected Indication: Sepsis
() aztreonam (AZACTAM) 2 g intraMUSCULAR + tobramycin (TOBREX) 7 mg/kg IV + vancomycin 15 mg/kg IV + metroNIDAZOLE (FLAGYL) 500 mg IV	
[] aztreonam (AZACTAM) intraMUSCULAR	2 g, intramuscular, once, For 1 Doses Administer dose by deep IM into large muscle mass (e.g. gluteal muscles or lateral part of the thigh). Reason for Therapy: Bacterial Infection Suspected Indication: Sepsis IM Route Selection: I have opted to select the IM route because IV access could not be established
[] tobramycin (TOBREX) 7 mg/kg IV + Pharmacy Consult to Dose	
[] tobramycin (TOBREX) 7 mg/kg IVPB	7 mg/kg, intravenous, for 60 Minutes, every 24 hours Pharmacy Consult to dose based on renal function Classification: Narrow Spectrum Antibiotic When multiple antimicrobial agents are ordered, you may administer these immediately at the SAME TIME via different IV sites. Do not wait for the first antibiotic to infuse. If agents are Y-site compatible, they may be administered per Y-site protocols. IF the ordered agents are NOT Y site compatible, then administer the Broad-spectrum antibiotic first. Refer to available Y site compatibility information and determination of broad-spectrum antibiotic selection chart. Reason for Therapy: Bacterial Infection Suspected Indication: Sepsis

[] Pharmacy consult to dose tobramycin	STAT, Until discontinued, Starting S Which aminoglycoside do you need help dosing? tobramycin Indication: Sepsis - Complicated Skin and Soft Tissue Infection
[] vancomycin (VANCOCIN) IV + Pharmacy Consult to Dose (Selection Required)	
[] vancomycin (VANCOCIN) IV	15 mg/kg, intravenous, every 12 hours Classification: Broad Spectrum Antibiotic When multiple antimicrobial agents are ordered, you may administer these immediately at the SAME TIME via different IV sites. Do not wait for the first antibiotic to infuse. If agents are Y-site compatible, they may be administered per Y-site protocols. IF the ordered agents are NOT Y site compatible, then administer the Broad-spectrum antibiotic first. Refer to available Y site compatibility information and determination of broad-spectrum antibiotic selection chart. Reason for Therapy: Bacterial Infection Suspected Indication: Sepsis Recommendation: Sepsis: Recommended duration is dependent upon patient's clinical response and source identification
[] Pharmacy consult to manage vancomycin	STAT, Until discontinued, Starting S Reason for Therapy: Bacterial Infection Suspected Duration of Therapy (Days): Indication: Sepsis Recommendation: Sepsis: Recommended duration is dependent upon patient's clinical response and source identification
[] metroNIDAZOLE (FLAGYL) IV	500 mg, intravenous, once, For 1 Doses Classification: Narrow Spectrum Antibiotic When multiple antimicrobial agents are ordered, you may administer these immediately at the SAME TIME via different IV sites. Do not wait for the first antibiotic to infuse. If agents are Y-site compatible, they may be administered per Y-site protocols. IF the ordered agents are NOT Y site compatible, then administer the Broad-spectrum antibiotic first. Refer to available Y site compatibility information and determination of broad-spectrum antibiotic selection chart. Reason for Therapy: Bacterial Infection Suspected Indication: Sepsis
() SEVERE Vancomycin Allergy	
[] piperacillin-tazobactam (ZOSYN) 4.5 g IV + linezolid (ZYVOX) 600 mg IV (NOT HMW)	
[] piperacillin-tazobactam (ZOSYN) IV	4.5 g, intravenous, for .5 Hours, once, For 1 Doses Classification: Broad Spectrum Antibiotic When multiple antimicrobial agents are ordered, you may administer these immediately at the SAME TIME via different IV sites. Do not wait for the first antibiotic to infuse. If agents are Y-site compatible, they may be administered per Y-site protocols. IF the ordered agents are NOT Y site compatible, then administer the Broad-spectrum antibiotic first. Refer to available Y site compatibility information and determination of broad-spectrum antibiotic selection chart. Reason for Therapy: Bacterial Infection Suspected Indication: Sepsis Recommendation: Sepsis: Recommended duration is dependent upon patient's clinical response and source identification

[] linezolid in dextrose 5% (ZYVOX) IVPB	600 mg, intravenous, for 60 Minutes, once, For 1 Doses Classification: Narrow Spectrum Antibiotic
	<p>When multiple antimicrobial agents are ordered, you may administer these immediately at the SAME TIME via different IV sites. Do not wait for the first antibiotic to infuse. If agents are Y-site compatible, they may be administered per Y-site protocols. IF the ordered agents are NOT Y site compatible, then administer the Broad-spectrum antibiotic first. Refer to available Y site compatibility information and determination of broad-spectrum antibiotic selection chart.</p> <p>Reason for Therapy: Bacterial Infection Suspected Indication: Sepsis Recommendation: Sepsis: Recommended duration is dependent upon patient's clinical response and source identification</p>
[] Optional Adjunct: clindamycin (CLEOCIN) 900 mg IV	900 mg, intravenous, for 30 Minutes, every 8 hours Classification: Narrow Spectrum Antibiotic
	<p>When multiple antimicrobial agents are ordered, you may administer these immediately at the SAME TIME via different IV sites. Do not wait for the first antibiotic to infuse. If agents are Y-site compatible, they may be administered per Y-site protocols. IF the ordered agents are NOT Y site compatible, then administer the Broad-spectrum antibiotic first. Refer to available Y site compatibility information and determination of broad-spectrum antibiotic selection chart.</p> <p>Reason for Therapy: Bacterial Infection Suspected Indication: Sepsis</p>
[] piperacillin-tazobactam (ZOSYN) EI 4.5 g IV + linezolid (ZYVOX) 600 mg IV (HMW Only)	
[] piperacillin-tazobactam (ZOSYN) EI IV	4.5 g, intravenous, for 4 Hours, once, For 1 Doses Classification: Narrow Spectrum Antibiotic
	<p>When multiple antimicrobial agents are ordered, you may administer these immediately at the SAME TIME via different IV sites. Do not wait for the first antibiotic to infuse. If agents are Y-site compatible, they may be administered per Y-site protocols. IF the ordered agents are NOT Y site compatible, then administer the Broad-spectrum antibiotic first. Refer to available Y site compatibility information and determination of broad-spectrum antibiotic selection chart.</p> <p>Reason for Therapy: Bacterial Infection Suspected Indication: Sepsis Recommendation: Sepsis: Recommended duration is dependent upon patient's clinical response and source identification</p>
[] linezolid in dextrose 5% (ZYVOX) IVPB	600 mg, intravenous, for 60 Minutes, once, For 1 Doses Classification: Narrow Spectrum Antibiotic
	<p>When multiple antimicrobial agents are ordered, you may administer these immediately at the SAME TIME via different IV sites. Do not wait for the first antibiotic to infuse. If agents are Y-site compatible, they may be administered per Y-site protocols. IF the ordered agents are NOT Y site compatible, then administer the Broad-spectrum antibiotic first. Refer to available Y site compatibility information and determination of broad-spectrum antibiotic selection chart.</p> <p>Reason for Therapy: Bacterial Infection Suspected Indication: Sepsis Recommendation: Sepsis: Recommended duration is dependent upon patient's clinical response and source identification</p>

<input type="checkbox"/> Optional Adjunct: clindamycin (CLEOCIN) 900 mg IV	900 mg, intravenous, for 30 Minutes, once, For 1 Doses Classification: Narrow Spectrum Antibiotic
<p>When multiple antimicrobial agents are ordered, you may administer these immediately at the SAME TIME via different IV sites. Do not wait for the first antibiotic to infuse. If agents are Y-site compatible, they may be administered per Y-site protocols. IF the ordered agents are NOT Y site compatible, then administer the Broad-spectrum antibiotic first. Refer to available Y site compatibility information and determination of broad-spectrum antibiotic selection chart.</p> <p>Reason for Therapy: Bacterial Infection Suspected Indication: Sepsis</p>	
() SEVERE Penicillin AND Vancomycin Allergy (Single Response)	
() aztreonam (AZACTAM) 2 g IV + tobramycin (TOBREX) 7 mg/kg IV + linezolid (ZYVOX) 600 mg IV + clindamycin (CLEOCIN) 600 mg IV	
<input type="checkbox"/> aztreonam (AZACTAM) IV	2 g, intravenous, once, For 1 Doses Classification: Broad Spectrum Antibiotic
<p>When multiple antimicrobial agents are ordered, you may administer these immediately at the SAME TIME via different IV sites. Do not wait for the first antibiotic to infuse. If agents are Y-site compatible, they may be administered per Y-site protocols. IF the ordered agents are NOT Y site compatible, then administer the Broad-spectrum antibiotic first. Refer to available Y site compatibility information and determination of broad-spectrum antibiotic selection chart.</p> <p>Reason for Therapy: Bacterial Infection Suspected Indication: Sepsis</p>	
<input type="checkbox"/> tobramycin (TOBREX) 7 mg/kg IV	7 mg/kg, intravenous, for 60 Minutes, every 24 hours Pharmacy Consult to dose based on renal function
<input type="checkbox"/> tobramycin (TOBREX) IV	Classification: Narrow Spectrum Antibiotic
<p>When multiple antimicrobial agents are ordered, you may administer these immediately at the SAME TIME via different IV sites. Do not wait for the first antibiotic to infuse. If agents are Y-site compatible, they may be administered per Y-site protocols. IF the ordered agents are NOT Y site compatible, then administer the Broad-spectrum antibiotic first. Refer to available Y site compatibility information and determination of broad-spectrum antibiotic selection chart.</p> <p>Reason for Therapy: Bacterial Infection Suspected Indication: Sepsis</p>	
<input type="checkbox"/> Pharmacy consult to dose tobramycin	Routine, Until discontinued, Starting S Which aminoglycoside do you need help dosing? tobramycin Indication: Sepsis - Complicated Skin and Soft Tissue Infection
<input type="checkbox"/> linezolid in dextrose 5% (ZYVOX) IVPB	600 mg, intravenous, for 60 Minutes, once, For 1 Doses Classification: Narrow Spectrum Antibiotic
<p>When multiple antimicrobial agents are ordered, you may administer these immediately at the SAME TIME via different IV sites. Do not wait for the first antibiotic to infuse. If agents are Y-site compatible, they may be administered per Y-site protocols. IF the ordered agents are NOT Y site compatible, then administer the Broad-spectrum antibiotic first. Refer to available Y site compatibility information and determination of broad-spectrum antibiotic selection chart.</p> <p>Reason for Therapy: Bacterial Infection Suspected Indication: Sepsis Recommendation: Sepsis: Recommended duration is dependent upon patient's clinical response and source identification</p>	

[] clindamycin (CLEOCIN) IV	900 mg, intravenous, for 30 Minutes, once, For 1 Doses Classification: Narrow Spectrum Antibiotic
	<p>When multiple antimicrobial agents are ordered, you may administer these immediately at the SAME TIME via different IV sites. Do not wait for the first antibiotic to infuse. If agents are Y-site compatible, they may be administered per Y-site protocols. IF the ordered agents are NOT Y site compatible, then administer the Broad-spectrum antibiotic first. Refer to available Y site compatibility information and determination of broad-spectrum antibiotic selection chart.</p> <p>Reason for Therapy: Bacterial Infection Suspected Indication: Sepsis</p>
() aztreonam (AZACTAM) 2 g IV + tobramycin (TOBREX) 7 mg/kg IV + linezolid (ZYVOX) 600 mg IV + metroNIDAZOLE (FLAGYL) 500 mg IV	
[] aztreonam (AZACTAM) IV	2 g, intravenous, once, For 1 Doses Classification: Broad Spectrum Antibiotic
	<p>When multiple antimicrobial agents are ordered, you may administer these immediately at the SAME TIME via different IV sites. Do not wait for the first antibiotic to infuse. If agents are Y-site compatible, they may be administered per Y-site protocols. IF the ordered agents are NOT Y site compatible, then administer the Broad-spectrum antibiotic first. Refer to available Y site compatibility information and determination of broad-spectrum antibiotic selection chart.</p> <p>Reason for Therapy: Bacterial Infection Suspected Indication: Sepsis</p>
[] tobramycin (TOBREX) 7 mg/kg IV	
[] tobramycin (TOBREX) IV	7 mg/kg, intravenous, for 60 Minutes, every 24 hours Pharmacy Consult to dose based on renal function
	<p>Classification: Narrow Spectrum Antibiotic</p> <p>When multiple antimicrobial agents are ordered, you may administer these immediately at the SAME TIME via different IV sites. Do not wait for the first antibiotic to infuse. If agents are Y-site compatible, they may be administered per Y-site protocols. IF the ordered agents are NOT Y site compatible, then administer the Broad-spectrum antibiotic first. Refer to available Y site compatibility information and determination of broad-spectrum antibiotic selection chart.</p> <p>Reason for Therapy: Bacterial Infection Suspected Indication: Sepsis</p>
[] Pharmacy consult to dose tobramycin	Routine, Until discontinued, Starting S Which aminoglycoside do you need help dosing? tobramycin Indication: Sepsis - Complicated Skin and Soft Tissue Infection
[] linezolid in dextrose 5% (ZYVOX) IVPB	600 mg, intravenous, for 60 Minutes, once, For 1 Doses Classification: Narrow Spectrum Antibiotic
	<p>When multiple antimicrobial agents are ordered, you may administer these immediately at the SAME TIME via different IV sites. Do not wait for the first antibiotic to infuse. If agents are Y-site compatible, they may be administered per Y-site protocols. IF the ordered agents are NOT Y site compatible, then administer the Broad-spectrum antibiotic first. Refer to available Y site compatibility information and determination of broad-spectrum antibiotic selection chart.</p> <p>Reason for Therapy: Bacterial Infection Suspected Indication: Sepsis Recommendation: Sepsis: Recommended duration is dependent upon patient's clinical response and source identification</p>

[] metroNIDAZOLE (FLAGYL) IV	<p>500 mg, intravenous, once, For 1 Doses Classification: Narrow Spectrum Antibiotic</p> <p>When multiple antimicrobial agents are ordered, you may administer these immediately at the SAME TIME via different IV sites. Do not wait for the first antibiotic to infuse. If agents are Y-site compatible, they may be administered per Y-site protocols. IF the ordered agents are NOT Y site compatible, then administer the Broad-spectrum antibiotic first. Refer to available Y site compatibility information and determination of broad-spectrum antibiotic selection chart. Reason for Therapy: Bacterial Infection Suspected Indication: Sepsis</p>
<p>() aztreonam (AZACTAM) 2 g intraMUSCULAR + tobramycin (TOBREX) 7 mg/kg IV + linezolid (ZYVOX) 600 mg IV + clindamycin (CLEOCIN) 600 mg IV</p>	
[] aztreonam (AZACTAM) intraMUSCULAR	<p>2 g, intramuscular, once, For 1 Doses Intramuscular route selected because no IV access available. Administer dose by deep IM into large muscle mass (e.g. gluteal muscles or lateral part of the thigh). Reason for Therapy: Bacterial Infection Suspected Indication: Sepsis IM Route Selection: I have opted to select the IM route because IV access could not be established</p>
[] tobramycin (TOBREX) 7 mg/kg IV	<p>7 mg/kg, intravenous, for 60 Minutes, every 24 hours Pharmacy Consult to dose based on renal function</p>
[] tobramycin (TOBREX) IV	<p>Classification: Narrow Spectrum Antibiotic</p> <p>When multiple antimicrobial agents are ordered, you may administer these immediately at the SAME TIME via different IV sites. Do not wait for the first antibiotic to infuse. If agents are Y-site compatible, they may be administered per Y-site protocols. IF the ordered agents are NOT Y site compatible, then administer the Broad-spectrum antibiotic first. Refer to available Y site compatibility information and determination of broad-spectrum antibiotic selection chart. Reason for Therapy: Bacterial Infection Suspected Indication: Sepsis</p>
[] Pharmacy consult to dose tobramycin	<p>Routine, Until discontinued, Starting S Which aminoglycoside do you need help dosing? tobramycin Indication: Sepsis - Complicated Skin and Soft Tissue Infection</p>
[] linezolid in dextrose 5% (ZYVOX) 600 mg/300 mL IVPB	<p>600 mg, intravenous, for 60 Minutes, once, For 1 Doses Classification: Narrow Spectrum Antibiotic</p> <p>When multiple antimicrobial agents are ordered, you may administer these immediately at the SAME TIME via different IV sites. Do not wait for the first antibiotic to infuse. If agents are Y-site compatible, they may be administered per Y-site protocols. IF the ordered agents are NOT Y site compatible, then administer the Broad-spectrum antibiotic first. Refer to available Y site compatibility information and determination of broad-spectrum antibiotic selection chart. Reason for Therapy: Bacterial Infection Suspected Indication: Sepsis Recommendation: Sepsis: Recommended duration is dependent upon patient's clinical response and source identification</p>

[] clindamycin (CLEOCIN) IV	600 mg, intravenous, for 30 Minutes, once, For 1 Doses Classification: Narrow Spectrum Antibiotic
<p>When multiple antimicrobial agents are ordered, you may administer these immediately at the SAME TIME via different IV sites. Do not wait for the first antibiotic to infuse. If agents are Y-site compatible, they may be administered per Y-site protocols. IF the ordered agents are NOT Y site compatible, then administer the Broad-spectrum antibiotic first. Refer to available Y site compatibility information and determination of broad-spectrum antibiotic selection chart.</p> <p>Reason for Therapy: Bacterial Infection Suspected Indication: Sepsis</p>	
<p>() aztreonam (AZACTAM) 2 g intraMUSCULAR + tobramycin (TOBREX) 7 mg/kg IV + linezolid (ZYVOX) 600 mg IV + metroNIDAZOLE (FLAGYL) 500 mg IV</p>	
[] aztreonam (AZACTAM) intraMUSCULAR	<p>2 g, intramuscular, once, For 1 Doses Administer dose by deep IM into large muscle mass (e.g. gluteal muscles or lateral part of the thigh). Reason for Therapy: Bacterial Infection Suspected Indication: Sepsis IM Route Selection: I have opted to select the IM route because IV access could not be established</p>
<p>[] tobramycin (TOBREX) 7 mg/kg IV + Pharmacy Consult to Dose</p>	
[] tobramycin (TOBREX) 7 mg/kg IVPB	<p>7 mg/kg, intravenous, for 60 Minutes, every 24 hours Pharmacy Consult to dose based on renal function Classification: Narrow Spectrum Antibiotic</p>
<p>When multiple antimicrobial agents are ordered, you may administer these immediately at the SAME TIME via different IV sites. Do not wait for the first antibiotic to infuse. If agents are Y-site compatible, they may be administered per Y-site protocols. IF the ordered agents are NOT Y site compatible, then administer the Broad-spectrum antibiotic first. Refer to available Y site compatibility information and determination of broad-spectrum antibiotic selection chart.</p> <p>Reason for Therapy: Bacterial Infection Suspected Indication: Sepsis</p>	
[] Pharmacy consult to dose tobramycin	<p>STAT, Until discontinued, Starting S Which aminoglycoside do you need help dosing? tobramycin Indication: Sepsis - Complicated Skin and Soft Tissue Infection</p>
[] linezolid in dextrose 5% (ZYVOX) IVPB	<p>600 mg, intravenous, for 60 Minutes, once, For 1 Doses Classification: Narrow Spectrum Antibiotic</p>
<p>When multiple antimicrobial agents are ordered, you may administer these immediately at the SAME TIME via different IV sites. Do not wait for the first antibiotic to infuse. If agents are Y-site compatible, they may be administered per Y-site protocols. IF the ordered agents are NOT Y site compatible, then administer the Broad-spectrum antibiotic first. Refer to available Y site compatibility information and determination of broad-spectrum antibiotic selection chart.</p> <p>Reason for Therapy: Bacterial Infection Suspected Indication: Sepsis Recommendation: Sepsis: Recommended duration is dependent upon patient's clinical response and source identification</p>	

