## IV / Central Line Access - Hemodynamics Monitoring

## **IV / Central Line Access**

[] Initiate and maintain IV	
[] Ensure / Initiate and maintain IV access	Routine, Once As needed immediately insert 2 large bore (at least 20 gauge) periphera IV lines or call attending MD for STAT central line, intraosseus (IO) or other access.
[] sodium chloride 0.9 % flush	10 mL, intravenous, every 12 hours scheduled
[] sodium chloride 0.9 % flush	10 mL, intravenous, PRN, line care
Hemodynamic Monitoring **If patient has IJ or Subclavian Central Venous [] Hemodynamic Monitoring - CVP	Line** Routine, Every hour For 999 Occurrences Measure: CVP
Nursing	
Nursing - HMH, HMSL and HMB	
[X] 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.
[X] Pulse oximetry	Routine, Daily Current FIO2 or Room Air: Place Sp02 monitor (near infrared spectroscopy)
[X] Daily weights	Routine, Daily Notify provider if weight is over 5 pounds from initial dry weight
[X] Activity: Bed rest initially then progress as tole	erated Routine, Until discontinued, Starting S Specify: Other activity (specify) Other: Bed rest initially then progress activity as tolerated
[X] Patient education	Routine, Prior to discharge Patient/Family: Education for: Other (specify) Specify: Sepsis Education
Nursing - HMWB and HMTW	
[X] 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.
[X] 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. Currer FIO2 or Room Air: Place SpO2 monitor (near infrared spectroscopy).
[X] Daily weights	Routine, Daily Notify provider if weight is over 5 pounds from initial dry weight
[X] Activity: Bed rest initally then progress as tolera	ated Routine, Until discontinued, Starting S Specify: Other activity (specify) Other: Bed rest initially then progress activity as tolerated

[X] Patient education	Routine, Prior to discharge Patient/Family:
	Education for: Other (specify) Specify: Sepis Education
Nursing - HMW and HMSTC	
[X] 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.
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[X] Patient education	Routine, Prior to discharge Patient/Family: Both Education for: Other (specify) Specify: Sepsis Education
[] Insert and maintain Foley	
Indica	ine, Once ation: b: Temperature Sensing
	ometer needed:
	ine, Until discontinued, Starting S ers: Maintain
Nursing - HMCL	
[X] 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
[X] Pulse oximetry	re-evaluate frequency of vitals assessment. Routine, Daily Current FIO2 or Room Air: Place Sp02 monitor (near infrared spectroscopy)
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	Other: Bed rest initially then progress activty as tolerated
[X] Patient education	Routine, Prior to discharge Patient/Family: Education for: Other (specify) Specify: Sepsis Education
[X] Patient education [X] Telemetry	Routine, Prior to discharge Patient/Family: Education for: Other (specify)

[X] 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
] Insert and maintain Foley	
[] Insert Foley catheter	Routine, Once
	Indication:
	Type: Temperature Sensing
	Size:
	Urinometer needed:
[] Foley Catheter Care	Routine, Until discontinued, Starting S
	Orders: Maintain
lotify	
] 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)
nitial Management of Suspected Se	epsis
Blood Cultures	
] Blood culture x 2	"And" Linked Panel
[] Blood Culture (Aerobic & Anaerobic)	Once, Blood
,	Collect STAT before antibiotics given. Blood cultures should be ordere
	x2, with each set drawn from a different peripheral site. If unable to dr

	both set	each set drawn from a different peripheral site. If unable to draw ts from a peripheral site, one set may be drawn from a central line; he should NEVER be used.
[] Blood Culture (Aerobic & Anaerobic)	x2, with both set	Blood STAT before antibiotics given. Blood cultures should be ordered each set drawn from a different peripheral site. If unable to draw ts from a peripheral site, one set may be drawn from a central line; he should NEVER be used.
Lactic Acid - STAT and repeat 2 times every 3 he	ours	
[] Lactic acid level, SEPSIS - Now and repeat 2x e hours	every 3	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.
Lactic Acid - STAT and repeat 2 times every 3 he	ours	
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Lactic Acid - STAT and repeat 2 times every 3 b	oure	

Lactic Acid - STAT and repeat 2 times every 3 hours \*\*unselect if already collected\*\*

[X] 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.

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 "And" Linked Panel Hours - For Obese Patients [] 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 "And" Linked Panel 4 Hours - For Obese Patients [] 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.