[] metroNIDAZOLE (FLAGYL) IV	500 mg, intravenous, once, For 1 Doses Classification: Narrow Spectrum Antibiotic
<p>When multiple antimicrobial agents are ordered, you may administer these immediately at the SAME TIME via different IV sites. Do not wait for the first antibiotic to infuse. If agents are Y-site compatible, they may be administered per Y-site protocols. IF the ordered agents are NOT Y site compatible, then administer the Broad-spectrum antibiotic first. Refer to available Y site compatibility information and determination of broad-spectrum antibiotic selection chart.</p> <p>Reason for Therapy: Bacterial Infection Suspected Indication: Sepsis</p>	
[] Sepsis of Unknown Source or IV Catheter-Related Infection (Single Response)	
Does your patient have a SEVERE penicillin AND/OR vancomycin allergy?	
() No SEVERE Penicillin OR Vancomycin Allergy (Single Response)	
Combined use of piperacillin/tazobactam and vancomycin may be associated with an increased incidence of acute kidney injury	
() ceFEPime 2 g IV + vancomycin 15 mg/kg IV	
[] ceFEPime (MAXIPIME) IV	2 g, intravenous, once, For 1 Doses Classification: Broad Spectrum Antibiotic
<p>When multiple antimicrobial agents are ordered, you may administer these immediately at the SAME TIME via different IV sites. Do not wait for the first antibiotic to infuse. If agents are Y-site compatible, they may be administered per Y-site protocols. IF the ordered agents are NOT Y site compatible, then administer the Broad-spectrum antibiotic first. Refer to available Y site compatibility information and determination of broad-spectrum antibiotic selection chart.</p> <p>Reason for Therapy: Bacterial Infection Suspected Indication: Sepsis Recommendation: Sepsis: Recommended duration is dependent upon patient's clinical response and source identification</p>	
[] vancomycin (VANCOGIN) IV + Pharmacy Consult to Dose (Selection Required)	
[] vancomycin (VANCOGIN)	15 mg/kg, intravenous, once, For 1 Doses Classification: Narrow Spectrum Antibiotic
<p>When multiple antimicrobial agents are ordered, you may administer these immediately at the SAME TIME via different IV sites. Do not wait for the first antibiotic to infuse. If agents are Y-site compatible, they may be administered per Y-site protocols. IF the ordered agents are NOT Y site compatible, then administer the Broad-spectrum antibiotic first. Refer to available Y site compatibility information and determination of broad-spectrum antibiotic selection chart.</p> <p>Reason for Therapy: Bacterial Infection Suspected Indication: Sepsis Recommendation: Sepsis: Recommended duration is dependent upon patient's clinical response and source identification</p>	
[] Pharmacy consult to manage vancomycin	STAT, Once For 1 Occurrences Reason for Therapy: Bacterial Infection Suspected Duration of Therapy (Days): 1 Indication: Sepsis Recommendation: Sepsis: Recommended duration is dependent upon patient's clinical response and source identification
[] Optional IV Antibiotic Addition - tobramycin (TOBREX) 7 mg/kg IV	

[] tobramycin (TOBREX) IV	7 mg/kg, intravenous, for 60 Minutes, once, For 1 Doses Pharmacy Consult to dose based on renal function
	Classification: Narrow Spectrum Antibiotic
	When multiple antimicrobial agents are ordered, you may administer these immediately at the SAME TIME via different IV sites. Do not wait for the first antibiotic to infuse. If agents are Y-site compatible, they may be administered per Y-site protocols. IF the ordered agents are NOT Y site compatible, then administer the Broad-spectrum antibiotic first. Refer to available Y site compatibility information and determination of broad-spectrum antibiotic selection chart. Reason for Therapy: Bacterial Infection Suspected Indication: Sepsis
[] Pharmacy consult to dose tobramycin	Routine, Once For 1 Occurrences Which aminoglycoside do you need help dosing? tobramycin Indication: Sepsis of Unknown Source or IV Catheter-Related Infection
() piperacillin-tazobactam (ZOSYN) 4.5 g IV + vancomycin 15 mg/kg IV (NOT HMW, HMWB)	
[] piperacillin-tazobactam (ZOSYN) IV	4.5 g, intravenous, once, For 1 Doses Classification: Broad Spectrum Antibiotic
	When multiple antimicrobial agents are ordered, you may administer these immediately at the SAME TIME via different IV sites. Do not wait for the first antibiotic to infuse. If agents are Y-site compatible, they may be administered per Y-site protocols. IF the ordered agents are NOT Y site compatible, then administer the Broad-spectrum antibiotic first. Refer to available Y site compatibility information and determination of broad-spectrum antibiotic selection chart. Reason for Therapy: Bacterial Infection Suspected Indication: Sepsis Recommendation: Sepsis: Recommended duration is dependent upon patient's clinical response and source identification
[] vancomycin (VANCOCIN) IV + Pharmacy Consult to Dose (Selection Required)	
[] vancomycin (VANCOCIN)	15 mg/kg, intravenous, once, For 1 Doses Classification: Narrow Spectrum Antibiotic
	When multiple antimicrobial agents are ordered, you may administer these immediately at the SAME TIME via different IV sites. Do not wait for the first antibiotic to infuse. If agents are Y-site compatible, they may be administered per Y-site protocols. IF the ordered agents are NOT Y site compatible, then administer the Broad-spectrum antibiotic first. Refer to available Y site compatibility information and determination of broad-spectrum antibiotic selection chart. Reason for Therapy: Bacterial Infection Suspected Indication: Sepsis Recommendation: Sepsis: Recommended duration is dependent upon patient's clinical response and source identification
[] Pharmacy consult to manage vancomycin	STAT, Once For 1 Occurrences Reason for Therapy: Bacterial Infection Suspected Duration of Therapy (Days): 1 Indication: Sepsis Recommendation: Sepsis: Recommended duration is dependent upon patient's clinical response and source identification
[] Optional IV Antibiotic Addition - tobramycin (TOBREX) 7 mg/kg IV	

[] tobramycin (TOBREX) IV	7 mg/kg, intravenous, for 60 Minutes, once, For 1 Doses Pharmacy Consult to dose based on renal function
	Classification: Narrow Spectrum Antibiotic
	When multiple antimicrobial agents are ordered, you may administer these immediately at the SAME TIME via different IV sites. Do not wait for the first antibiotic to infuse. If agents are Y-site compatible, they may be administered per Y-site protocols. IF the ordered agents are NOT Y site compatible, then administer the Broad-spectrum antibiotic first. Refer to available Y site compatibility information and determination of broad-spectrum antibiotic selection chart. Reason for Therapy: Bacterial Infection Suspected Indication: Sepsis
[] Pharmacy consult to dose tobramycin	Routine, Once For 1 Occurrences Which aminoglycoside do you need help dosing? tobramycin Indication: Sepsis of Unknown Source or IV Catheter-Related Infection
() piperacillin-tazobactam (ZOSYN) EI 4.5 g IV + vancomycin 15 mg/kg IV (HMW Only)	
[] piperacillin-tazobactam EI (ZOSYN) 4.5 g IV (HMW Only) "Followed by" Linked Panel	
[] piperacillin-tazobactam (ZOSYN) 4.5 g IV Once	4.5 g, intravenous, for .5 Hours, once, For 1 Doses Classification: Broad Spectrum Antibiotic
	When multiple antimicrobial agents are ordered, you may administer these immediately at the SAME TIME via different IV sites. Do not wait for the first antibiotic to infuse. If agents are Y-site compatible, they may be administered per Y-site protocols. IF the ordered agents are NOT Y site compatible, then administer the Broad-spectrum antibiotic first. Refer to available Y site compatibility information and determination of broad-spectrum antibiotic selection chart. Reason for Therapy: Bacterial Infection Suspected Indication: Sepsis Recommendation: Sepsis: Recommended duration is dependent upon patient's clinical response and source identification
[] piperacillin-tazobactam (ZOSYN) 4.5 g IV every 8 hours	4.5 g, intravenous, for 4 Hours, once, Starting H+6 Hours, For 1 Doses Classification: Broad Spectrum Antibiotic
	When multiple antimicrobial agents are ordered, you may administer these immediately at the SAME TIME via different IV sites. Do not wait for the first antibiotic to infuse. If agents are Y-site compatible, they may be administered per Y-site protocols. IF the ordered agents are NOT Y site compatible, then administer the Broad-spectrum antibiotic first. Refer to available Y site compatibility information and determination of broad-spectrum antibiotic selection chart. Reason for Therapy: Bacterial Infection Suspected Indication: Sepsis Recommendation: Sepsis: Recommended duration is dependent upon patient's clinical response and source identification
[] vancomycin (VANCOCIN) IV + Pharmacy Consult to Dose (Selection Required)	

[] vancomycin (VANCOCIN)	15 mg/kg, intravenous, once, For 1 Doses Classification: Narrow Spectrum Antibiotic
	<p>When multiple antimicrobial agents are ordered, you may administer these immediately at the SAME TIME via different IV sites. Do not wait for the first antibiotic to infuse. If agents are Y-site compatible, they may be administered per Y-site protocols. IF the ordered agents are NOT Y site compatible, then administer the Broad-spectrum antibiotic first. Refer to available Y site compatibility information and determination of broad-spectrum antibiotic selection chart.</p> <p>Reason for Therapy: Bacterial Infection Suspected Indication: Sepsis Indication: Sepsis Recommendation: Sepsis: Recommended duration is dependent upon patient's clinical response and source identification</p>
[] Pharmacy consult to manage vancomycin	<p>STAT, Once For 1 Occurrences Reason for Therapy: Bacterial Infection Suspected Duration of Therapy (Days): 1 Indication: Sepsis Recommendation: Sepsis: Recommended duration is dependent upon patient's clinical response and source identification</p>
[] Adjunct Antibiotics - amikacin (AMIKIN) 15 mg/kg IV +/- levofloxacin 750 mg IV (Single Response)	
() amikacin (AMIKIN) IV	15 mg/kg, intravenous, for 30 Minutes, once, For 1 Doses Classification: Narrow Spectrum Antibiotic
	<p>When multiple antimicrobial agents are ordered, you may administer these immediately at the SAME TIME via different IV sites. Do not wait for the first antibiotic to infuse. If agents are Y-site compatible, they may be administered per Y-site protocols. IF the ordered agents are NOT Y site compatible, then administer the Broad-spectrum antibiotic first. Refer to available Y site compatibility information and determination of broad-spectrum antibiotic selection chart.</p> <p>Reason for Therapy: Bacterial Infection Suspected Indication: Sepsis</p>
() levofloxacin (LEVAQUIN) IV	750 mg, intravenous, every 24 hours Classification: Narrow Spectrum Antibiotic
	<p>When multiple antimicrobial agents are ordered, you may administer these immediately at the SAME TIME via different IV sites. Do not wait for the first antibiotic to infuse. If agents are Y-site compatible, they may be administered per Y-site protocols. IF the ordered agents are NOT Y site compatible, then administer the Broad-spectrum antibiotic first. Refer to available Y site compatibility information and determination of broad-spectrum antibiotic selection chart.</p> <p>Per Med Staff Policy, R.Ph. will automatically renally dose this medication based on current SCr and CrCl values. Per Med Staff Policy, R.Ph. will automatically switch IV to equivalent PO dose when above approved criteria are satisfied: Reason for Therapy:</p>
[] Optional IV Antibiotic Addition - tobramycin (TOBREX) 7 mg/kg IV	

[] tobramycin (TOBREX) IV	7 mg/kg, intravenous, for 60 Minutes, every 24 hours Pharmacy Consult to dose based on renal function
	Classification: Narrow Spectrum Antibiotic
	When multiple antimicrobial agents are ordered, you may administer these immediately at the SAME TIME via different IV sites. Do not wait for the first antibiotic to infuse. If agents are Y-site compatible, they may be administered per Y-site protocols. IF the ordered agents are NOT Y site compatible, then administer the Broad-spectrum antibiotic first. Refer to available Y site compatibility information and determination of broad-spectrum antibiotic selection chart. Reason for Therapy: Bacterial Infection Suspected Indication: Sepsis
[] Pharmacy consult to dose tobramycin	Routine, Until discontinued, Starting S Which aminoglycoside do you need help dosing? tobramycin Indication: Sepsis - Nosocomial Pneumonia or Community-Acquired Pneumonia with Multi-Drug Resistant Risk
() meropenem (MERREM) 500 mg IV + vancomycin 15 mg/kg IV	
[] meropenem (MERREM) IV	500 mg, intravenous, once, For 1 Doses Classification: Broad Spectrum Antibiotic
	When multiple antimicrobial agents are ordered, you may administer these immediately at the SAME TIME via different IV sites. Do not wait for the first antibiotic to infuse. If agents are Y-site compatible, they may be administered per Y-site protocols. IF the ordered agents are NOT Y site compatible, then administer the Broad-spectrum antibiotic first. Refer to available Y site compatibility information and determination of broad-spectrum antibiotic selection chart. Reason for Therapy: Bacterial Infection Suspected Indication: Sepsis Recommendation: Sepsis: Recommended duration is dependent upon patient's clinical response and source identification
[] vancomycin (VANCOCIN) IV + Pharmacy Consult to Dose (Selection Required)	
[] vancomycin (VANCOCIN)	15 mg/kg, intravenous, once, For 1 Doses Classification: Narrow Spectrum Antibiotic
	When multiple antimicrobial agents are ordered, you may administer these immediately at the SAME TIME via different IV sites. Do not wait for the first antibiotic to infuse. If agents are Y-site compatible, they may be administered per Y-site protocols. IF the ordered agents are NOT Y site compatible, then administer the Broad-spectrum antibiotic first. Refer to available Y site compatibility information and determination of broad-spectrum antibiotic selection chart. Reason for Therapy: Bacterial Infection Suspected Indication: Sepsis Recommendation: Sepsis: Recommended duration is dependent upon patient's clinical response and source identification
[] Pharmacy consult to manage vancomycin	STAT, Once For 1 Occurrences Reason for Therapy: Bacterial Infection Suspected Duration of Therapy (Days): 1 Indication: Sepsis Recommendation: Sepsis: Recommended duration is dependent upon patient's clinical response and source identification
[] Optional IV Antibiotic Addition - tobramycin (TOBREX) 7 mg/kg IV	

[] tobramycin (TOBREX) IV	7 mg/kg, intravenous, for 60 Minutes, once, For 1 Doses Pharmacy Consult to dose based on renal function
	Classification: Narrow Spectrum Antibiotic
	When multiple antimicrobial agents are ordered, you may administer these immediately at the SAME TIME via different IV sites. Do not wait for the first antibiotic to infuse. If agents are Y-site compatible, they may be administered per Y-site protocols. IF the ordered agents are NOT Y site compatible, then administer the Broad-spectrum antibiotic first. Refer to available Y site compatibility information and determination of broad-spectrum antibiotic selection chart. Reason for Therapy: Bacterial Infection Suspected Indication: Sepsis
[] Pharmacy consult to dose tobramycin	Routine, Until discontinued, Starting S Which aminoglycoside do you need help dosing? tobramycin Indication: Sepsis of Unknown Source or IV Catheter-Related Infection
() ceFEPime 2 g intraMUSCULAR + vancomycin 15 mg/kg IV	
[] cefepime (MAXIPIME) IM	2 g, intramuscular, once, For 1 Doses Intramuscular route selected because no IV access available. Administer dose by deep IM into large muscle mass (e.g. gluteal muscles or lateral part of the thigh). Reason for Therapy: Bacterial Infection Suspected IM Route Selection: I have opted to select the IM route because IV access could not be established Indication: Sepsis Recommendation: Sepsis: Recommended duration is dependent upon patient's clinical response and source identification
[] vancomycin (VANCOGIN) IV + Pharmacy Consult to Dose (Selection Required)	
[] vancomycin (VANCOGIN)	15 mg/kg, intravenous, once, For 1 Doses Classification: Narrow Spectrum Antibiotic
	When multiple antimicrobial agents are ordered, you may administer these immediately at the SAME TIME via different IV sites. Do not wait for the first antibiotic to infuse. If agents are Y-site compatible, they may be administered per Y-site protocols. IF the ordered agents are NOT Y site compatible, then administer the Broad-spectrum antibiotic first. Refer to available Y site compatibility information and determination of broad-spectrum antibiotic selection chart. Reason for Therapy: Bacterial Infection Suspected Indication: Sepsis Recommendation: Sepsis: Recommended duration is dependent upon patient's clinical response and source identification
[] Pharmacy consult to manage vancomycin	STAT, Once For 1 Occurrences Reason for Therapy: Bacterial Infection Suspected Duration of Therapy (Days): 1 Indication: Sepsis Recommendation: Sepsis: Recommended duration is dependent upon patient's clinical response and source identification
[] Optional IV Antibiotic Addition - tobramycin (TOBREX) 7 mg/kg IV	

[] tobramycin (TOBREX) IV	7 mg/kg, intravenous, for 60 Minutes, once, For 1 Doses Pharmacy Consult to dose based on renal function
	Classification: Narrow Spectrum Antibiotic
	When multiple antimicrobial agents are ordered, you may administer these immediately at the SAME TIME via different IV sites. Do not wait for the first antibiotic to infuse. If agents are Y-site compatible, they may be administered per Y-site protocols. IF the ordered agents are NOT Y site compatible, then administer the Broad-spectrum antibiotic first. Refer to available Y site compatibility information and determination of broad-spectrum antibiotic selection chart. Reason for Therapy: Bacterial Infection Suspected Indication: Sepsis
[] Pharmacy consult to dose tobramycin	Routine, Once For 1 Occurrences Which aminoglycoside do you need help dosing? tobramycin Indication: Sepsis of Unknown Source or IV Catheter-Related Infection
() meropenem (MERREM) 500 mg intraMUSCULAR + vancomycin 15 mg/kg IV	
[] meropenem (MERREM) intraMUSCULAR	0.5 g, intramuscular, once, For 1 Doses Administer dose by deep IM into large muscle mass (e.g. gluteal muscles or lateral part of the thigh) Reason for Therapy: Bacterial Infection Suspected IM Route Selection: I have opted to select the IM route because IV access could not be established Indication: Sepsis Recommendation: Sepsis: Recommended duration is dependent upon patient's clinical response and source identification
[] vancomycin (VANCOCIN) IV + Pharmacy Consult to Dose (Selection Required)	
[] vancomycin (VANCOCIN)	15 mg/kg, intravenous, once, For 1 Doses Classification: Narrow Spectrum Antibiotic
	When multiple antimicrobial agents are ordered, you may administer these immediately at the SAME TIME via different IV sites. Do not wait for the first antibiotic to infuse. If agents are Y-site compatible, they may be administered per Y-site protocols. IF the ordered agents are NOT Y site compatible, then administer the Broad-spectrum antibiotic first. Refer to available Y site compatibility information and determination of broad-spectrum antibiotic selection chart. Reason for Therapy: Bacterial Infection Suspected Indication: Sepsis Recommendation: Sepsis: Recommended duration is dependent upon patient's clinical response and source identification
[] Pharmacy consult to manage vancomycin	STAT, Once For 1 Occurrences Reason for Therapy: Bacterial Infection Suspected Duration of Therapy (Days): 1 Indication: Sepsis Recommendation: Sepsis: Recommended duration is dependent upon patient's clinical response and source identification
[] Optional IV Antibiotic Addition - tobramycin (TOBREX) 7 mg/kg IV	

<input type="checkbox"/> tobramycin (TOBREX) IV	7 mg/kg, intravenous, for 60 Minutes, once, For 1 Doses Pharmacy Consult to dose based on renal function
	Classification: Narrow Spectrum Antibiotic
	When multiple antimicrobial agents are ordered, you may administer these immediately at the SAME TIME via different IV sites. Do not wait for the first antibiotic to infuse. If agents are Y-site compatible, they may be administered per Y-site protocols. IF the ordered agents are NOT Y site compatible, then administer the Broad-spectrum antibiotic first. Refer to available Y site compatibility information and determination of broad-spectrum antibiotic selection chart. Reason for Therapy: Bacterial Infection Suspected Indication: Sepsis
<input type="checkbox"/> Pharmacy consult to dose tobramycin	Routine, Once For 1 Occurrences Which aminoglycoside do you need help dosing? tobramycin Indication: Sepsis of Unknown Source or IV Catheter-Related Infection
<input type="checkbox"/> SEVERE Penicillin Allergy (Single Response) (i.e. Type 1 immediate hypersensitivity reaction - anaphylaxis, bronchospasm, angioedema, urticaria)	
<input type="checkbox"/> aztreonam (AZACTAM) 2 g IV + tobramycin (TOBREX) 7 mg/kg IV + vancomycin 15 mg/kg IV	
<input type="checkbox"/> aztreonam (AZACTAM) IV	2 g, intravenous, once, For 1 Doses Classification: Broad Spectrum Antibiotic
	When multiple antimicrobial agents are ordered, you may administer these immediately at the SAME TIME via different IV sites. Do not wait for the first antibiotic to infuse. If agents are Y-site compatible, they may be administered per Y-site protocols. IF the ordered agents are NOT Y site compatible, then administer the Broad-spectrum antibiotic first. Refer to available Y site compatibility information and determination of broad-spectrum antibiotic selection chart. Reason for Therapy: Bacterial Infection Suspected Indication: Sepsis
<input type="checkbox"/> tobramycin (TOBREX) 7 mg/kg IV	
<input type="checkbox"/> tobramycin (TOBREX) IV	7 mg/kg, intravenous, for 60 Minutes, once, For 1 Doses Pharmacy Consult to dose based on renal function
	Classification: Narrow Spectrum Antibiotic
	When multiple antimicrobial agents are ordered, you may administer these immediately at the SAME TIME via different IV sites. Do not wait for the first antibiotic to infuse. If agents are Y-site compatible, they may be administered per Y-site protocols. IF the ordered agents are NOT Y site compatible, then administer the Broad-spectrum antibiotic first. Refer to available Y site compatibility information and determination of broad-spectrum antibiotic selection chart. Reason for Therapy: Bacterial Infection Suspected Indication: Sepsis
<input type="checkbox"/> Pharmacy consult to dose tobramycin	Routine, Once For 1 Occurrences Which aminoglycoside do you need help dosing? tobramycin Indication: Sepsis of Unknown Source or IV Catheter-Related Infection
<input type="checkbox"/> vancomycin (VANCOCIN) IV + Pharmacy Consult to Dose (Selection Required)	

[] vancomycin (VANCOCIN)	15 mg/kg, intravenous, once, For 1 Doses Classification: Narrow Spectrum Antibiotic
	When multiple antimicrobial agents are ordered, you may administer these immediately at the SAME TIME via different IV sites. Do not wait for the first antibiotic to infuse. If agents are Y-site compatible, they may be administered per Y-site protocols. IF the ordered agents are NOT Y site compatible, then administer the Broad-spectrum antibiotic first. Refer to available Y site compatibility information and determination of broad-spectrum antibiotic selection chart. Reason for Therapy: Bacterial Infection Suspected Indication: Sepsis Indication: Sepsis Recommendation: Sepsis: Recommended duration is dependent upon patient's clinical response and source identification
[] Pharmacy consult to manage vancomycin	STAT, Once For 1 Occurrences Reason for Therapy: Bacterial Infection Suspected Duration of Therapy (Days): 1 Indication: Sepsis of Unknown Source or IV Catheter-Related Infection Indication: Sepsis Recommendation: Sepsis: Recommended duration is dependent upon patient's clinical response and source identification
() aztreonam (AZACTAM) 2 g intraMUSCULAR + tobramycin (TOBREX) 7 mg/kg IV + vancomycin 15 mg/kg IV	
[] aztreonam (AZACTAM) intraMUSCULAR	2 g, intramuscular, once, For 1 Doses Administer dose by deep IM into large muscle mass (e.g. gluteal muscles or lateral part of the thigh). Reason for Therapy: Bacterial Infection Suspected Indication: Sepsis IM Route Selection: I have opted to select the IM route because IV access could not be established
[] tobramycin (TOBREX) 7 mg/kg IV	
[] tobramycin (TOBREX) IV	7 mg/kg, intravenous, for 60 Minutes, once, For 1 Doses Pharmacy Consult to dose based on renal function
	Classification: Narrow Spectrum Antibiotic When multiple antimicrobial agents are ordered, you may administer these immediately at the SAME TIME via different IV sites. Do not wait for the first antibiotic to infuse. If agents are Y-site compatible, they may be administered per Y-site protocols. IF the ordered agents are NOT Y site compatible, then administer the Broad-spectrum antibiotic first. Refer to available Y site compatibility information and determination of broad-spectrum antibiotic selection chart. Reason for Therapy: Bacterial Infection Suspected Indication: Sepsis
[] Pharmacy consult to dose tobramycin	Routine, Once For 1 Occurrences Which aminoglycoside do you need help dosing? tobramycin Indication: Sepsis of Unknown Source or IV Catheter-Related Infection
[] vancomycin (VANCOCIN) IV + Pharmacy Consult to Dose (Selection Required)	

vancomycin (VANCOCIN)

15 mg/kg, intravenous, once, For 1 Doses
Classification: Narrow Spectrum Antibiotic

When multiple antimicrobial agents are ordered, you may administer these immediately at the SAME TIME via different IV sites. Do not wait for the first antibiotic to infuse. If agents are Y-site compatible, they may be administered per Y-site protocols. IF the ordered agents are NOT Y site compatible, then administer the Broad-spectrum antibiotic first. Refer to available Y site compatibility information and determination of broad-spectrum antibiotic selection chart.

Reason for Therapy: Bacterial Infection Suspected

Indication: Sepsis

Indication: Sepsis

Recommendation: Sepsis: Recommended duration is dependent upon patient's clinical response and source identification

Pharmacy consult to manage vancomycin

STAT, Once For 1 Occurrences

Reason for Therapy: Bacterial Infection Suspected

Duration of Therapy (Days): 1

Indication: Sepsis of Unknown Source or IV Catheter-Related Infection

Indication: Sepsis

Recommendation: Sepsis: Recommended duration is dependent upon patient's clinical response and source identification

SEVERE Vancomycin Allergy (Single Response)

Combined use of piperacillin/tazobactam and vancomycin may be associated with an increased incidence of acute kidney injury

ceFEPime 2 g IV + linezolid (ZYVOX) 600 mg IV

ceFEPime (MAXIPIME) IV

2 g, intravenous, once, For 1 Doses
Classification: Broad Spectrum Antibiotic

When multiple antimicrobial agents are ordered, you may administer these immediately at the SAME TIME via different IV sites. Do not wait for the first antibiotic to infuse. If agents are Y-site compatible, they may be administered per Y-site protocols. IF the ordered agents are NOT Y site compatible, then administer the Broad-spectrum antibiotic first. Refer to available Y site compatibility information and determination of broad-spectrum antibiotic selection chart.

Reason for Therapy: Bacterial Infection Suspected

Indication: Sepsis

Recommendation: Sepsis: Recommended duration is dependent upon patient's clinical response and source identification

linezolid in dextrose 5% (ZYVOX) IVPB

600 mg, intravenous, for 60 Minutes, once, For 1 Doses
Classification: Narrow Spectrum Antibiotic

When multiple antimicrobial agents are ordered, you may administer these immediately at the SAME TIME via different IV sites. Do not wait for the first antibiotic to infuse. If agents are Y-site compatible, they may be administered per Y-site protocols. IF the ordered agents are NOT Y site compatible, then administer the Broad-spectrum antibiotic first. Refer to available Y site compatibility information and determination of broad-spectrum antibiotic selection chart.

Reason for Therapy: Bacterial Infection Suspected

Indication: Sepsis

Recommendation: Sepsis: Recommended duration is dependent upon patient's clinical response and source identification

Optional IV Antibiotic Addition - tobramycin (TOBREX) 7 mg/kg IV

[] tobramycin (TOBREX) IV	7 mg/kg, intravenous, for 60 Minutes, once, For 1 Doses Pharmacy Consult to dose based on renal function
	Classification: Narrow Spectrum Antibiotic
	When multiple antimicrobial agents are ordered, you may administer these immediately at the SAME TIME via different IV sites. Do not wait for the first antibiotic to infuse. If agents are Y-site compatible, they may be administered per Y-site protocols. IF the ordered agents are NOT Y site compatible, then administer the Broad-spectrum antibiotic first. Refer to available Y site compatibility information and determination of broad-spectrum antibiotic selection chart. Reason for Therapy: Bacterial Infection Suspected Indication: Sepsis
[] Pharmacy consult to dose tobramycin	Routine, Once For 1 Occurrences Which aminoglycoside do you need help dosing? tobramycin Indication: Sepsis of Unknown Source or IV Catheter-Related Infection
() piperacillin-tazobactam (ZOSYN) 4.5 g IV + linezolid (ZYVOX) 600 mg IV (NOT HMW)	
[] piperacillin-tazobactam (ZOSYN) IV	4.5 g, intravenous, once, For 1 Doses Classification: Broad Spectrum Antibiotic
	When multiple antimicrobial agents are ordered, you may administer these immediately at the SAME TIME via different IV sites. Do not wait for the first antibiotic to infuse. If agents are Y-site compatible, they may be administered per Y-site protocols. IF the ordered agents are NOT Y site compatible, then administer the Broad-spectrum antibiotic first. Refer to available Y site compatibility information and determination of broad-spectrum antibiotic selection chart. Reason for Therapy: Bacterial Infection Suspected Indication: Sepsis Recommendation: Sepsis: Recommended duration is dependent upon patient's clinical response and source identification
[] linezolid in dextrose 5% (ZYVOX) IVPB	600 mg, intravenous, for 60 Minutes, once, For 1 Doses Classification: Narrow Spectrum Antibiotic
	When multiple antimicrobial agents are ordered, you may administer these immediately at the SAME TIME via different IV sites. Do not wait for the first antibiotic to infuse. If agents are Y-site compatible, they may be administered per Y-site protocols. IF the ordered agents are NOT Y site compatible, then administer the Broad-spectrum antibiotic first. Refer to available Y site compatibility information and determination of broad-spectrum antibiotic selection chart. Reason for Therapy: Bacterial Infection Suspected Indication: Sepsis Recommendation: Sepsis: Recommended duration is dependent upon patient's clinical response and source identification
[] Optional IV Antibiotic Addition - tobramycin (TOBREX) 7 mg/kg IV	
[] tobramycin (TOBREX) IV	7 mg/kg, intravenous, for 60 Minutes, once, For 1 Doses Pharmacy Consult to dose based on renal function
	Classification: Narrow Spectrum Antibiotic
	When multiple antimicrobial agents are ordered, you may administer these immediately at the SAME TIME via different IV sites. Do not wait for the first antibiotic to infuse. If agents are Y-site compatible, they may be administered per Y-site protocols. IF the ordered agents are NOT Y site compatible, then administer the Broad-spectrum antibiotic first. Refer to available Y site compatibility information and determination of broad-spectrum antibiotic selection chart. Reason for Therapy: Bacterial Infection Suspected Indication: Sepsis

[] Pharmacy consult to dose tobramycin	Routine, Once For 1 Occurrences Which aminoglycoside do you need help dosing? tobramycin Indication: Sepsis of Unknown Source or IV Catheter-Related Infection
() piperacillin-tazobactam (ZOSYN) EI 4.5 g IV + linezolid (ZYVOX) 600 mg IV (HMW Only)	
[] piperacillin-tazobactam (ZOSYNI) EI IV	4.5 g, intravenous, for 4 Hours, once, For 1 Doses Classification: Broad Spectrum Antibiotic
<p>When multiple antimicrobial agents are ordered, you may administer these immediately at the SAME TIME via different IV sites. Do not wait for the first antibiotic to infuse. If agents are Y-site compatible, they may be administered per Y-site protocols. IF the ordered agents are NOT Y site compatible, then administer the Broad-spectrum antibiotic first. Refer to available Y site compatibility information and determination of broad-spectrum antibiotic selection chart.</p> <p>Reason for Therapy: Bacterial Infection Suspected Indication: Sepsis Recommendation: Sepsis: Recommended duration is dependent upon patient's clinical response and source identification</p>	
[] linezolid in dextrose 5% (ZYVOX) IVPB	600 mg, intravenous, for 60 Minutes, once, For 1 Doses Classification: Narrow Spectrum Antibiotic
<p>When multiple antimicrobial agents are ordered, you may administer these immediately at the SAME TIME via different IV sites. Do not wait for the first antibiotic to infuse. If agents are Y-site compatible, they may be administered per Y-site protocols. IF the ordered agents are NOT Y site compatible, then administer the Broad-spectrum antibiotic first. Refer to available Y site compatibility information and determination of broad-spectrum antibiotic selection chart.</p> <p>Reason for Therapy: Bacterial Infection Suspected Indication: Sepsis Recommendation: Sepsis: Recommended duration is dependent upon patient's clinical response and source identification</p>	
[] Optional IV Antibiotic Addition - tobramycin (TOBREX) 7 mg/kg IV	
[] tobramycin (TOBREX) IV	7 mg/kg, intravenous, for 60 Minutes, once, For 1 Doses Pharmacy Consult to dose based on renal function Classification: Narrow Spectrum Antibiotic
<p>When multiple antimicrobial agents are ordered, you may administer these immediately at the SAME TIME via different IV sites. Do not wait for the first antibiotic to infuse. If agents are Y-site compatible, they may be administered per Y-site protocols. IF the ordered agents are NOT Y site compatible, then administer the Broad-spectrum antibiotic first. Refer to available Y site compatibility information and determination of broad-spectrum antibiotic selection chart.</p> <p>Reason for Therapy: Bacterial Infection Suspected Indication: Sepsis</p>	
[] Pharmacy consult to dose tobramycin	Routine, Once For 1 Occurrences Which aminoglycoside do you need help dosing? tobramycin Indication: Sepsis of Unknown Source or IV Catheter-Related Infection
() meropenem (MERREM) 500 mg IV + linezolid (ZYVOX) 600 mg IV	

[] meropenem (MERREM) IV	500 mg, intravenous, once, For 1 Doses Classification: Broad Spectrum Antibiotic
	<p>When multiple antimicrobial agents are ordered, you may administer these immediately at the SAME TIME via different IV sites. Do not wait for the first antibiotic to infuse. If agents are Y-site compatible, they may be administered per Y-site protocols. IF the ordered agents are NOT Y site compatible, then administer the Broad-spectrum antibiotic first. Refer to available Y site compatibility information and determination of broad-spectrum antibiotic selection chart.</p> <p>Reason for Therapy: Bacterial Infection Suspected Indication: Sepsis Recommendation: Sepsis: Recommended duration is dependent upon patient's clinical response and source identification</p>
[] linezolid in dextrose 5% (ZYVOX) IVPB	600 mg, intravenous, for 60 Minutes, once, For 1 Doses Classification: Narrow Spectrum Antibiotic
	<p>When multiple antimicrobial agents are ordered, you may administer these immediately at the SAME TIME via different IV sites. Do not wait for the first antibiotic to infuse. If agents are Y-site compatible, they may be administered per Y-site protocols. IF the ordered agents are NOT Y site compatible, then administer the Broad-spectrum antibiotic first. Refer to available Y site compatibility information and determination of broad-spectrum antibiotic selection chart.</p> <p>Reason for Therapy: Bacterial Infection Suspected Indication: Sepsis Recommendation: Sepsis: Recommended duration is dependent upon patient's clinical response and source identification</p>
[] Optional IV Antibiotic Addition - tobramycin (TOBEX) 7 mg/kg IV	
[] tobramycin (TOBEX) IV	7 mg/kg, intravenous, for 60 Minutes, once, For 1 Doses Pharmacy Consult to dose based on renal function
	<p>Classification: Narrow Spectrum Antibiotic</p> <p>When multiple antimicrobial agents are ordered, you may administer these immediately at the SAME TIME via different IV sites. Do not wait for the first antibiotic to infuse. If agents are Y-site compatible, they may be administered per Y-site protocols. IF the ordered agents are NOT Y site compatible, then administer the Broad-spectrum antibiotic first. Refer to available Y site compatibility information and determination of broad-spectrum antibiotic selection chart.</p> <p>Reason for Therapy: Bacterial Infection Suspected Indication: Sepsis</p>
[] Pharmacy consult to dose tobramycin	<p>Routine, Once For 1 Occurrences Which aminoglycoside do you need help dosing? tobramycin Indication: Sepsis of Unknown Source or IV Catheter-Related Infection</p>
() ceFEPime 2 g intraMUSCULAR + linezolid (ZYVOX) 600 mg IV	
[] cefepime (MAXIPIME) IM	<p>2 g, intramuscular, once, For 1 Doses Intramuscular route selected because no IV access available. Administer dose by deep IM into large muscle mass (e.g. gluteal muscles or lateral part of the thigh).</p> <p>Reason for Therapy: Bacterial Infection Suspected IM Route Selection: I have opted to select the IM route because IV access could not be established Indication: Sepsis Recommendation: Sepsis: Recommended duration is dependent upon patient's clinical response and source identification</p>

[] linezolid in dextrose 5% (ZYVOX) IVPB	600 mg, intravenous, for 60 Minutes, once, For 1 Doses Reason for Therapy: Bacterial Infection Suspected Indication: Sepsis Recommendation: Sepsis: Recommended duration is dependent upon patient's clinical response and source identification
[] Optional IV Antibiotic Addition - tobramycin (TOBREX) 7 mg/kg IV	
[] tobramycin (TOBREX) IV	7 mg/kg, intravenous, for 60 Minutes, once, For 1 Doses Pharmacy Consult to dose based on renal function Classification: Narrow Spectrum Antibiotic
When multiple antimicrobial agents are ordered, you may administer these immediately at the SAME TIME via different IV sites. Do not wait for the first antibiotic to infuse. If agents are Y-site compatible, they may be administered per Y-site protocols. IF the ordered agents are NOT Y site compatible, then administer the Broad-spectrum antibiotic first. Refer to available Y site compatibility information and determination of broad-spectrum antibiotic selection chart. Reason for Therapy: Bacterial Infection Suspected Indication: Sepsis	
[] Pharmacy consult to dose tobramycin	Routine, Once For 1 Occurrences Which aminoglycoside do you need help dosing? tobramycin Indication: Sepsis of Unknown Source or IV Catheter-Related Infection
() meropenem (MERREM) 500 mg intraMUSCULAR + linezolid (ZYVOX) 600 mg IV	
[] meropenem (MERREM) intraMUSCULAR	0.5 g, intramuscular, once, For 1 Doses Administer dose by deep IM into large muscle mass (e.g. gluteal muscles or lateral part of the thigh) Reason for Therapy: Bacterial Infection Suspected IM Route Selection: I have opted to select the IM route because IV access could not be established Indication: Sepsis Recommendation: Sepsis: Recommended duration is dependent upon patient's clinical response and source identification
[] linezolid in dextrose 5% (ZYVOX) IVPB	600 mg, intravenous, for 60 Minutes, once, For 1 Doses Classification: Narrow Spectrum Antibiotic When multiple antimicrobial agents are ordered, you may administer these immediately at the SAME TIME via different IV sites. Do not wait for the first antibiotic to infuse. If agents are Y-site compatible, they may be administered per Y-site protocols. IF the ordered agents are NOT Y site compatible, then administer the Broad-spectrum antibiotic first. Refer to available Y site compatibility information and determination of broad-spectrum antibiotic selection chart. Reason for Therapy: Bacterial Infection Suspected Indication: Sepsis Recommendation: Sepsis: Recommended duration is dependent upon patient's clinical response and source identification
[] Optional IV Antibiotic Addition - tobramycin (TOBREX) 7 mg/kg IV	

[] tobramycin (TOBREX) IV	7 mg/kg, intravenous, for 60 Minutes, once, For 1 Doses Pharmacy Consult to dose based on renal function
	Classification: Narrow Spectrum Antibiotic
	When multiple antimicrobial agents are ordered, you may administer these immediately at the SAME TIME via different IV sites. Do not wait for the first antibiotic to infuse. If agents are Y-site compatible, they may be administered per Y-site protocols. IF the ordered agents are NOT Y site compatible, then administer the Broad-spectrum antibiotic first. Refer to available Y site compatibility information and determination of broad-spectrum antibiotic selection chart. Reason for Therapy: Bacterial Infection Suspected Indication: Sepsis
[] Pharmacy consult to dose tobramycin	Routine, Once For 1 Occurrences Which aminoglycoside do you need help dosing? tobramycin Indication: Sepsis of Unknown Source or IV Catheter-Related Infection
() SEVERE Penicillin AND Vancomycin Allergy (Single Response)	
(i.e. Type 1 immediate hypersensitivity reaction - anaphylaxis, bronchospasm, angioedema, urticaria)	
() aztreonam (AZACTAM) 2 g IV + tobramycin (TOBREX) 7 mg/kg IV + linezolid (ZYVOX) 600 mg IV	
[] aztreonam (AZACTAM) IV	2 g, intravenous, once, For 1 Doses Classification: Broad Spectrum Antibiotic
	When multiple antimicrobial agents are ordered, you may administer these immediately at the SAME TIME via different IV sites. Do not wait for the first antibiotic to infuse. If agents are Y-site compatible, they may be administered per Y-site protocols. IF the ordered agents are NOT Y site compatible, then administer the Broad-spectrum antibiotic first. Refer to available Y site compatibility information and determination of broad-spectrum antibiotic selection chart. Reason for Therapy: Bacterial Infection Suspected Indication: Sepsis
[] tobramycin (TOBREX) 7 mg/kg IV	
[] tobramycin (TOBREX) IV	7 mg/kg, intravenous, for 60 Minutes, once, For 1 Doses Pharmacy Consult to dose based on renal function
	Classification: Narrow Spectrum Antibiotic
	When multiple antimicrobial agents are ordered, you may administer these immediately at the SAME TIME via different IV sites. Do not wait for the first antibiotic to infuse. If agents are Y-site compatible, they may be administered per Y-site protocols. IF the ordered agents are NOT Y site compatible, then administer the Broad-spectrum antibiotic first. Refer to available Y site compatibility information and determination of broad-spectrum antibiotic selection chart. Reason for Therapy: Bacterial Infection Suspected Indication: Sepsis
[] Pharmacy consult to dose tobramycin	Routine, Once For 1 Occurrences Which aminoglycoside do you need help dosing? tobramycin Indication: Sepsis of Unknown Source or IV Catheter-Related Infection

[] linezolid in dextrose 5% (ZYVOX) IVPB	<p>600 mg, intravenous, for 60 Minutes, once, For 1 Doses Classification: Narrow Spectrum Antibiotic</p> <p>When multiple antimicrobial agents are ordered, you may administer these immediately at the SAME TIME via different IV sites. Do not wait for the first antibiotic to infuse. If agents are Y-site compatible, they may be administered per Y-site protocols. IF the ordered agents are NOT Y site compatible, then administer the Broad-spectrum antibiotic first. Refer to available Y site compatibility information and determination of broad-spectrum antibiotic selection chart. Reason for Therapy: Bacterial Infection Suspected Indication: Sepsis Reason for Therapy: Bacterial Infection Suspected Indication: Sepsis Recommendation: Sepsis: Recommended duration is dependent upon patient's clinical response and source identification</p>
() aztreonam (AZACTAM) 2 g intraMUSCULAR + tobramycin (TOBREX) 7 mg/kg IV + linezolid (ZYVOX) 600 mg IV	
[] aztreonam (AZACTAM) intraMUSCULAR	<p>2 g, intramuscular, once, For 1 Doses Administer dose by deep IM into large muscle mass (e.g. gluteal muscles or lateral part of the thigh). Reason for Therapy: Bacterial Infection Suspected Indication: Sepsis IM Route Selection: I have opted to select the IM route because IV access could not be established</p>
[] tobramycin (TOBREX) 7 mg/kg IV	
[] tobramycin (TOBREX) IV	<p>7 mg/kg, intravenous, for 60 Minutes, once, For 1 Doses Pharmacy Consult to dose based on renal function</p> <p>Classification: Narrow Spectrum Antibiotic</p> <p>When multiple antimicrobial agents are ordered, you may administer these immediately at the SAME TIME via different IV sites. Do not wait for the first antibiotic to infuse. If agents are Y-site compatible, they may be administered per Y-site protocols. IF the ordered agents are NOT Y site compatible, then administer the Broad-spectrum antibiotic first. Refer to available Y site compatibility information and determination of broad-spectrum antibiotic selection chart. Reason for Therapy: Bacterial Infection Suspected Indication: Sepsis</p>
[] Pharmacy consult to dose tobramycin	<p>Routine, Once For 1 Occurrences Which aminoglycoside do you need help dosing? tobramycin Indication: Sepsis of Unknown Source or IV Catheter-Related Infection</p>
[] linezolid in dextrose 5% (ZYVOX) IVPB	<p>600 mg, intravenous, for 60 Minutes, once, For 1 Doses Classification: Narrow Spectrum Antibiotic</p> <p>When multiple antimicrobial agents are ordered, you may administer these immediately at the SAME TIME via different IV sites. Do not wait for the first antibiotic to infuse. If agents are Y-site compatible, they may be administered per Y-site protocols. IF the ordered agents are NOT Y site compatible, then administer the Broad-spectrum antibiotic first. Refer to available Y site compatibility information and determination of broad-spectrum antibiotic selection chart. Reason for Therapy: Bacterial Infection Suspected Indication: Sepsis Recommendation: Sepsis: Recommended duration is dependent upon patient's clinical response and source identification</p>

[] Intra-Abdominal Infections (Single Response)

Use meropenem if history of infection with ESBL-producing organism or recent prolonged treatment with zosyn or cefepime. Sources: Complicated Intra-abdominal Infection Guidelines. Clinical Infectious Diseases 2010; 50:133-64. ANTIBIOTIC SUSCEPTIBILITY OF COMMON ORGANISMS - 2016. Houston Methodist Hospital/Department of Laboratory Medicine/Microbiology Section

Does your patient have a SEVERE penicillin allergy?

No SEVERE Penicillin or Vancomycin Allergy

ceFEPime + metroNIDAZOLE (FLAGYL) OR piperacillin-tazobactam (ZOSYN) IV OR meropenem (MERREM) IV (Single Response) (Selection Required)

ceFEPime 2 g IV + metroNIDAZOLE (FLAGYL) 500 mg IV

ceFEPime (MAXIPIME) IV

2 g, intravenous, once, For 1 Doses
Classification: Broad Spectrum Antibiotic

When multiple antimicrobial agents are ordered, you may administer these immediately at the SAME TIME via different IV sites. Do not wait for the first antibiotic to infuse. If agents are Y-site compatible, they may be administered per Y-site protocols. IF the ordered agents are NOT Y site compatible, then administer the Broad-spectrum antibiotic first. Refer to available Y site compatibility information and determination of broad-spectrum antibiotic selection chart.

Reason for Therapy: Bacterial Infection Suspected

Indication: Sepsis

Recommendation: Sepsis: Recommended duration is dependent upon patient's clinical response and source identification

metronidazole (FLAGYL) IV

500 mg, intravenous, once, For 1 Doses
Classification: Narrow Spectrum Antibiotic

When multiple antimicrobial agents are ordered, you may administer these immediately at the SAME TIME via different IV sites. Do not wait for the first antibiotic to infuse. If agents are Y-site compatible, they may be administered per Y-site protocols. IF the ordered agents are NOT Y site compatible, then administer the Broad-spectrum antibiotic first. Refer to available Y site compatibility information and determination of broad-spectrum antibiotic selection chart.

Reason for Therapy: Bacterial Infection Suspected

Indication: Sepsis

ceFEPime 2 g intraMUSCULAR + metroNIDAZOLE (FLAGYL) 500 mg IV

cefepime (MAXIPIME) IM

2 g, intramuscular, once, For 1 Doses
Intramuscular route selected because no IV access available. Administer dose by deep IM into large muscle mass (e.g. gluteal muscles or lateral part of the thigh).
Reason for Therapy: Bacterial Infection Suspected
IM Route Selection: I have opted to select the IM route because IV access could not be established

Indication: Sepsis

Recommendation: Sepsis: Recommended duration is dependent upon patient's clinical response and source identification

metronidazole (FLAGYL) IV

500 mg, intravenous, once, For 1 Doses
Classification: Narrow Spectrum Antibiotic

When multiple antimicrobial agents are ordered, you may administer these immediately at the SAME TIME via different IV sites. Do not wait for the first antibiotic to infuse. If agents are Y-site compatible, they may be administered per Y-site protocols. IF the ordered agents are NOT Y site compatible, then administer the Broad-spectrum antibiotic first. Refer to available Y site compatibility information and determination of broad-spectrum antibiotic selection chart.

Reason for Therapy: Bacterial Infection Suspected

Indication: Sepsis

<input type="checkbox"/> piperacillin-tazobactam (ZOSYN) 4.5 g IV	4.5 g, intravenous, once, For 1 Doses Classification: Broad Spectrum Antibiotic
<input type="checkbox"/> piperacillin-tazobactam (ZOSYN) IV	<p>When multiple antimicrobial agents are ordered, you may administer these immediately at the SAME TIME via different IV sites. Do not wait for the first antibiotic to infuse. If agents are Y-site compatible, they may be administered per Y-site protocols. IF the ordered agents are NOT Y site compatible, then administer the Broad-spectrum antibiotic first. Refer to available Y site compatibility information and determination of broad-spectrum antibiotic selection chart.</p> Reason for Therapy: Bacterial Infection Suspected Indication: Sepsis Recommendation: Sepsis: Recommended duration is dependent upon patient's clinical response and source identification
<input type="checkbox"/> If Pseudomonas Suspected - piperacillin-tazobactam (ZOSYN) 4.5 g IV	"Followed by" Linked Panel
<input type="checkbox"/> piperacillin-tazobactam (ZOSYN) 4.5 g IV Once	4.5 g, intravenous, for .5 Hours, once, For 1 Doses Classification: Broad Spectrum Antibiotic
	<p>When multiple antimicrobial agents are ordered, you may administer these immediately at the SAME TIME via different IV sites. Do not wait for the first antibiotic to infuse. If agents are Y-site compatible, they may be administered per Y-site protocols. IF the ordered agents are NOT Y site compatible, then administer the Broad-spectrum antibiotic first. Refer to available Y site compatibility information and determination of broad-spectrum antibiotic selection chart.</p> Reason for Therapy: Bacterial Infection Suspected Indication: Sepsis Recommendation: Sepsis: Recommended duration is dependent upon patient's clinical response and source identification
<input type="checkbox"/> piperacillin-tazobactam (ZOSYN) 4.5 g IV every 8 hours	4.5 g, intravenous, for 4 Hours, once, Starting H+6 Hours, For 1 Doses Classification: Broad Spectrum Antibiotic
	<p>When multiple antimicrobial agents are ordered, you may administer these immediately at the SAME TIME via different IV sites. Do not wait for the first antibiotic to infuse. If agents are Y-site compatible, they may be administered per Y-site protocols. IF the ordered agents are NOT Y site compatible, then administer the Broad-spectrum antibiotic first. Refer to available Y site compatibility information and determination of broad-spectrum antibiotic selection chart.</p> Reason for Therapy: Bacterial Infection Suspected Indication: Sepsis Recommendation: Sepsis: Recommended duration is dependent upon patient's clinical response and source identification
<input type="checkbox"/> meropenem (MERREM) 500 mg IV	500 mg, intravenous, once, For 1 Doses Reason for Therapy: Bacterial Infection Suspected Indication: Sepsis Recommendation: Sepsis: Recommended duration is dependent upon patient's clinical response and source identification
<input type="checkbox"/> meropenem (MERREM) IV	
<input type="checkbox"/> meropenem (MERREM) 500 mg intraMUSCULAR	0.5 g, intramuscular, once, For 1 Doses Intramuscular route selected because no IV access available. Administer dose by deep IM into large muscle mass (e.g. gluteal muscles or lateral part of the thigh). Reason for Therapy: Bacterial Infection Suspected IM Route Selection: I have opted to select the IM route because IV access could not be established Indication: Sepsis Recommendation: Sepsis: Recommended duration is dependent upon patient's clinical response and source identification
<input type="checkbox"/> meropenem (MERREM) injection	

IF health-care associated, ADD - vancomycin (VANCOGIN) IV (Selection Required)

vancomycin (VANCOGIN) 15 mg/kg, intravenous, once, For 1 Doses
Classification: Narrow Spectrum Antibiotic

When multiple antimicrobial agents are ordered, you may administer these immediately at the SAME TIME via different IV sites. Do not wait for the first antibiotic to infuse. If agents are Y-site compatible, they may be administered per Y-site protocols. IF the ordered agents are NOT Y site compatible, then administer the Broad-spectrum antibiotic first. Refer to available Y site compatibility information and determination of broad-spectrum antibiotic selection chart.

Reason for Therapy: Bacterial Infection Suspected

Indication: Sepsis

Recommendation: Sepsis: Recommended duration is dependent upon patient's clinical response and source identification

Pharmacy consult to manage vancomycin STAT, Once For 1 Occurrences

Reason for Therapy: Bacterial Infection Suspected

Duration of Therapy (Days): 1

Indication: Sepsis

Recommendation: Sepsis: Recommended duration is dependent upon patient's clinical response and source identification

IF high risk or severe, consider antifungal coverage - fluconazole (DIFLUCAN) 400 mg IV

fluconazole (DIFLUCAN) IV 400 mg, intravenous, for 60 Minutes, once, For 1 Doses
Reason for Therapy: Fungal Infection Suspected

Indication:

() SEVERE Penicillin Allergy (Single Response)

() aztreonam (AZACTAM) 2 g IV + metronIDAZOLE (FLAGYL) 500 mg IV

aztreonam (AZACTAM) IV 2 g, intravenous, once, For 1 Doses
Classification: Broad Spectrum Antibiotic

When multiple antimicrobial agents are ordered, you may administer these immediately at the SAME TIME via different IV sites. Do not wait for the first antibiotic to infuse. If agents are Y-site compatible, they may be administered per Y-site protocols. IF the ordered agents are NOT Y site compatible, then administer the Broad-spectrum antibiotic first. Refer to available Y site compatibility information and determination of broad-spectrum antibiotic selection chart.

Reason for Therapy: Bacterial Infection Suspected

Indication: Sepsis

metronIDAZOLE (FLAGYL) IV 500 mg, intravenous, once, For 1 Doses
Classification: Narrow Spectrum Antibiotic

When multiple antimicrobial agents are ordered, you may administer these immediately at the SAME TIME via different IV sites. Do not wait for the first antibiotic to infuse. If agents are Y-site compatible, they may be administered per Y-site protocols. IF the ordered agents are NOT Y site compatible, then administer the Broad-spectrum antibiotic first. Refer to available Y site compatibility information and determination of broad-spectrum antibiotic selection chart.

Reason for Therapy: Bacterial Infection Suspected

Indication: Sepsis

IF health-care associated, ADD - vancomycin 15 mg/kg IV (Selection Required)

[] vancomycin (VANCOGIN)	15 mg/kg, intravenous, once, For 1 Doses Classification: Narrow Spectrum Antibiotic
	<p>When multiple antimicrobial agents are ordered, you may administer these immediately at the SAME TIME via different IV sites. Do not wait for the first antibiotic to infuse. If agents are Y-site compatible, they may be administered per Y-site protocols. IF the ordered agents are NOT Y site compatible, then administer the Broad-spectrum antibiotic first. Refer to available Y site compatibility information and determination of broad-spectrum antibiotic selection chart.</p> <p>Reason for Therapy: Bacterial Infection Suspected Indication: Sepsis Recommendation: Sepsis: Recommended duration is dependent upon patient's clinical response and source identification</p>
[] Pharmacy consult to manage vancomycin	<p>STAT, Once For 1 Occurrences Reason for Therapy: Bacterial Infection Suspected Duration of Therapy (Days): 1 Indication: Sepsis Recommendation: Sepsis: Recommended duration is dependent upon patient's clinical response and source identification</p>
[] IF high risk or severe, consider antifungal coverage: fluconazole (DIFLUCAN) IV or micafungin (MYCAMINE) IV (Single Response)	
	Note: Use fluconazole (DIFLUCAN) only in patients with absolutely no risk factors for C. glabrata or resistance
() fluconazole (DIFLUCAN) IV	800 mg, intravenous, for 60 Minutes, once, For 1 Doses Classification: Narrow Spectrum Antibiotic
	<p>When multiple antimicrobial agents are ordered, you may administer these immediately at the SAME TIME via different IV sites. Do not wait for the first antibiotic to infuse. If agents are Y-site compatible, they may be administered per Y-site protocols. IF the ordered agents are NOT Y site compatible, then administer the Broad-spectrum antibiotic first. Refer to available Y site compatibility information and determination of broad-spectrum antibiotic selection chart.</p> <p>Reason for Therapy: Bacterial Infection Suspected Indication: Sepsis Recommendation: Sepsis: Recommended duration is dependent upon patient's clinical response and source identification Reason for Therapy: Fungal Infection Suspected Indication:</p>
() micafungin (MYCAMINE) IVPB (RESTRICTED)	100 mg, intravenous, once, For 1 Doses Classification: Narrow Spectrum Antibiotic
	<p>When multiple antimicrobial agents are ordered, you may administer these immediately at the SAME TIME via different IV sites. Do not wait for the first antibiotic to infuse. If agents are Y-site compatible, they may be administered per Y-site protocols. IF the ordered agents are NOT Y site compatible, then administer the Broad-spectrum antibiotic first. Refer to available Y site compatibility information and determination of broad-spectrum antibiotic selection chart.</p> <p>RESTRICTED to Infectious Diseases (ID), Solid Organ Transplant (SOT), Bone Marrow Transplant (BMT), and Hematology/Oncology (Heme/Onc) specialists. Are you an ID, SOT, BMT, or Heme/Onc specialist or ordering on behalf of one?</p> <p>Reason for Therapy: Other Specify: Sepsis Authorizing ID:</p>
() aztreonam (AZACTAM) 2 g intraMUSCULAR + metronIDAZOLE (FLAGYL) 500 mg IV	

<input type="checkbox"/> aztreonam (AZACTAM) intraMUSCULAR	2 g, intramuscular, once, For 1 Doses Intramuscular route selected because no IV access available. Administer dose by deep IM into large muscle mass (e.g. gluteal muscles or lateral part of the thigh). Reason for Therapy: Bacterial Infection Suspected Indication: Sepsis IM Route Selection: I have opted to select the IM route because IV access could not be established
<input type="checkbox"/> metroNIDAZOLE (FLAGYL) IV	500 mg, intravenous, once, For 1 Doses Classification: Narrow Spectrum Antibiotic When multiple antimicrobial agents are ordered, you may administer these immediately at the SAME TIME via different IV sites. Do not wait for the first antibiotic to infuse. If agents are Y-site compatible, they may be administered per Y-site protocols. IF the ordered agents are NOT Y site compatible, then administer the Broad-spectrum antibiotic first. Refer to available Y site compatibility information and determination of broad-spectrum antibiotic selection chart. Reason for Therapy: Bacterial Infection Suspected Indication: Sepsis
<input type="checkbox"/> IF health-care associated, ADD - vancomycin 15 mg/kg IV (Selection Required)	
<input type="checkbox"/> vancomycin (VANCOCIN)	15 mg/kg, intravenous, once, For 1 Doses Classification: Narrow Spectrum Antibiotic When multiple antimicrobial agents are ordered, you may administer these immediately at the SAME TIME via different IV sites. Do not wait for the first antibiotic to infuse. If agents are Y-site compatible, they may be administered per Y-site protocols. IF the ordered agents are NOT Y site compatible, then administer the Broad-spectrum antibiotic first. Refer to available Y site compatibility information and determination of broad-spectrum antibiotic selection chart. Reason for Therapy: Bacterial Infection Suspected Indication: Sepsis Recommendation: Sepsis: Recommended duration is dependent upon patient's clinical response and source identification
<input type="checkbox"/> Pharmacy consult to manage vancomycin	STAT, Once For 1 Occurrences Reason for Therapy: Bacterial Infection Suspected Duration of Therapy (Days): 1 Indication: Sepsis Recommendation: Sepsis: Recommended duration is dependent upon patient's clinical response and source identification
<input type="checkbox"/> IF high risk or severe, consider antifungal coverage: fluconazole (DIFLUCAN) IV or micafungin (MYCAMINE) IV (Single Response)	
Note: Use fluconazole (DIFLUCAN) only in patients with absolutely no risk factors for C. glabrata or resistance	
<input type="checkbox"/> fluconazole (DIFLUCAN) IV	800 mg, intravenous, for 60 Minutes, once, For 1 Doses Classification: Narrow Spectrum Antibiotic When multiple antimicrobial agents are ordered, you may administer these immediately at the SAME TIME via different IV sites. Do not wait for the first antibiotic to infuse. If agents are Y-site compatible, they may be administered per Y-site protocols. IF the ordered agents are NOT Y site compatible, then administer the Broad-spectrum antibiotic first. Refer to available Y site compatibility information and determination of broad-spectrum antibiotic selection chart. Reason for Therapy: Bacterial Infection Suspected Indication: Sepsis Recommendation: Sepsis: Recommended duration is dependent upon patient's clinical response and source identification Reason for Therapy: Fungal Infection Suspected Indication:

micafungin (MYCAMINE) IVPB
(RESTRICTED)

100 mg, intravenous, once, For 1 Doses
Classification: Narrow Spectrum Antibiotic

When multiple antimicrobial agents are ordered, you may administer these immediately at the SAME TIME via different IV sites. Do not wait for the first antibiotic to infuse. If agents are Y-site compatible, they may be administered per Y-site protocols. IF the ordered agents are NOT Y site compatible, then administer the Broad-spectrum antibiotic first. Refer to available Y site compatibility information and determination of broad-spectrum antibiotic selection chart. RESTRICTED to Infectious Diseases (ID), Solid Organ Transplant (SOT), Bone Marrow Transplant (BMT), and Hematology/Oncology (Heme/Onc) specialists. Are you an ID, SOT, BMT, or Heme/Onc specialist or ordering on behalf of one?
Reason for Therapy: Other
Specify: Sepsis
Authorizing ID:

SEVERE Vancomycin Allergy

ceFEPime + metroNIDAZOLE (FLAGYL) OR
piperacillin-tazobactam (ZOSYN) IV OR meropenem
(MERREM) IV (Single Response) (Selection Required)

ceFEPime 2 g IV + metroNIDAZOLE (FLAGYL) 500 mg
IV

ceFEPime (MAXIPIME) IV

2 g, intravenous, once, For 1 Doses
Classification: Broad Spectrum Antibiotic

When multiple antimicrobial agents are ordered, you may administer these immediately at the SAME TIME via different IV sites. Do not wait for the first antibiotic to infuse. If agents are Y-site compatible, they may be administered per Y-site protocols. IF the ordered agents are NOT Y site compatible, then administer the Broad-spectrum antibiotic first. Refer to available Y site compatibility information and determination of broad-spectrum antibiotic selection chart. Per Med Staff Policy, R.Ph. will automatically renally dose this medication based on current SCr and CrCl values.
Reason for Therapy:

metronidazole (FLAGYL) IV

500 mg, intravenous, once, For 1 Doses
Classification: Narrow Spectrum Antibiotic

When multiple antimicrobial agents are ordered, you may administer these immediately at the SAME TIME via different IV sites. Do not wait for the first antibiotic to infuse. If agents are Y-site compatible, they may be administered per Y-site protocols. IF the ordered agents are NOT Y site compatible, then administer the Broad-spectrum antibiotic first. Refer to available Y site compatibility information and determination of broad-spectrum antibiotic selection chart.
Reason for Therapy: Bacterial Infection Suspected
Indication: Sepsis

ceFEPime 2 g intraMUSCULAR + metroNIDAZOLE
(FLAGYL) 500 mg IV

cefepime (MAXIPIME) IM

2 g, intramuscular, once, For 1 Doses
Intramuscular route selected because no IV access available. Administer dose by deep IM into large muscle mass (e.g. gluteal muscles or lateral part of the thigh).
Reason for Therapy: Bacterial Infection Suspected
IM Route Selection: I have opted to select the IM route because IV access could not be established
Indication: Sepsis
Recommendation: Sepsis: Recommended duration is dependent upon patient's clinical response and source identification

<input type="checkbox"/> metronidazole (FLAGYL) IV <input type="checkbox"/> piperacillin-tazobactam (ZOSYN) 4.5 g IV <input type="checkbox"/> piperacillin-tazobactam (ZOSYN) IV	<p>500 mg, intravenous, once, For 1 Doses Classification: Narrow Spectrum Antibiotic</p> <p>When multiple antimicrobial agents are ordered, you may administer these immediately at the SAME TIME via different IV sites. Do not wait for the first antibiotic to infuse. If agents are Y-site compatible, they may be administered per Y-site protocols. IF the ordered agents are NOT Y site compatible, then administer the Broad-spectrum antibiotic first. Refer to available Y site compatibility information and determination of broad-spectrum antibiotic selection chart. Reason for Therapy: Bacterial Infection Suspected Indication: Sepsis</p>
<input type="checkbox"/> piperacillin-tazobactam (ZOSYN) 4.5 g IV <input type="checkbox"/> piperacillin-tazobactam (ZOSYN) IV	<p>4.5 g, intravenous, once, For 1 Doses Classification: Broad Spectrum Antibiotic</p> <p>When multiple antimicrobial agents are ordered, you may administer these immediately at the SAME TIME via different IV sites. Do not wait for the first antibiotic to infuse. If agents are Y-site compatible, they may be administered per Y-site protocols. IF the ordered agents are NOT Y site compatible, then administer the Broad-spectrum antibiotic first. Refer to available Y site compatibility information and determination of broad-spectrum antibiotic selection chart. Reason for Therapy: Bacterial Infection Suspected Indication: Sepsis Recommendation: Sepsis: Recommended duration is dependent upon patient's clinical response and source identification</p>
<input type="checkbox"/> If Pseudomonas Suspected - piperacillin-tazobactam (ZOSYN) 4.5 g IV	<p style="text-align: center;">"Followed by" Linked Panel</p>
<input type="checkbox"/> piperacillin-tazobactam (ZOSYN) 4.5 g IV Once	<p>4.5 g, intravenous, for .5 Hours, once, For 1 Doses Classification: Broad Spectrum Antibiotic</p> <p>When multiple antimicrobial agents are ordered, you may administer these immediately at the SAME TIME via different IV sites. Do not wait for the first antibiotic to infuse. If agents are Y-site compatible, they may be administered per Y-site protocols. IF the ordered agents are NOT Y site compatible, then administer the Broad-spectrum antibiotic first. Refer to available Y site compatibility information and determination of broad-spectrum antibiotic selection chart. Reason for Therapy: Bacterial Infection Suspected Indication: Sepsis Recommendation: Sepsis: Recommended duration is dependent upon patient's clinical response and source identification</p>
<input type="checkbox"/> piperacillin-tazobactam (ZOSYN) 4.5 g IV every 8 hours	<p>4.5 g, intravenous, for 4 Hours, once, Starting H+6 Hours, For 1 Doses Classification: Broad Spectrum Antibiotic</p> <p>When multiple antimicrobial agents are ordered, you may administer these immediately at the SAME TIME via different IV sites. Do not wait for the first antibiotic to infuse. If agents are Y-site compatible, they may be administered per Y-site protocols. IF the ordered agents are NOT Y site compatible, then administer the Broad-spectrum antibiotic first. Refer to available Y site compatibility information and determination of broad-spectrum antibiotic selection chart. Reason for Therapy: Bacterial Infection Suspected Indication: Sepsis Recommendation: Sepsis: Recommended duration is dependent upon patient's clinical response and source identification</p>
<input type="checkbox"/> meropenem (MERREM) 500 mg IV <input type="checkbox"/> meropenem (MERREM) IV	<p>500 mg, intravenous, once, For 1 Doses Reason for Therapy: Bacterial Infection Suspected Indication: Sepsis Recommendation: Sepsis: Recommended duration is dependent upon patient's clinical response and source identification</p>

<input type="checkbox"/> meropenem (MERREM) 500 mg intraMUSCULAR	<input type="checkbox"/> meropenem (MERREM) injection 0.5 g, intramuscular, once, For 1 Doses Intramuscular route selected because no IV access available. Administer dose by deep IM into large muscle mass (e.g. gluteal muscles or lateral part of the thigh). Reason for Therapy: Bacterial Infection Suspected IM Route Selection: I have opted to select the IM route because IV access could not be established Indication: Sepsis Recommendation: Sepsis: Recommended duration is dependent upon patient's clinical response and source identification
<input type="checkbox"/> IF health-care associated, ADD - linezolid in dextrose 5% (ZYVOX) IVPB	600 mg, intravenous, for 60 Minutes, once, For 1 Doses Classification: Narrow Spectrum Antibiotic When multiple antimicrobial agents are ordered, you may administer these immediately at the SAME TIME via different IV sites. Do not wait for the first antibiotic to infuse. If agents are Y-site compatible, they may be administered per Y-site protocols. IF the ordered agents are NOT Y site compatible, then administer the Broad-spectrum antibiotic first. Refer to available Y site compatibility information and determination of broad-spectrum antibiotic selection chart. Reason for Therapy: Bacterial Infection Suspected Indication: Sepsis Recommendation: Sepsis: Recommended duration is dependent upon patient's clinical response and source identification
<input type="checkbox"/> IF high risk or severe, consider antifungal coverage - fluconazole (DIFLUCAN) 400 mg IV	<input type="checkbox"/> fluconazole (DIFLUCAN) IV 400 mg, intravenous, for 60 Minutes, once, For 1 Doses Reason for Therapy: Fungal Infection Suspected Indication:
<input type="checkbox"/> SEVERE Penicillin and Vancomycin Allergy (Single Response)	
<input type="checkbox"/> aztreonam (AZACTAM) 2 g IV + metroNIDAZOLE (FLAGYL) 500 mg IV	<input type="checkbox"/> aztreonam (AZACTAM) IV 2 g, intravenous, once, For 1 Doses Classification: Broad Spectrum Antibiotic When multiple antimicrobial agents are ordered, you may administer these immediately at the SAME TIME via different IV sites. Do not wait for the first antibiotic to infuse. If agents are Y-site compatible, they may be administered per Y-site protocols. IF the ordered agents are NOT Y site compatible, then administer the Broad-spectrum antibiotic first. Refer to available Y site compatibility information and determination of broad-spectrum antibiotic selection chart. Type of Therapy: New Anti-Infective Order Reason for Therapy: Bacterial Infection Suspected Indication: Sepsis
<input type="checkbox"/> metroNIDAZOLE (FLAGYL) IV	500 mg, intravenous, once, For 1 Doses Classification: Narrow Spectrum Antibiotic When multiple antimicrobial agents are ordered, you may administer these immediately at the SAME TIME via different IV sites. Do not wait for the first antibiotic to infuse. If agents are Y-site compatible, they may be administered per Y-site protocols. IF the ordered agents are NOT Y site compatible, then administer the Broad-spectrum antibiotic first. Refer to available Y site compatibility information and determination of broad-spectrum antibiotic selection chart. Type of Therapy: New Anti-Infective Order Reason for Therapy: Bacterial Infection Suspected Indication: Sepsis

[] IF health-care associated, ADD - linezolid in dextrose 5% (ZYVOX) IVPB	600 mg, intravenous, for 60 Minutes, once, For 1 Doses Classification: Narrow Spectrum Antibiotic
<p>When multiple antimicrobial agents are ordered, you may administer these immediately at the SAME TIME via different IV sites. Do not wait for the first antibiotic to infuse. If agents are Y-site compatible, they may be administered per Y-site protocols. IF the ordered agents are NOT Y site compatible, then administer the Broad-spectrum antibiotic first. Refer to available Y site compatibility information and determination of broad-spectrum antibiotic selection chart.</p> <p>Reason for Therapy: Bacterial Infection Suspected Indication: Sepsis Recommendation: Sepsis: Recommended duration is dependent upon patient's clinical response and source identification</p>	
[] IF high risk or severe, consider antifungal coverage: fluconazole (DIFLUCAN) IV or micafungin (MYCAMINE) IV (Single Response)	
Note: Use fluconazole (DIFLUCAN) only in patients with absolutely no risk factors for C. glabrata or resistance	
() fluconazole (DIFLUCAN) IV	800 mg, intravenous, for 60 Minutes, once, For 1 Doses Classification: Narrow Spectrum Antibiotic
<p>When multiple antimicrobial agents are ordered, you may administer these immediately at the SAME TIME via different IV sites. Do not wait for the first antibiotic to infuse. If agents are Y-site compatible, they may be administered per Y-site protocols. IF the ordered agents are NOT Y site compatible, then administer the Broad-spectrum antibiotic first. Refer to available Y site compatibility information and determination of broad-spectrum antibiotic selection chart.</p> <p>Reason for Therapy: Bacterial Infection Suspected Indication: Sepsis Recommendation: Sepsis: Recommended duration is dependent upon patient's clinical response and source identification Reason for Therapy: Fungal Infection Suspected Indication:</p>	
() micafungin (MYCAMINE) IVPB (RESTRICTED)	100 mg, intravenous, once, For 1 Doses Classification: Narrow Spectrum Antibiotic
<p>When multiple antimicrobial agents are ordered, you may administer these immediately at the SAME TIME via different IV sites. Do not wait for the first antibiotic to infuse. If agents are Y-site compatible, they may be administered per Y-site protocols. IF the ordered agents are NOT Y site compatible, then administer the Broad-spectrum antibiotic first. Refer to available Y site compatibility information and determination of broad-spectrum antibiotic selection chart.</p> <p>RESTRICTED to Infectious Diseases (ID), Solid Organ Transplant (SOT), Bone Marrow Transplant (BMT), and Hematology/Oncology (Heme/Onc) specialists. Are you an ID, SOT, BMT, or Heme/Onc specialist or ordering on behalf of one? Reason for Therapy: Other Specify: Sepsis Authorizing ID:</p>	
() aztreonam (AZACTAM) 2 g intraMUSCULAR + metroNIDAZOLE (FLAGYL) 500 mg IV	
[] aztreonam (AZACTAM) intraMUSCULAR	<p>2 g, intramuscular, once, For 1 Doses Intramuscular route selected because no IV access available. Administer dose by deep IM into large muscle mass (e.g. gluteal muscles or lateral part of the thigh). Reason for Therapy: Bacterial Infection Suspected Indication: Sepsis IM Route Selection: I have opted to select the IM route because IV access could not be established</p>

<input type="checkbox"/> metroNIDAZOLE (FLAGYL) IV	<p>500 mg, intravenous, once, For 1 Doses Classification: Narrow Spectrum Antibiotic</p> <p>When multiple antimicrobial agents are ordered, you may administer these immediately at the SAME TIME via different IV sites. Do not wait for the first antibiotic to infuse. If agents are Y-site compatible, they may be administered per Y-site protocols. IF the ordered agents are NOT Y site compatible, then administer the Broad-spectrum antibiotic first. Refer to available Y site compatibility information and determination of broad-spectrum antibiotic selection chart.</p> <p>Type of Therapy: New Anti-Infective Order Reason for Therapy: Bacterial Infection Suspected Indication: Sepsis</p>
<input type="checkbox"/> IF healthcare-associated, ADD - linezolid in dextrose 5% (ZYVOX) IVPB	<p>600 mg, intravenous, for 60 Minutes, once, For 1 Doses Classification: Narrow Spectrum Antibiotic</p> <p>When multiple antimicrobial agents are ordered, you may administer these immediately at the SAME TIME via different IV sites. Do not wait for the first antibiotic to infuse. If agents are Y-site compatible, they may be administered per Y-site protocols. IF the ordered agents are NOT Y site compatible, then administer the Broad-spectrum antibiotic first. Refer to available Y site compatibility information and determination of broad-spectrum antibiotic selection chart.</p> <p>Reason for Therapy: Bacterial Infection Suspected Indication: Sepsis</p>
<input type="checkbox"/> IF high risk or severe, consider antifungal coverage: fluconazole (DIFLUCAN) IV or micafungin (MYCAMINE) IV (Single Response)	<p>Note: Use fluconazole (DIFLUCAN) only in patients with absolutely no risk factors for C. glabrata or resistance</p>
<input type="checkbox"/> fluconazole (DIFLUCAN) IV	<p>800 mg, intravenous, for 60 Minutes, once, For 1 Doses Classification: Narrow Spectrum Antibiotic</p> <p>When multiple antimicrobial agents are ordered, you may administer these immediately at the SAME TIME via different IV sites. Do not wait for the first antibiotic to infuse. If agents are Y-site compatible, they may be administered per Y-site protocols. IF the ordered agents are NOT Y site compatible, then administer the Broad-spectrum antibiotic first. Refer to available Y site compatibility information and determination of broad-spectrum antibiotic selection chart.</p> <p>Reason for Therapy: Fungal Infection Suspected Indication:</p>
<input type="checkbox"/> micafungin (MYCAMINE) IVPB (RESTRICTED)	<p>100 mg, intravenous, once, For 1 Doses Classification: Narrow Spectrum Antibiotic</p> <p>When multiple antimicrobial agents are ordered, you may administer these immediately at the SAME TIME via different IV sites. Do not wait for the first antibiotic to infuse. If agents are Y-site compatible, they may be administered per Y-site protocols. IF the ordered agents are NOT Y site compatible, then administer the Broad-spectrum antibiotic first. Refer to available Y site compatibility information and determination of broad-spectrum antibiotic selection chart.</p> <p>RESTRICTED to Infectious Diseases (ID), Solid Organ Transplant (SOT), Bone Marrow Transplant (BMT), and Hematology/Oncology (Heme/Onc) specialists. Are you an ID, SOT, BMT, or Heme/Onc specialist or ordering on behalf of one?</p> <p>Reason for Therapy: Other Specify: Sepsis Authorizing ID:</p>

Bacterial Meningitis - Community-Acquired and ImmunoCOMPETENT (Single Response)

Does your patient have a SEVERE Penicillin and/or Vancomycin allergy?

() No SEVERE Penicillin or Vancomycin Allergy (Single Response)

Dexamethasone is recommended for treatment of proven or suspected pneumococcal meningitis due to *S. pneumoniae*

() cefTRIAxone (ROCEPHIN) 2 g IV + vancomycin 15 mg/kg IV - For Patients LESS than 50 years old

cefTRIAxone (ROCEPHIN) IV 2 g, intravenous, for 30 Minutes, once, For 1 Doses
Classification: Broad Spectrum Antibiotic

When multiple antimicrobial agents are ordered, you may administer these immediately at the SAME TIME via different IV sites. Do not wait for the first antibiotic to infuse. If agents are Y-site compatible, they may be administered per Y-site protocols. IF the ordered agents are NOT Y site compatible, then administer the Broad-spectrum antibiotic first. Refer to available Y site compatibility information and determination of broad-spectrum antibiotic selection chart.

Reason for Therapy: Bacterial Infection Suspected

Indication: Sepsis

Recommendation: Sepsis: Recommended duration is dependent upon patient's clinical response and source identification

vancomycin (VANCOCIN) IV + Pharmacy Consult to Dose (Selection Required)

vancomycin (VANCOCIN) 15 mg/kg, intravenous, once, For 1 Doses
Classification: Narrow Spectrum Antibiotic

When multiple antimicrobial agents are ordered, you may administer these immediately at the SAME TIME via different IV sites. Do not wait for the first antibiotic to infuse. If agents are Y-site compatible, they may be administered per Y-site protocols. IF the ordered agents are NOT Y site compatible, then administer the Broad-spectrum antibiotic first. Refer to available Y site compatibility information and determination of broad-spectrum antibiotic selection chart.

Reason for Therapy: Bacterial Infection Suspected

Indication: Sepsis

Recommendation: Sepsis: Recommended duration is dependent upon patient's clinical response and source identification

Pharmacy consult to manage vancomycin

STAT, Once For 1 Occurrences

Reason for Therapy: Bacterial Infection Suspected

Duration of Therapy (Days): 1

Indication: Sepsis

Recommendation: Sepsis: Recommended duration is dependent upon patient's clinical response and source identification

OPTIONAL Additional Therapies - dexamethasone (DECADRON) IV 0.15 mg/kg, intravenous, once, For 1 Doses
Administer 15-20 minutes before 1st dose of antibiotics.

() cefTRIAxone (ROCEPHIN) 2 g IV + vancomycin 15 mg/kg IV + ampicillin 2 g IV - For Patients GREATER than 50 years old

cefTRIAxone (ROCEPHIN) IV 2 g, intravenous, for 30 Minutes, once, For 1 Doses
Classification: Broad Spectrum Antibiotic

When multiple antimicrobial agents are ordered, you may administer these immediately at the SAME TIME via different IV sites. Do not wait for the first antibiotic to infuse. If agents are Y-site compatible, they may be administered per Y-site protocols. IF the ordered agents are NOT Y site compatible, then administer the Broad-spectrum antibiotic first. Refer to available Y site compatibility information and determination of broad-spectrum antibiotic selection chart.

Reason for Therapy: Bacterial Infection Suspected

Indication: Sepsis

Recommendation: Sepsis: Recommended duration is dependent upon patient's clinical response and source identification

vancomycin (VANCOCIN) IV + Pharmacy Consult to Dose (Selection Required)

[] vancomycin (VANCOCIN)	15 mg/kg, intravenous, once, For 1 Doses Classification: Narrow Spectrum Antibiotic
	When multiple antimicrobial agents are ordered, you may administer these immediately at the SAME TIME via different IV sites. Do not wait for the first antibiotic to infuse. If agents are Y-site compatible, they may be administered per Y-site protocols. IF the ordered agents are NOT Y site compatible, then administer the Broad-spectrum antibiotic first. Refer to available Y site compatibility information and determination of broad-spectrum antibiotic selection chart. Reason for Therapy: Bacterial Infection Suspected Indication: Sepsis Recommendation: Sepsis: Recommended duration is dependent upon patient's clinical response and source identification
[] Pharmacy consult to manage vancomycin	STAT, Once For 1 Occurrences Reason for Therapy: Bacterial Infection Suspected Duration of Therapy (Days): 1 Indication: Sepsis Recommendation: Sepsis: Recommended duration is dependent upon patient's clinical response and source identification
[] ampicillin IV	2 g, intravenous, for 30 Minutes, once, For 1 Doses Classification: Narrow Spectrum Antibiotic
	When multiple antimicrobial agents are ordered, you may administer these immediately at the SAME TIME via different IV sites. Do not wait for the first antibiotic to infuse. If agents are Y-site compatible, they may be administered per Y-site protocols. IF the ordered agents are NOT Y site compatible, then administer the Broad-spectrum antibiotic first. Refer to available Y site compatibility information and determination of broad-spectrum antibiotic selection chart. Reason for Therapy: Bacterial Infection Suspected Indication: Sepsis
[] OPTIONAL Additional Therapies - dexamethasone (DECADRON) IV	0.15 mg/kg, intravenous, once, For 1 Doses Administer 15-20 minutes before 1st dose of antibiotics.
[] OPTIONAL Additional Therapies - riFAMpin (RIFADIN) capsule	600 mg, oral, once, For 1 Doses Reason for Therapy: Bacterial Infection Suspected Indication: Sepsis
() cefTRIAxone (ROCEPHIN) 2 g intraMUSCULAR + vancomycin 15 mg/kg IV - For Patients LESS than 50 years old	
[] cefTRIAxone (ROCEPHIN) IM	2 g, intramuscular, once, For 1 Doses Intramuscular route selected because no IV access available. Administer dose by deep IM into large muscle mass (e.g. gluteal muscles or lateral part of the thigh). Reason for Therapy: Bacterial Infection Suspected IM Route Selection: I have opted to select the IM route because IV access could not be established Indication: Sepsis Recommendation: Sepsis: Recommended duration is dependent upon patient's clinical response and source identification
[] vancomycin (VANCOCIN) IV + Pharmacy Consult to Dose (Selection Required)	

[] vancomycin (VANCOCIN)	15 mg/kg, intravenous, once, For 1 Doses Classification: Narrow Spectrum Antibiotic
	When multiple antimicrobial agents are ordered, you may administer these immediately at the SAME TIME via different IV sites. Do not wait for the first antibiotic to infuse. If agents are Y-site compatible, they may be administered per Y-site protocols. IF the ordered agents are NOT Y site compatible, then administer the Broad-spectrum antibiotic first. Refer to available Y site compatibility information and determination of broad-spectrum antibiotic selection chart. Reason for Therapy: Bacterial Infection Suspected Indication: Sepsis Recommendation: Sepsis: Recommended duration is dependent upon patient's clinical response and source identification
[] Pharmacy consult to manage vancomycin	STAT, Once For 1 Occurrences Reason for Therapy: Bacterial Infection Suspected Duration of Therapy (Days): 1 Indication: Sepsis Recommendation: Sepsis: Recommended duration is dependent upon patient's clinical response and source identification
[] OPTIONAL Additional Therapies - dexamethasone (DECADRON) IV	0.15 mg/kg, intravenous, once, For 1 Doses Administer 15-20 minutes before 1st dose of antibiotics.
[] OPTIONAL Additional Therapies - rifAMPin (RIFADIN) capsule	600 mg, oral, once, For 1 Doses Reason for Therapy: Bacterial Infection Suspected Indication: Sepsis
() cefTRIAxone (ROCEPHIN) 2 g intraMUSCULAR + vancomycin 15 mg/kg IV + ampicillin 2 g intraMUSCULAR - For Patients GREATER than 50 years old	
[] cefTRIAxone (ROCEPHIN) IM	2 g, intramuscular, once, For 1 Doses Intramuscular route selected because no IV access available. Administer dose by deep IM into large muscle mass (e.g. gluteal muscles or lateral part of the thigh). Reason for Therapy: Bacterial Infection Suspected Indication: Sepsis Recommendation: Sepsis: Recommended duration is dependent upon patient's clinical response and source identification
[] vancomycin (VANCOCIN) IV + Pharmacy Consult to Dose (Selection Required)	
[] vancomycin (VANCOCIN)	15 mg/kg, intravenous, once, For 1 Doses Classification: Narrow Spectrum Antibiotic
	When multiple antimicrobial agents are ordered, you may administer these immediately at the SAME TIME via different IV sites. Do not wait for the first antibiotic to infuse. If agents are Y-site compatible, they may be administered per Y-site protocols. IF the ordered agents are NOT Y site compatible, then administer the Broad-spectrum antibiotic first. Refer to available Y site compatibility information and determination of broad-spectrum antibiotic selection chart. Reason for Therapy: Bacterial Infection Suspected Indication: Sepsis Recommendation: Sepsis: Recommended duration is dependent upon patient's clinical response and source identification
[] Pharmacy consult to manage vancomycin	STAT, Once For 1 Occurrences Reason for Therapy: Bacterial Infection Suspected Duration of Therapy (Days): 1 Indication: Sepsis Recommendation: Sepsis: Recommended duration is dependent upon patient's clinical response and source identification

[] ampicillin IM	2 g, intramuscular, once, For 1 Doses Intramuscular route selected because no IV access available. Administer dose by deep IM into large muscle mass (e.g. gluteal muscles or lateral part of the thigh). Reason for Therapy: Bacterial Infection Suspected Indication: Sepsis
[] OPTIONAL Additional Therapies - dexamethasone (DECADRON) IV	0.15 mg/kg, intravenous, once, For 1 Doses Administer 15-20 minutes before 1st dose of antibiotics.
[] OPTIONAL Additional Therapies - riFAMPin (RIFADIN) capsule	600 mg, oral, once, For 1 Doses Reason for Therapy: Bacterial Infection Suspected Indication: Sepsis
() SEVERE Penicillin Allergy (Single Response) Dexamethasone is recommended for treatment of proven or suspected pneumococcal meningitis due to S. pneumoniae	
() aztreonam (AZACTAM) 2 g IV + vancomycin 15 mg/kg IV	
[] aztreonam (AZACTAM) IV	2 g, intravenous, once, For 1 Doses Classification: Broad Spectrum Antibiotic When multiple antimicrobial agents are ordered, you may administer these immediately at the SAME TIME via different IV sites. Do not wait for the first antibiotic to infuse. If agents are Y-site compatible, they may be administered per Y-site protocols. IF the ordered agents are NOT Y site compatible, then administer the Broad-spectrum antibiotic first. Refer to available Y site compatibility information and determination of broad-spectrum antibiotic selection chart. Reason for Therapy: Bacterial Infection Suspected Indication: Sepsis
[] vancomycin (VANCOCIN) IV + Pharmacy Consult to Dose (Selection Required)	
[] vancomycin (VANCOCIN)	15 mg/kg, intravenous, once, For 1 Doses Classification: Narrow Spectrum Antibiotic When multiple antimicrobial agents are ordered, you may administer these immediately at the SAME TIME via different IV sites. Do not wait for the first antibiotic to infuse. If agents are Y-site compatible, they may be administered per Y-site protocols. IF the ordered agents are NOT Y site compatible, then administer the Broad-spectrum antibiotic first. Refer to available Y site compatibility information and determination of broad-spectrum antibiotic selection chart. Reason for Therapy: Bacterial Infection Suspected Indication: Sepsis Recommendation: Sepsis: Recommended duration is dependent upon patient's clinical response and source identification
[] Pharmacy consult to manage vancomycin	STAT, Once For 1 Occurrences Reason for Therapy: Bacterial Infection Suspected Duration of Therapy (Days): 1 Indication: Sepsis Recommendation: Sepsis: Recommended duration is dependent upon patient's clinical response and source identification
[] OPTIONAL Additional Therapies - dexamethasone (DECADRON) IV	0.15 mg/kg, intravenous, once, For 1 Doses Administer 15-20 minutes before 1st dose of antibiotics.
() aztreonam (AZACTAM) 2 g intraMUSCULAR + vancomycin 15 mg/kg IV	

[] aztreonam (AZACTAM) intraMUSCULAR	2 g, intramuscular, once, For 1 Doses Classification: Broad Spectrum Antibiotic
	<p>When multiple antimicrobial agents are ordered, you may administer these immediately at the SAME TIME via different IV sites. Do not wait for the first antibiotic to infuse. If agents are Y-site compatible, they may be administered per Y-site protocols. IF the ordered agents are NOT Y site compatible, then administer the Broad-spectrum antibiotic first. Refer to available Y site compatibility information and determination of broad-spectrum antibiotic selection chart.</p> <p>Reason for Therapy: Bacterial Infection Suspected Indication: Sepsis IM Route Selection: I have opted to select the IM route because IV access could not be established</p>
[] vancomycin (VANCOCIN) IV + Pharmacy Consult to Dose (Selection Required)	
[] vancomycin (VANCOCIN)	15 mg/kg, intravenous, once, For 1 Doses Classification: Narrow Spectrum Antibiotic
	<p>When multiple antimicrobial agents are ordered, you may administer these immediately at the SAME TIME via different IV sites. Do not wait for the first antibiotic to infuse. If agents are Y-site compatible, they may be administered per Y-site protocols. IF the ordered agents are NOT Y site compatible, then administer the Broad-spectrum antibiotic first. Refer to available Y site compatibility information and determination of broad-spectrum antibiotic selection chart.</p> <p>Reason for Therapy: Bacterial Infection Suspected Indication: Sepsis Recommendation: Sepsis: Recommended duration is dependent upon patient's clinical response and source identification</p>
[] Pharmacy consult to manage vancomycin	<p>STAT, Once For 1 Occurrences Reason for Therapy: Bacterial Infection Suspected Duration of Therapy (Days): 1 Indication: Sepsis Recommendation: Sepsis: Recommended duration is dependent upon patient's clinical response and source identification</p>
[] OPTIONAL Additional Therapies - dexamethasone (DECADRON) IV	0.15 mg/kg, intravenous, once, For 1 Doses Administer 15-20 minutes before 1st dose of antibiotics.
() SEVERE Vancomycin Allergy (Single Response)	
	Dexamethasone is recommended for treatment of proven or suspected pneumococcal meningitis due to S. pneumoniae
() cefTRIAxone (ROCEPHIN) 2 g IV + linezolid (ZYVOX) 600 mg IV - For Patients LESS than 50 years old	
[] cefTRIAxone (ROCEPHIN) IV	2 g, intravenous, for 30 Minutes, once, For 1 Doses Classification: Broad Spectrum Antibiotic
	<p>When multiple antimicrobial agents are ordered, you may administer these immediately at the SAME TIME via different IV sites. Do not wait for the first antibiotic to infuse. If agents are Y-site compatible, they may be administered per Y-site protocols. IF the ordered agents are NOT Y site compatible, then administer the Broad-spectrum antibiotic first. Refer to available Y site compatibility information and determination of broad-spectrum antibiotic selection chart.</p> <p>Reason for Therapy: Bacterial Infection Suspected Indication: Sepsis Recommendation: Sepsis: Recommended duration is dependent upon patient's clinical response and source identification</p>

[] linezolid in dextrose 5% (ZYVOX) IVPB	<p>600 mg, intravenous, for 60 Minutes, once, For 1 Doses Classification: Narrow Spectrum Antibiotic</p> <p>When multiple antimicrobial agents are ordered, you may administer these immediately at the SAME TIME via different IV sites. Do not wait for the first antibiotic to infuse. If agents are Y-site compatible, they may be administered per Y-site protocols. IF the ordered agents are NOT Y site compatible, then administer the Broad-spectrum antibiotic first. Refer to available Y site compatibility information and determination of broad-spectrum antibiotic selection chart. Reason for Therapy: Bacterial Infection Suspected Indication: Sepsis Recommendation: Sepsis: Recommended duration is dependent upon patient's clinical response and source identification</p>
[] OPTIONAL Additional Therapies - dexamethasone (DECADRON) IV	<p>0.15 mg/kg, intravenous, once, For 1 Doses Administer 15-20 minutes before 1st dose of antibiotics.</p>
() cefTRIAxone (ROCEPHIN) 2 g IV + linezolid (ZYVOX) 600 mg IV + ampicillin 2 g IV - For Patients GREATER than 50 years old	
[] cefTRIAxone (ROCEPHIN) IV	<p>2 g, intravenous, for 30 Minutes, once, For 1 Doses Classification: Broad Spectrum Antibiotic</p> <p>When multiple antimicrobial agents are ordered, you may administer these immediately at the SAME TIME via different IV sites. Do not wait for the first antibiotic to infuse. If agents are Y-site compatible, they may be administered per Y-site protocols. IF the ordered agents are NOT Y site compatible, then administer the Broad-spectrum antibiotic first. Refer to available Y site compatibility information and determination of broad-spectrum antibiotic selection chart. Reason for Therapy: Bacterial Infection Suspected Indication: Sepsis Recommendation: Sepsis: Recommended duration is dependent upon patient's clinical response and source identification</p>
[] vancomycin (VANCOGIN) IV + Pharmacy Consult to Dose (Selection Required)	
[] vancomycin (VANCOGIN)	<p>15 mg/kg, intravenous, once, For 1 Doses Classification: Narrow Spectrum Antibiotic</p> <p>When multiple antimicrobial agents are ordered, you may administer these immediately at the SAME TIME via different IV sites. Do not wait for the first antibiotic to infuse. If agents are Y-site compatible, they may be administered per Y-site protocols. IF the ordered agents are NOT Y site compatible, then administer the Broad-spectrum antibiotic first. Refer to available Y site compatibility information and determination of broad-spectrum antibiotic selection chart. Reason for Therapy: Bacterial Infection Suspected Indication: Sepsis Recommendation: Sepsis: Recommended duration is dependent upon patient's clinical response and source identification</p>
[] Pharmacy consult to manage vancomycin	<p>STAT, Once For 1 Occurrences Reason for Therapy: Bacterial Infection Suspected Duration of Therapy (Days): 1 Indication: Sepsis Recommendation: Sepsis: Recommended duration is dependent upon patient's clinical response and source identification</p>

<input type="checkbox"/> ampicillin IV	<p>2 g, intravenous, for 30 Minutes, once, For 1 Doses Classification: Narrow Spectrum Antibiotic</p> <p>When multiple antimicrobial agents are ordered, you may administer these immediately at the SAME TIME via different IV sites. Do not wait for the first antibiotic to infuse. If agents are Y-site compatible, they may be administered per Y-site protocols. IF the ordered agents are NOT Y site compatible, then administer the Broad-spectrum antibiotic first. Refer to available Y site compatibility information and determination of broad-spectrum antibiotic selection chart. Reason for Therapy: Bacterial Infection Suspected Indication: Sepsis</p>
<input type="checkbox"/> OPTIONAL Additional Therapies - dexamethasone (DECADRON) IV	<p>0.15 mg/kg, intravenous, once, For 1 Doses Administer 15-20 minutes before 1st dose of antibiotics.</p>
<input type="checkbox"/> OPTIONAL Additional Therapies - rifAMPin (RIFADIN) capsule	<p>600 mg, oral, once, For 1 Doses Reason for Therapy: Bacterial Infection Suspected Indication: Sepsis</p>
<input type="checkbox"/> cefTRIAxone (ROCEPHIN) 2 g intraMUSCULAR + linezolid (ZYVOX) 600 mg IV - For Patients LESS than 50 years old	
<input type="checkbox"/> cefTRIAxone (ROCEPHIN) IM	<p>2 g, intramuscular, once, For 1 Doses Intramuscular route selected because no IV access available. Administer dose by deep IM into large muscle mass (e.g. gluteal muscles or lateral part of the thigh). Reason for Therapy: Bacterial Infection Suspected IM Route Selection: I have opted to select the IM route because IV access could not be established Indication: Sepsis Recommendation: Sepsis: Recommended duration is dependent upon patient's clinical response and source identification</p>
<input type="checkbox"/> vancomycin (VANCOGIN) IV + Pharmacy Consult to Dose (Selection Required)	
<input type="checkbox"/> vancomycin (VANCOGIN)	<p>15 mg/kg, intravenous, once, For 1 Doses Classification: Narrow Spectrum Antibiotic</p> <p>When multiple antimicrobial agents are ordered, you may administer these immediately at the SAME TIME via different IV sites. Do not wait for the first antibiotic to infuse. If agents are Y-site compatible, they may be administered per Y-site protocols. IF the ordered agents are NOT Y site compatible, then administer the Broad-spectrum antibiotic first. Refer to available Y site compatibility information and determination of broad-spectrum antibiotic selection chart. Reason for Therapy: Bacterial Infection Suspected Indication: Sepsis Recommendation: Sepsis: Recommended duration is dependent upon patient's clinical response and source identification</p>
<input type="checkbox"/> Pharmacy consult to manage vancomycin	<p>STAT, Once For 1 Occurrences Reason for Therapy: Bacterial Infection Suspected Duration of Therapy (Days): 1 Indication: Sepsis Recommendation: Sepsis: Recommended duration is dependent upon patient's clinical response and source identification</p>

[] linezolid in dextrose 5% (ZYVOX) IVPB	600 mg, intravenous, for 60 Minutes, once, For 1 Doses Classification: Narrow Spectrum Antibiotic When multiple antimicrobial agents are ordered, you may administer these immediately at the SAME TIME via different IV sites. Do not wait for the first antibiotic to infuse. If agents are Y-site compatible, they may be administered per Y-site protocols. IF the ordered agents are NOT Y site compatible, then administer the Broad-spectrum antibiotic first. Refer to available Y site compatibility information and determination of broad-spectrum antibiotic selection chart. Reason for Therapy: Bacterial Infection Suspected Indication: Sepsis
[] OPTIONAL Additional Therapies - dexamethasone (DECADRON) IV	0.15 mg/kg, intravenous, once, For 1 Doses Administer 15-20 minutes before 1st dose of antibiotics.
[] OPTIONAL Additional Therapies - riFAMPin (RIFADIN) capsule	600 mg, oral, once, For 1 Doses Reason for Therapy: Bacterial Infection Suspected Indication: Sepsis
() cefTRIAxone (ROCEPHIN) 2 g intraMUSCULAR + linezolid (ZYVOX) 600 mg IV + ampicillin 2 g intraMUSCULAR - For Patients GREATER than 50 years old	
[] cefTRIAxone (ROCEPHIN) IM	2 g, intramuscular, once, For 1 Doses Intramuscular route selected because no IV access available. Administer dose by deep IM into large muscle mass (e.g. gluteal muscles or lateral part of the thigh). Reason for Therapy: Bacterial Infection Suspected Indication: Sepsis Recommendation: Sepsis: Recommended duration is dependent upon patient's clinical response and source identification
[] linezolid in dextrose 5% (ZYVOX) IVPB	600 mg, intravenous, for 60 Minutes, once, For 1 Doses Classification: Narrow Spectrum Antibiotic When multiple antimicrobial agents are ordered, you may administer these immediately at the SAME TIME via different IV sites. Do not wait for the first antibiotic to infuse. If agents are Y-site compatible, they may be administered per Y-site protocols. IF the ordered agents are NOT Y site compatible, then administer the Broad-spectrum antibiotic first. Refer to available Y site compatibility information and determination of broad-spectrum antibiotic selection chart. Reason for Therapy: Bacterial Infection Suspected Indication: Sepsis Recommendation: Sepsis: Recommended duration is dependent upon patient's clinical response and source identification
[] ampicillin IM	2 g, intramuscular, once, For 1 Doses Intramuscular route selected because no IV access available. Administer dose by deep IM into large muscle mass (e.g. gluteal muscles or lateral part of the thigh). Reason for Therapy: Bacterial Infection Suspected Indication: Sepsis
[] OPTIONAL Additional Therapies - dexamethasone (DECADRON) IV	0.15 mg/kg, intravenous, once, For 1 Doses Administer 15-20 minutes before 1st dose of antibiotics.
[] OPTIONAL Additional Therapies - riFAMPin (RIFADIN) capsule	600 mg, oral, once, For 1 Doses Reason for Therapy: Bacterial Infection Suspected Indication: Sepsis
() SEVERE Penicillin and Vancomycin Allergy (Single Response) Dexamethasone is recommended for treatment of proven or suspected pneumococcal meningitis due to S. pneumoniae	
() aztreonam (AZACTAM) 2 g IV + linezolid (ZYVOX) 600 mg IV	

[] aztreonam (AZACTAM) IV	2 g, intravenous, once, For 1 Doses Classification: Broad Spectrum Antibiotic
	<p>When multiple antimicrobial agents are ordered, you may administer these immediately at the SAME TIME via different IV sites. Do not wait for the first antibiotic to infuse. If agents are Y-site compatible, they may be administered per Y-site protocols. IF the ordered agents are NOT Y site compatible, then administer the Broad-spectrum antibiotic first. Refer to available Y site compatibility information and determination of broad-spectrum antibiotic selection chart.</p> <p>Reason for Therapy: Bacterial Infection Suspected Indication: Sepsis</p>
[] linezolid in dextrose 5% (ZYVOX) IVPB	600 mg, intravenous, for 60 Minutes, once, For 1 Doses Classification: Narrow Spectrum Antibiotic
	<p>When multiple antimicrobial agents are ordered, you may administer these immediately at the SAME TIME via different IV sites. Do not wait for the first antibiotic to infuse. If agents are Y-site compatible, they may be administered per Y-site protocols. IF the ordered agents are NOT Y site compatible, then administer the Broad-spectrum antibiotic first. Refer to available Y site compatibility information and determination of broad-spectrum antibiotic selection chart.</p> <p>Reason for Therapy: Bacterial Infection Suspected Indication: Sepsis Recommendation: Sepsis: Recommended duration is dependent upon patient's clinical response and source identification</p>
[] OPTIONAL Additional Therapies - dexamethasone (DECADRON) IV	0.15 mg/kg, intravenous, once, For 1 Doses Administer 15-20 minutes before 1st dose of antibiotics.
() aztreonam (AZACTAM) 2 g intraMUSCULAR + linezolid (ZYVOX) 600 mg IV	
[] aztreonam (AZACTAM) IM	2 g, intramuscular, once, For 1 Doses Classification: Broad Spectrum Antibiotic
	<p>When multiple antimicrobial agents are ordered, you may administer these immediately at the SAME TIME via different IV sites. Do not wait for the first antibiotic to infuse. If agents are Y-site compatible, they may be administered per Y-site protocols. IF the ordered agents are NOT Y site compatible, then administer the Broad-spectrum antibiotic first. Refer to available Y site compatibility information and determination of broad-spectrum antibiotic selection chart.</p> <p>Reason for Therapy: Bacterial Infection Suspected Indication: Sepsis IM Route Selection: I have opted to select the IM route because IV access could not be established</p>
[] linezolid in dextrose 5% (ZYVOX) IVPB	600 mg, intravenous, for 60 Minutes, once, For 1 Doses Classification: Narrow Spectrum Antibiotic
	<p>When multiple antimicrobial agents are ordered, you may administer these immediately at the SAME TIME via different IV sites. Do not wait for the first antibiotic to infuse. If agents are Y-site compatible, they may be administered per Y-site protocols. IF the ordered agents are NOT Y site compatible, then administer the Broad-spectrum antibiotic first. Refer to available Y site compatibility information and determination of broad-spectrum antibiotic selection chart.</p> <p>Reason for Therapy: Bacterial Infection Suspected Indication: Sepsis Recommendation: Sepsis: Recommended duration is dependent upon patient's clinical response and source identification</p>
[] OPTIONAL Additional Therapies - dexamethasone (DECADRON) IV	0.15 mg/kg, intravenous, once, For 1 Doses Administer 15-20 minutes before 1st dose of antibiotics.
[] Bacterial Meningitis - ImmunoCOMPROMISED, Post-Neurosurgery or Penetrating Head Trauma (Single Response)	

Does your patient have a SEVERE Penicillin and/or Vancomycin allergy?

No SEVERE Penicillin or Vancomycin Allergy (Single Response)

Dexamethasone is recommended for treatment of proven or suspected pneumococcal meningitis due to *S. pneumoniae*

ceFEPime 2 g IV or meropenem (MERREM) 2 g IV + vancomycin 15 mg/kg IV - For Patients LESS than 50 years old

ceFEPime 2 g IV or meropenem (MERREM) 2 g IV (Single Response)

ceFEPime (MAXIPIME) IV

2 g, intravenous, once, For 1 Doses
Classification: Broad Spectrum Antibiotic

When multiple antimicrobial agents are ordered, you may administer these immediately at the SAME TIME via different IV sites. Do not wait for the first antibiotic to infuse. If agents are Y-site compatible, they may be administered per Y-site protocols. IF the ordered agents are NOT Y site compatible, then administer the Broad-spectrum antibiotic first. Refer to available Y site compatibility information and determination of broad-spectrum antibiotic selection chart.

Reason for Therapy: Bacterial Infection Suspected

Indication: Sepsis

Recommendation: Sepsis: Recommended duration is dependent upon patient's clinical response and source identification

meropenem (MERREM) IV

2 g, intravenous, once, For 1 Doses
Classification: Broad Spectrum Antibiotic

When multiple antimicrobial agents are ordered, you may administer these immediately at the SAME TIME via different IV sites. Do not wait for the first antibiotic to infuse. If agents are Y-site compatible, they may be administered per Y-site protocols. IF the ordered agents are NOT Y site compatible, then administer the Broad-spectrum antibiotic first. Refer to available Y site compatibility information and determination of broad-spectrum antibiotic selection chart.

Reason for Therapy: Bacterial Infection Suspected

Indication: Sepsis

Recommendation: Sepsis: Recommended duration is dependent upon patient's clinical response and source identification

vancomycin (VANCOCIN) IV + Pharmacy Consult to Dose (Selection Required)

vancomycin (VANCOCIN)

15 mg/kg, intravenous, once, For 1 Doses
Classification: Narrow Spectrum Antibiotic

When multiple antimicrobial agents are ordered, you may administer these immediately at the SAME TIME via different IV sites. Do not wait for the first antibiotic to infuse. If agents are Y-site compatible, they may be administered per Y-site protocols. IF the ordered agents are NOT Y site compatible, then administer the Broad-spectrum antibiotic first. Refer to available Y site compatibility information and determination of broad-spectrum antibiotic selection chart.

Reason for Therapy: Bacterial Infection Suspected

Indication: Sepsis

Recommendation: Sepsis: Recommended duration is dependent upon patient's clinical response and source identification

Pharmacy consult to manage vancomycin

STAT, Once For 1 Occurrences

Reason for Therapy: Bacterial Infection Suspected

Duration of Therapy (Days): 1

Indication: Sepsis

Recommendation: Sepsis: Recommended duration is dependent upon patient's clinical response and source identification

OPTIONAL Additional Therapies - dexamethasone (DECADRON) IV

0.15 mg/kg, intravenous, once, For 1 Doses
Administer 15-20 minutes before 1st dose of antibiotics.

<input type="checkbox"/> ceFEPime 2 g IV or meropenem (MERREM) 2 g IV + vancomycin 15 mg/kg IV + ampicillin 2 g IV - For Patients GREATER than 50 years old	
<input type="checkbox"/> ceFEPime 2 g IV or meropenem (MERREM) 2 g IV (Single Response)	
<input type="checkbox"/> ceFEPime (MAXIPIME) IV	<p>2 g, intravenous, once, For 1 Doses Classification: Broad Spectrum Antibiotic</p> <p>When multiple antimicrobial agents are ordered, you may administer these immediately at the SAME TIME via different IV sites. Do not wait for the first antibiotic to infuse. If agents are Y-site compatible, they may be administered per Y-site protocols. IF the ordered agents are NOT Y site compatible, then administer the Broad-spectrum antibiotic first. Refer to available Y site compatibility information and determination of broad-spectrum antibiotic selection chart. Reason for Therapy: Bacterial Infection Suspected Indication: Sepsis Recommendation: Sepsis: Recommended duration is dependent upon patient's clinical response and source identification</p>
<input type="checkbox"/> meropenem (MERREM) IV	<p>2 g, intravenous, once, For 1 Doses Classification: Broad Spectrum Antibiotic</p> <p>When multiple antimicrobial agents are ordered, you may administer these immediately at the SAME TIME via different IV sites. Do not wait for the first antibiotic to infuse. If agents are Y-site compatible, they may be administered per Y-site protocols. IF the ordered agents are NOT Y site compatible, then administer the Broad-spectrum antibiotic first. Refer to available Y site compatibility information and determination of broad-spectrum antibiotic selection chart. Reason for Therapy: Bacterial Infection Suspected Indication: Sepsis Recommendation: Sepsis: Recommended duration is dependent upon patient's clinical response and source identification</p>
<input type="checkbox"/> vancomycin (VANCOCIN) IV + Pharmacy Consult to Dose (Selection Required)	
<input type="checkbox"/> vancomycin (VANCOCIN)	<p>15 mg/kg, intravenous, once, For 1 Doses Classification: Narrow Spectrum Antibiotic</p> <p>When multiple antimicrobial agents are ordered, you may administer these immediately at the SAME TIME via different IV sites. Do not wait for the first antibiotic to infuse. If agents are Y-site compatible, they may be administered per Y-site protocols. IF the ordered agents are NOT Y site compatible, then administer the Broad-spectrum antibiotic first. Refer to available Y site compatibility information and determination of broad-spectrum antibiotic selection chart. Reason for Therapy: Bacterial Infection Suspected Indication: Sepsis Recommendation: Sepsis: Recommended duration is dependent upon patient's clinical response and source identification</p>
<input type="checkbox"/> Pharmacy consult to manage vancomycin	<p>STAT, Once For 1 Occurrences Reason for Therapy: Bacterial Infection Suspected Duration of Therapy (Days): 1 Indication: Sepsis - Bacterial Meningitis - Community-Acquired and ImmunoSUPPRESSED Indication: Sepsis Recommendation: Sepsis: Recommended duration is dependent upon patient's clinical response and source identification</p>

<input type="checkbox"/> ampicillin IV	<p>2 g, intravenous, for 30 Minutes, every 4 hours Classification: Narrow Spectrum Antibiotic</p> <p>When multiple antimicrobial agents are ordered, you may administer these immediately at the SAME TIME via different IV sites. Do not wait for the first antibiotic to infuse. If agents are Y-site compatible, they may be administered per Y-site protocols. IF the ordered agents are NOT Y site compatible, then administer the Broad-spectrum antibiotic first. Refer to available Y site compatibility information and determination of broad-spectrum antibiotic selection chart. Reason for Therapy: Bacterial Infection Suspected Indication: Sepsis</p>
<input type="checkbox"/> OPTIONAL Additional Therapies - dexamethasone (DECADRON) IV	<p>0.15 mg/kg, intravenous, once, For 1 Doses Administer 15-20 minutes before 1st dose of antibiotics.</p>
<input type="checkbox"/> OPTIONAL Additional Therapies - riFAMpin (RIFADIN) capsule	<p>600 mg, oral, daily Reason for Therapy: Bacterial Infection Suspected Indication: Sepsis</p>
<input type="checkbox"/> ceFEPime 2 g intraMUSCULAR or meropenem (MERREM) 2 g IV + vancomycin 15 mg/kg IV - For Patients LESS than 50 years old	
<input type="checkbox"/> ceFEPime 2 g intraMUSCULAR + meropenem (MERREM) 2 g IV (Single Response)	
<input type="checkbox"/> cefepime (MAXIPIME) intraMUSCULAR	<p>2 g, intramuscular, every 8 hours Intramuscular route selected because no IV access available. Administer dose by deep IM into large muscle mass (e.g. gluteal muscles or lateral part of the thigh). Reason for Therapy: Bacterial Infection Suspected IM Route Selection: I have opted to select the IM route because IV access could not be established Indication: Sepsis Recommendation: Sepsis: Recommended duration is dependent upon patient's clinical response and source identification</p>
<input type="checkbox"/> meropenem (MERREM) IV	<p>2 g, intravenous, every 8 hours Classification: Broad Spectrum Antibiotic</p> <p>When multiple antimicrobial agents are ordered, you may administer these immediately at the SAME TIME via different IV sites. Do not wait for the first antibiotic to infuse. If agents are Y-site compatible, they may be administered per Y-site protocols. IF the ordered agents are NOT Y site compatible, then administer the Broad-spectrum antibiotic first. Refer to available Y site compatibility information and determination of broad-spectrum antibiotic selection chart. Reason for Therapy: Bacterial Infection Suspected Indication: Sepsis Recommendation: Sepsis: Recommended duration is dependent upon patient's clinical response and source identification</p>
<input type="checkbox"/> vancomycin (VANCOCIN) IV + Pharmacy Consult to Dose (Selection Required)	
<input type="checkbox"/> vancomycin (VANCOCIN)	<p>15 mg/kg, intravenous, every 12 hours Classification: Narrow Spectrum Antibiotic</p> <p>When multiple antimicrobial agents are ordered, you may administer these immediately at the SAME TIME via different IV sites. Do not wait for the first antibiotic to infuse. If agents are Y-site compatible, they may be administered per Y-site protocols. IF the ordered agents are NOT Y site compatible, then administer the Broad-spectrum antibiotic first. Refer to available Y site compatibility information and determination of broad-spectrum antibiotic selection chart. Reason for Therapy: Bacterial Infection Suspected Indication: Sepsis Recommendation: Sepsis: Recommended duration is dependent upon patient's clinical response and source identification</p>

[] Pharmacy consult to manage vancomycin	STAT, Until discontinued, Starting S Reason for Therapy: Bacterial Infection Suspected Duration of Therapy (Days): Indication: Sepsis Recommendation: Sepsis: Recommended duration is dependent upon patient's clinical response and source identification
[] OPTIONAL Additional Therapies - dexamethasone (DECADRON) IV	0.15 mg/kg, intravenous, once, For 1 Doses Administer 15-20 minutes before 1st dose of antibiotics.
[] OPTIONAL Additional Therapies - riFAMPin (RIFADIN) capsule	600 mg, oral, once, For 1 Doses Reason for Therapy: Bacterial Infection Suspected Indication: Sepsis
() ceFEPime 2 g intraMUSCULAR or meropenem (MERREM) 2 g IV + ampicillin 2 g intraMUSCULAR - For Patients GREATER than 50 years old	
[] ceFEPime 2 g intraMUSCULAR + meropenem (MERREM) 2 g IV (Single Response)	
() cefepime (MAXIPIME) intraMUSCULAR	2 g, intramuscular, once, For 1 Doses Intramuscular route selected because no IV access available. Administer dose by deep IM into large muscle mass (e.g. gluteal muscles or lateral part of the thigh). Reason for Therapy: Bacterial Infection Suspected IM Route Selection: I have opted to select the IM route because IV access could not be established Indication: Sepsis Recommendation: Sepsis: Recommended duration is dependent upon patient's clinical response and source identification
() meropenem (MERREM) IV	2 g, intravenous, once, For 1 Doses Classification: Broad Spectrum Antibiotic
	When multiple antimicrobial agents are ordered, you may administer these immediately at the SAME TIME via different IV sites. Do not wait for the first antibiotic to infuse. If agents are Y-site compatible, they may be administered per Y-site protocols. IF the ordered agents are NOT Y site compatible, then administer the Broad-spectrum antibiotic first. Refer to available Y site compatibility information and determination of broad-spectrum antibiotic selection chart. Reason for Therapy: Bacterial Infection Suspected Indication: Sepsis Recommendation: Sepsis: Recommended duration is dependent upon patient's clinical response and source identification
[] vancomycin (VANCOCIN) IV + Pharmacy Consult to Dose (Selection Required)	
[] vancomycin (VANCOCIN)	15 mg/kg, intravenous, once, For 1 Doses Classification: Narrow Spectrum Antibiotic
	When multiple antimicrobial agents are ordered, you may administer these immediately at the SAME TIME via different IV sites. Do not wait for the first antibiotic to infuse. If agents are Y-site compatible, they may be administered per Y-site protocols. IF the ordered agents are NOT Y site compatible, then administer the Broad-spectrum antibiotic first. Refer to available Y site compatibility information and determination of broad-spectrum antibiotic selection chart. Reason for Therapy: Bacterial Infection Documented Indication: Sepsis Recommendation: Sepsis: Recommended duration is dependent upon patient's clinical response and source identification
[] Pharmacy consult to manage vancomycin	STAT, Once For 1 Occurrences Reason for Therapy: Bacterial Infection Suspected Duration of Therapy (Days): 1 Indication: Sepsis Recommendation: Sepsis: Recommended duration is dependent upon patient's clinical response and source identification

<input type="checkbox"/> ampicillin IM	2 g, intramuscular, once, For 1 Doses Intramuscular route selected because no IV access available. Administer dose by deep IM into large muscle mass (e.g. gluteal muscles or lateral part of the thigh). Reason for Therapy: Bacterial Infection Suspected Indication: Sepsis
<input type="checkbox"/> OPTIONAL Additional Therapies - dexamethasone (DECADRON) IV	0.15 mg/kg, intravenous, once, For 1 Doses Administer 15-20 minutes before 1st dose of antibiotics.
<input type="checkbox"/> SEVERE Penicillin Allergy (Single Response) Dexamethasone is recommended for treatment of proven or suspected pneumococcal meningitis due to <i>S. pneumoniae</i>	
<input type="checkbox"/> aztreonam (AZACTAM) 2 g IV + vancomycin 15 mg/kg IV	
<input type="checkbox"/> aztreonam (AZACTAM) IV	2 g, intravenous, once, For 1 Doses Classification: Broad Spectrum Antibiotic When multiple antimicrobial agents are ordered, you may administer these immediately at the SAME TIME via different IV sites. Do not wait for the first antibiotic to infuse. If agents are Y-site compatible, they may be administered per Y-site protocols. IF the ordered agents are NOT Y site compatible, then administer the Broad-spectrum antibiotic first. Refer to available Y site compatibility information and determination of broad-spectrum antibiotic selection chart. Reason for Therapy: Bacterial Infection Suspected Indication: Sepsis
<input type="checkbox"/> vancomycin (VANCOGIN) IV + Pharmacy Consult to Dose (Selection Required)	
<input type="checkbox"/> vancomycin (VANCOGIN)	15 mg/kg, intravenous, once, For 1 Doses Classification: Narrow Spectrum Antibiotic When multiple antimicrobial agents are ordered, you may administer these immediately at the SAME TIME via different IV sites. Do not wait for the first antibiotic to infuse. If agents are Y-site compatible, they may be administered per Y-site protocols. IF the ordered agents are NOT Y site compatible, then administer the Broad-spectrum antibiotic first. Refer to available Y site compatibility information and determination of broad-spectrum antibiotic selection chart. Reason for Therapy: Bacterial Infection Suspected Indication: Sepsis Recommendation: Sepsis: Recommended duration is dependent upon patient's clinical response and source identification
<input type="checkbox"/> Pharmacy consult to manage vancomycin	STAT, Once For 1 Occurrences Reason for Therapy: Bacterial Infection Suspected Duration of Therapy (Days): 1 Indication: Sepsis Recommendation: Sepsis: Recommended duration is dependent upon patient's clinical response and source identification
<input type="checkbox"/> OPTIONAL Additional Therapies - dexamethasone (DECADRON) IV	0.15 mg/kg, intravenous, once, For 1 Doses Administer 15-20 minutes before 1st dose of antibiotics.
<input type="checkbox"/> aztreonam (AZACTAM) 2 g intraMUSCULAR + vancomycin 15 mg/kg IV	

[] aztreonam (AZACTAM) intraMUSCULAR	2 g, intramuscular, once, For 1 Doses Classification: Broad Spectrum Antibiotic
	<p>When multiple antimicrobial agents are ordered, you may administer these immediately at the SAME TIME via different IV sites. Do not wait for the first antibiotic to infuse. If agents are Y-site compatible, they may be administered per Y-site protocols. IF the ordered agents are NOT Y site compatible, then administer the Broad-spectrum antibiotic first. Refer to available Y site compatibility information and determination of broad-spectrum antibiotic selection chart.</p> <p>Reason for Therapy: Bacterial Infection Suspected Indication: Sepsis IM Route Selection: I have opted to select the IM route because IV access could not be established</p>
[] vancomycin (VANCOCIN) IV + Pharmacy Consult to Dose (Selection Required)	
[] vancomycin (VANCOCIN)	15 mg/kg, intravenous, once, For 1 Doses Classification: Narrow Spectrum Antibiotic
	<p>When multiple antimicrobial agents are ordered, you may administer these immediately at the SAME TIME via different IV sites. Do not wait for the first antibiotic to infuse. If agents are Y-site compatible, they may be administered per Y-site protocols. IF the ordered agents are NOT Y site compatible, then administer the Broad-spectrum antibiotic first. Refer to available Y site compatibility information and determination of broad-spectrum antibiotic selection chart.</p> <p>Reason for Therapy: Bacterial Infection Suspected Indication: Sepsis Recommendation: Sepsis: Recommended duration is dependent upon patient's clinical response and source identification</p>
[] Pharmacy consult to manage vancomycin	<p>STAT, Once For 1 Occurrences Reason for Therapy: Bacterial Infection Suspected Duration of Therapy (Days): 1 Indication: Sepsis Recommendation: Sepsis: Recommended duration is dependent upon patient's clinical response and source identification</p>
[] OPTIONAL Additional Therapies - dexamethasone (DECADRON) IV	0.15 mg/kg, intravenous, once, For 1 Doses Administer 15-20 minutes before 1st dose of antibiotics.
() SEVERE Vancomycin Allergy (Single Response)	
() ceFEPime 2 g IV or meropenem (MERREM) 2 g IV + linezolid (ZYVOX) 600 mg IV - For Patients LESS than 50 years old	
[] ceFEPime 2 g IV or meropenem (MERREM) 2 g IV (Single Response)	
() ceFEPime (MAXIPIME) IV	2 g, intravenous, once, For 1 Doses Classification: Broad Spectrum Antibiotic
	<p>When multiple antimicrobial agents are ordered, you may administer these immediately at the SAME TIME via different IV sites. Do not wait for the first antibiotic to infuse. If agents are Y-site compatible, they may be administered per Y-site protocols. IF the ordered agents are NOT Y site compatible, then administer the Broad-spectrum antibiotic first. Refer to available Y site compatibility information and determination of broad-spectrum antibiotic selection chart.</p> <p>Reason for Therapy: Bacterial Infection Suspected Indication: Sepsis Recommendation: Sepsis: Recommended duration is dependent upon patient's clinical response and source identification</p>

<input type="checkbox"/> meropenem (MERREM) IV	<p>2 g, intravenous, once, For 1 Doses Classification: Broad Spectrum Antibiotic</p> <p>When multiple antimicrobial agents are ordered, you may administer these immediately at the SAME TIME via different IV sites. Do not wait for the first antibiotic to infuse. If agents are Y-site compatible, they may be administered per Y-site protocols. IF the ordered agents are NOT Y site compatible, then administer the Broad-spectrum antibiotic first. Refer to available Y site compatibility information and determination of broad-spectrum antibiotic selection chart. Reason for Therapy: Bacterial Infection Suspected Indication: Sepsis Recommendation: Sepsis: Recommended duration is dependent upon patient's clinical response and source identification</p>
<input type="checkbox"/> linezolid in dextrose 5% (ZYVOX) IVPB	<p>600 mg, intravenous, for 60 Minutes, once, For 1 Doses Classification: Narrow Spectrum Antibiotic</p> <p>When multiple antimicrobial agents are ordered, you may administer these immediately at the SAME TIME via different IV sites. Do not wait for the first antibiotic to infuse. If agents are Y-site compatible, they may be administered per Y-site protocols. IF the ordered agents are NOT Y site compatible, then administer the Broad-spectrum antibiotic first. Refer to available Y site compatibility information and determination of broad-spectrum antibiotic selection chart. Reason for Therapy: Bacterial Infection Suspected Indication: Sepsis Recommendation: Sepsis: Recommended duration is dependent upon patient's clinical response and source identification</p>
<input type="checkbox"/> ceFEPime 2 g IV or meropenem (MERREM) 2 g IV + linezolid (ZYVOX) 600 mg IV + ampicillin 2 g IV - For Patients GREATER than 50 years old	
<input type="checkbox"/> ceFEPime 2 g IV or meropenem (MERREM) 2 g IV (Single Response)	
<input type="checkbox"/> ceFEPime (MAXIPIME) IV	<p>2 g, intravenous, once, For 1 Doses Classification: Broad Spectrum Antibiotic</p> <p>When multiple antimicrobial agents are ordered, you may administer these immediately at the SAME TIME via different IV sites. Do not wait for the first antibiotic to infuse. If agents are Y-site compatible, they may be administered per Y-site protocols. IF the ordered agents are NOT Y site compatible, then administer the Broad-spectrum antibiotic first. Refer to available Y site compatibility information and determination of broad-spectrum antibiotic selection chart. Reason for Therapy: Bacterial Infection Suspected Indication: Sepsis Recommendation: Sepsis: Recommended duration is dependent upon patient's clinical response and source identification</p>
<input type="checkbox"/> meropenem (MERREM) IV	<p>2 g, intravenous, once, For 1 Doses Classification: Broad Spectrum Antibiotic</p> <p>When multiple antimicrobial agents are ordered, you may administer these immediately at the SAME TIME via different IV sites. Do not wait for the first antibiotic to infuse. If agents are Y-site compatible, they may be administered per Y-site protocols. IF the ordered agents are NOT Y site compatible, then administer the Broad-spectrum antibiotic first. Refer to available Y site compatibility information and determination of broad-spectrum antibiotic selection chart. Reason for Therapy: Bacterial Infection Suspected Indication: Sepsis Recommendation: Sepsis: Recommended duration is dependent upon patient's clinical response and source identification</p>

[] linezolid in dextrose 5% (ZYVOX) IVPB	<p>600 mg, intravenous, for 60 Minutes, once, For 1 Doses Classification: Narrow Spectrum Antibiotic</p> <p>When multiple antimicrobial agents are ordered, you may administer these immediately at the SAME TIME via different IV sites. Do not wait for the first antibiotic to infuse. If agents are Y-site compatible, they may be administered per Y-site protocols. IF the ordered agents are NOT Y site compatible, then administer the Broad-spectrum antibiotic first. Refer to available Y site compatibility information and determination of broad-spectrum antibiotic selection chart.</p> <p>Reason for Therapy: Bacterial Infection Suspected Indication: Sepsis Recommendation: Sepsis: Recommended duration is dependent upon patient's clinical response and source identification</p>
[] ampicillin IV	<p>2 g, intravenous, for 30 Minutes, once, For 1 Doses Classification: Narrow Spectrum Antibiotic</p> <p>When multiple antimicrobial agents are ordered, you may administer these immediately at the SAME TIME via different IV sites. Do not wait for the first antibiotic to infuse. If agents are Y-site compatible, they may be administered per Y-site protocols. IF the ordered agents are NOT Y site compatible, then administer the Broad-spectrum antibiotic first. Refer to available Y site compatibility information and determination of broad-spectrum antibiotic selection chart.</p> <p>Reason for Therapy: Bacterial Infection Suspected Indication: Sepsis</p>
() ceFEPime 2 g intraMUSCULAR or meropenem (MERREM) 2 g IV + linezolid (ZYVOX) 600 mg IV - For Patients LESS than 50 years old	
[] ceFEPime 2 g intraMUSCULAR + meropenem (MERREM) 2 g IV (Single Response)	
() cefepime (MAXIPIME) intraMUSCULAR	<p>2 g, intramuscular, once, For 1 Doses Intramuscular route selected because no IV access available. Administer dose by deep IM into large muscle mass (e.g. gluteal muscles or lateral part of the thigh).</p> <p>Reason for Therapy: Bacterial Infection Suspected IM Route Selection: I have opted to select the IM route because IV access could not be established Indication: Sepsis Recommendation: Sepsis: Recommended duration is dependent upon patient's clinical response and source identification</p>
() meropenem (MERREM) IV	<p>2 g, intravenous, once, For 1 Doses Classification: Broad Spectrum Antibiotic</p> <p>When multiple antimicrobial agents are ordered, you may administer these immediately at the SAME TIME via different IV sites. Do not wait for the first antibiotic to infuse. If agents are Y-site compatible, they may be administered per Y-site protocols. IF the ordered agents are NOT Y site compatible, then administer the Broad-spectrum antibiotic first. Refer to available Y site compatibility information and determination of broad-spectrum antibiotic selection chart.</p> <p>Reason for Therapy: Bacterial Infection Suspected Indication: Sepsis Recommendation: Sepsis: Recommended duration is dependent upon patient's clinical response and source identification</p>

[] linezolid in dextrose 5% (ZYVOX) IVPB	<p>600 mg, intravenous, for 60 Minutes, once, For 1 Doses Classification: Narrow Spectrum Antibiotic</p> <p>When multiple antimicrobial agents are ordered, you may administer these immediately at the SAME TIME via different IV sites. Do not wait for the first antibiotic to infuse. If agents are Y-site compatible, they may be administered per Y-site protocols. IF the ordered agents are NOT Y site compatible, then administer the Broad-spectrum antibiotic first. Refer to available Y site compatibility information and determination of broad-spectrum antibiotic selection chart. Reason for Therapy: Bacterial Infection Suspected Indication: Sepsis Recommendation: Sepsis: Recommended duration is dependent upon patient's clinical response and source identification</p>
<p>() ceFEPime 2 g intraMUSCULAR or meropenem (MERREM) IV + linezolid (ZYVOX) 600 mg IV + ampicillin 2 g intraMUSCULAR - For Patients GREATER than 50 years old</p>	
[] ceFEPime 2 g intraMUSCULAR + meropenem (MERREM) 2 g IV (Single Response)	
<p>() cefepime (MAXIPIME) intraMUSCULAR</p>	<p>2 g, intramuscular, once, For 1 Doses Intramuscular route selected because no IV access available. Administer dose by deep IM into large muscle mass (e.g. gluteal muscles or lateral part of the thigh). Reason for Therapy: Bacterial Infection Suspected IM Route Selection: I have opted to select the IM route because IV access could not be established Indication: Sepsis Recommendation: Sepsis: Recommended duration is dependent upon patient's clinical response and source identification</p>
<p>() meropenem (MERREM) IV</p>	<p>2 g, intravenous, once, For 1 Doses Classification: Broad Spectrum Antibiotic</p> <p>When multiple antimicrobial agents are ordered, you may administer these immediately at the SAME TIME via different IV sites. Do not wait for the first antibiotic to infuse. If agents are Y-site compatible, they may be administered per Y-site protocols. IF the ordered agents are NOT Y site compatible, then administer the Broad-spectrum antibiotic first. Refer to available Y site compatibility information and determination of broad-spectrum antibiotic selection chart. Reason for Therapy: Bacterial Infection Suspected Indication: Sepsis Recommendation: Sepsis: Recommended duration is dependent upon patient's clinical response and source identification</p>
[] linezolid in dextrose 5% (ZYVOX) IVPB	<p>600 mg, intravenous, for 60 Minutes, once, For 1 Doses Classification: Narrow Spectrum Antibiotic</p> <p>When multiple antimicrobial agents are ordered, you may administer these immediately at the SAME TIME via different IV sites. Do not wait for the first antibiotic to infuse. If agents are Y-site compatible, they may be administered per Y-site protocols. IF the ordered agents are NOT Y site compatible, then administer the Broad-spectrum antibiotic first. Refer to available Y site compatibility information and determination of broad-spectrum antibiotic selection chart. Reason for Therapy: Bacterial Infection Suspected Indication: Sepsis Recommendation: Sepsis: Recommended duration is dependent upon patient's clinical response and source identification</p>

[] ampicillin IV	2 g, intravenous, for 30 Minutes, once, For 1 Doses Classification: Narrow Spectrum Antibiotic
	When multiple antimicrobial agents are ordered, you may administer these immediately at the SAME TIME via different IV sites. Do not wait for the first antibiotic to infuse. If agents are Y-site compatible, they may be administered per Y-site protocols. IF the ordered agents are NOT Y site compatible, then administer the Broad-spectrum antibiotic first. Refer to available Y site compatibility information and determination of broad-spectrum antibiotic selection chart. Reason for Therapy: Bacterial Infection Suspected Indication: Sepsis
() SEVERE Penicillin and Vancomycin Allergy (Single Response)	
	Dexamethasone is recommended for treatment of proven or suspected pneumococcal meningitis due to S. pneumoniae
() aztreonam (AZACTAM) 2 g IV + linezolid (ZYVOX) 600 mg IV	
[] aztreonam (AZACTAM) IV	2 g, intravenous, once, For 1 Doses Classification: Broad Spectrum Antibiotic
	When multiple antimicrobial agents are ordered, you may administer these immediately at the SAME TIME via different IV sites. Do not wait for the first antibiotic to infuse. If agents are Y-site compatible, they may be administered per Y-site protocols. IF the ordered agents are NOT Y site compatible, then administer the Broad-spectrum antibiotic first. Refer to available Y site compatibility information and determination of broad-spectrum antibiotic selection chart. Reason for Therapy: Bacterial Infection Suspected Indication: Sepsis
[] linezolid in dextrose 5% (ZYVOX) IVPB	600 mg, intravenous, for 60 Minutes, once, For 1 Doses Classification: Narrow Spectrum Antibiotic
	When multiple antimicrobial agents are ordered, you may administer these immediately at the SAME TIME via different IV sites. Do not wait for the first antibiotic to infuse. If agents are Y-site compatible, they may be administered per Y-site protocols. IF the ordered agents are NOT Y site compatible, then administer the Broad-spectrum antibiotic first. Refer to available Y site compatibility information and determination of broad-spectrum antibiotic selection chart. Reason for Therapy: Bacterial Infection Suspected Indication: Sepsis Recommendation: Sepsis: Recommended duration is dependent upon patient's clinical response and source identification
() aztreonam (AZACTAM) 2 g intraMUSCULAR + linezolid (ZYVOX) 600 mg IV	
[] aztreonam (AZACTAM) IM	2 g, intramuscular, once, For 1 Doses Intramuscular route selected because no IV access available. Administer dose by deep IM into large muscle mass (e.g. gluteal muscles or lateral part of the thigh). Reason for Therapy: Bacterial Infection Suspected Indication: Sepsis IM Route Selection: I have opted to select the IM route because IV access could not be established

linezolid in dextrose 5% (ZYVOX) IVPB

600 mg, intravenous, for 60 Minutes, once, For 1 Doses
Classification: Narrow Spectrum Antibiotic

When multiple antimicrobial agents are ordered, you may administer these immediately at the SAME TIME via different IV sites. Do not wait for the first antibiotic to infuse. If agents are Y-site compatible, they may be administered per Y-site protocols. IF the ordered agents are NOT Y site compatible, then administer the Broad-spectrum antibiotic first. Refer to available Y site compatibility information and determination of broad-spectrum antibiotic selection chart.

Reason for Therapy: Bacterial Infection Suspected

Indication: Sepsis

Recommendation: Sepsis: Recommended duration is dependent upon patient's clinical response and source identification

Additional Management of Sepsis

Colloid / Albumin (for patients not responding to initial fluid resuscitation with crystalloids)

albumin human 5 % infusion

25 g, intravenous, once, For 1 Doses

Administer 500 mL intravenous once for patients not responding to initial fluid resuscitation with crystalloids.

Indication:

Vasopressor Therapy (if unresponsive to initial fluid bolus) (Single Response)

** if unresponsive to initial fluid bolus **

norEPInephrine (LEVOPHED) IV infusion

4-30 mcg/min, intravenous, titrated

Initiate norepinephrine infusion at 4 mcg/min. Titrate to keep MAP between 65 mmHg to 70 mmHg }.

Titrate by 2 mcg/minute every 5 minutes. Call MD if mean arterial pressure is LESS than 65 mmHg and rate is 30 mcg/min.

EPINEPHrine (ADRENALIN) IV infusion

2-30 mcg/min, intravenous, titrated

Titrate by 2 micrograms per minute every 5 minutes for mean arterial pressure 65-70 mmHg. Call MD if mean arterial pressure is LESS than 65 mmHg and rate is 30 mcg/min.

Inotropic Therapy

DOButamine (DOBUTREX) infusion

0.5-20 mcg/kg/min, intravenous, titrated

Titrate by 2 mcg/kg/min every 10 minutes for mean arterial pressure 65-70 mmHg. Call MD if mean arterial pressure is LESS than 65 mmHg and rate is 10 mcg/kg/min.

Steroids

Per 2012 guidelines, steroid therapy is only recommended in the case of hypotension which is refractory to both fluids and vasopressor therapy. Stress dose steroids should also be considered for patients with a history of recent and/or chronic steroid use

hydrocortisone sodium succinate (Solu-CORTEF) injection

50 mg, intravenous, every 6 hours

For patients with shock refractory to fluids and vasopressors.

Labs

Laboratory - STAT

Arterial blood gas

STAT For 1 Occurrences

Venous blood gas

STAT For 1 Occurrences

Comprehensive metabolic panel

STAT For 1 Occurrences

Prothrombin time with INR

STAT For 1 Occurrences

Partial thromboplastin time

STAT For 1 Occurrences

Basic metabolic panel

STAT For 1 Occurrences

CBC with differential

STAT For 1 Occurrences

<input type="checkbox"/>	B natriuretic peptide	STAT For 1 Occurrences
<input type="checkbox"/>	Troponin T	STAT For 1 Occurrences
<input type="checkbox"/>	Fibrinogen	STAT For 1 Occurrences
<input type="checkbox"/>	Hepatic function panel	STAT For 1 Occurrences
<input type="checkbox"/>	Ionized calcium	STAT For 1 Occurrences
<input type="checkbox"/>	Lactic acid level	STAT For 1 Occurrences
<input type="checkbox"/>	Magnesium	STAT For 1 Occurrences
<input type="checkbox"/>	Phosphorus	STAT For 1 Occurrences
<input type="checkbox"/>	Type and screen	STAT For 1 Occurrences

Laboratory - STAT

<input type="checkbox"/>	Arterial blood gas	STAT For 1 Occurrences
<input type="checkbox"/>	Venous blood gas	STAT For 1 Occurrences
<input type="checkbox"/>	Comprehensive metabolic panel	STAT For 1 Occurrences
<input type="checkbox"/>	Prothrombin time with INR, I-Stat	STAT For 1 Occurrences
<input type="checkbox"/>	Partial thromboplastin time	STAT For 1 Occurrences
<input type="checkbox"/>	Basic metabolic panel	STAT For 1 Occurrences
<input type="checkbox"/>	CBC with differential	STAT For 1 Occurrences
<input type="checkbox"/>	Fibrinogen	STAT For 1 Occurrences
<input type="checkbox"/>	B natriuretic peptide	STAT For 1 Occurrences
<input type="checkbox"/>	Troponin T	STAT For 1 Occurrences
<input type="checkbox"/>	Hepatic function panel	STAT For 1 Occurrences
<input type="checkbox"/>	Ionized calcium	STAT For 1 Occurrences
<input type="checkbox"/>	Lactic acid level	STAT For 1 Occurrences
<input type="checkbox"/>	Magnesium	STAT For 1 Occurrences
<input type="checkbox"/>	Phosphorus	STAT For 1 Occurrences
<input type="checkbox"/>	Type and screen	STAT For 1 Occurrences

Laboratory - STAT

<input type="checkbox"/>	Arterial blood gas	STAT For 1 Occurrences
<input type="checkbox"/>	Venous blood gas	STAT For 1 Occurrences
<input type="checkbox"/>	Comprehensive metabolic panel	STAT For 1 Occurrences
<input type="checkbox"/>	Prothrombin time with INR, I-Stat	STAT For 1 Occurrences
<input type="checkbox"/>	Partial thromboplastin time	STAT For 1 Occurrences
<input type="checkbox"/>	Basic metabolic panel	STAT For 1 Occurrences
<input type="checkbox"/>	CBC with differential	STAT For 1 Occurrences
<input type="checkbox"/>	Fibrinogen	STAT For 1 Occurrences
<input type="checkbox"/>	B natriuretic peptide	STAT For 1 Occurrences
<input type="checkbox"/>	Troponin T	STAT For 1 Occurrences
<input type="checkbox"/>	Hepatic function panel	STAT For 1 Occurrences
<input type="checkbox"/>	Ionized calcium	STAT For 1 Occurrences
<input type="checkbox"/>	Lactic acid, I-Stat	STAT For 1 Occurrences
<input type="checkbox"/>	Magnesium	STAT For 1 Occurrences
<input type="checkbox"/>	Phosphorus	STAT For 1 Occurrences
<input type="checkbox"/>	Type and screen	STAT For 1 Occurrences

Laboratory - Repeat

<input type="checkbox"/>	Basic metabolic panel	Every 6 hours, Starting S For 2 Occurrences
<input type="checkbox"/>	Blood gas, venous	Every 6 hours, Starting S For 2 Occurrences
<input type="checkbox"/>	CBC with differential	Every 6 hours, Starting S For 2 Occurrences

Laboratory - Additional Microbiology Screens

<input type="checkbox"/>	Aerobic culture	Once For 1 Occurrences
<input type="checkbox"/>	Anaerobic culture	Once For 1 Occurrences
<input type="checkbox"/>	Respiratory culture, quantitative	Once For 1 Occurrences, Mini bronchial alveolar lavage
<input type="checkbox"/>	Respiratory pathogen panel with COVID-19 RT-PCR	Once For 1 Occurrences
<input type="checkbox"/>	Sputum culture	Once For 1 Occurrences, Sputum

<input type="checkbox"/> Urinalysis screen and microscopy, with reflex to culture	Once For 1 Occurrences Specimen Source: Urine Specimen Site:
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Laboratory - Additional Microbiology Screens

<input type="checkbox"/> Aerobic culture	Once
<input type="checkbox"/> Anaerobic culture	Once
<input type="checkbox"/> Gastrointestinal pathogens panel, PCR	Once, Stool
<input type="checkbox"/> Respiratory culture, quantitative	Once, Mini bronchial alveolar lavage
<input type="checkbox"/> Respiratory pathogen panel with COVID-19 RT-PCR	Once
<input type="checkbox"/> Sputum culture	Once, Sputum
<input type="checkbox"/> Urine Culture and Urinalysis	"And" Linked Panel
<input type="checkbox"/> Urine culture	Once For 1 Occurrences, Urine
<input type="checkbox"/> Urinalysis	STAT For 1 Occurrences

Laboratory - Additional Microbiology Screens

<input type="checkbox"/> Aerobic culture	Once For 1 Occurrences
<input type="checkbox"/> Anaerobic culture	Once For 1 Occurrences
<input type="checkbox"/> Gastrointestinal pathogens panel, PCR	Once For 1 Occurrences, Stool
<input type="checkbox"/> Respiratory culture, quantitative	Once For 1 Occurrences, Mini bronchial alveolar lavage
<input type="checkbox"/> Respiratory pathogen panel with COVID-19 RT-PCR	Once For 1 Occurrences
<input type="checkbox"/> Sputum culture	Once For 1 Occurrences, Sputum
<input type="checkbox"/> Urinalysis	Once For 1 Occurrences
<input type="checkbox"/> Urine culture	Once For 1 Occurrences, Urine

Imaging

Chest X -Ray

<input type="checkbox"/> Chest 1 Vw Portable	STAT, 1 time imaging, Starting S at 1:00 AM For 1
<input type="checkbox"/> Chest 2 Vw	STAT, 1 time imaging, Starting S at 1:00 AM For 1

Consults

Antibiotics Pharmacy Consult

<input type="checkbox"/> Pharmacy consult to manage dose adjustments for renal function	Routine, Until discontinued, Starting S Adjust dose for: Pharmacy consult to review orders for renal dosing prior to administration of second dose of antibiotics
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Consults

<input type="checkbox"/> Consult Infectious Diseases	Reason for Consult? Consult with Infectious Disease to review and/or adjust current antibiotic selection if necessary. Initial treatment should already be initiated. Patient/Clinical information communicated? Patient/clinical information communicated? Ordering provider must contact ID Consultant
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