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<ul> <li>(Single Response)</li> <li>() lactated ringers IV bolus + Vitals Every 15 Mir</li> </ul>	nutes x 4 "And" Linked Panel
Hours          I actated ringers bolus	30 mL/kg, intravenous, once, For 1 Doses
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	of fluid.
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For Obese Patients (Single Response)	
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4 Hours - For Obese Patients	
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	mmHg), notify ordering provider prior to administration of additional
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	Doses start immediately.
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	of fluid.
() Patient does not have initial hypotension, sever	
nor septic shock at this time. No additional cry	
fluid resuscitation bolus indicated at this time (S	Single
Response)	Davida Orac
() Patient does not have initial hypotension,	Routine, Once
severe sepsis, nor septic shock at this time.	
No additional crystalloid IV fluid resuscitation bolus indicated at this time	
	asansis
<ul> <li>Patient does not have initial hypotension, severe nor septic shock at this time. No additional crys</li> </ul>	
fluid resuscitation bolus indicated at this time (Si	
Response)	
() Patient does not have initial hypotension,	Routine, Once
severe sepsis, nor septic shock at this time.	
No additional crystalloid IV fluid	
resuscitation bolus indicated at this time	
resuscitation bolus indicated at this time No (Single Response)	

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<ul> <li>(Single Response)</li> <li>() sodium chloride 0.9% bolus + Vitals Every 15 4 Hours</li> </ul>	Minutes x "And" Linked Panel
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) Patient does not have initial hypotension, seven nor septic shock at this time. No additional cry fluid resuscitation bolus indicated at this time ( Response)	vstalloid IV Single
<ul> <li>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</li> </ul>	Routine, Once
ibiotics * if not already started within the last 24 hours ** lease Select the appropriate indication(s) for antib	piotic use below:
Community-Acquired Pneumonia (Single Respon Does your patient have a SEVERE penicillin aller	
) No (Single Response) () cefTRIAXone (ROCEPHIN) 1 g IV + azithrom	ycin "And" Linked Panel

[] cefTRIAXone (ROCEPHIN) IV	1 g, intravenous, for 30 Minutes, every 24 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
[] azithromycin (ZITHROMAX) IV	500 mg, intravenous, for 60 Minutes, every 24 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 wai
	for the first antibiotic to infuse. If agents are Y-site compatible, they may
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	Recommendation: Sepsis: Recommended duration is dependent upon patient's clinical response and source identification
) cefTRIAXone (ROCEPHIN) 1 g IV + levofloxacin (LEVAQUIN) 750 mg IV	"And" Linked Panel
[] cefTRIAXone (ROCEPHIN) IV	1 g, intravenous, for 30 Minutes, every 24 hours Classification: Broad Spectrum Antibiotic
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	Recommendation: Sepsis: Recommended duration is dependent upor patient's clinical response and source identification
[] levofloxacin (LEVAQUIN) IV	750 mg, intravenous, every 24 hours Classification: Narrow Spectrum Antibiotic
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	wait for the first antibiotic to infuse. If agents are Y-site compatible, they may be administered per Y-site protocols. IF the ordered agents are NOT Y site compatible, then administer the Broad-spectrum antibiotic first. Refer to available Y site compatibility information and
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	Indication: Sepsis Recommendation: Sepsis: Recommended duration is dependent upor patient's clinical response and source identification

[] cefTRIAXone (ROCEPHIN) IM	1 g, intramuscular, every 24 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).
	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
[] azithromycin (ZITHROMAX) IV	500 mg, intravenous, for 60 Minutes, every 24 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 wai
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	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 upor
) cefTRIAXone (ROCEPHIN) 1 g intraMUSC	patient's clinical response and source identification ULAR + "And" Linked Panel
levofloxacin (LEVAQUIN) 750 mg IV	
[] cefTRIAXone (ROCEPHIN) IM	1 g, intramuscular, every 24 hours
	later environmente entre la construction de la later
	Intramuscular route selected because no IV access available.
	Administer dose by deep IM into large muscle mass (e.g. gluteal
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] levofloxacin (LEVAQUIN) IV	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 upor
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] levofloxacin (LEVAQUIN) IV	<ul> <li>Administer dose by deep IM into large muscle mass (e.g. gluteal muscles or lateral part of the thigh).</li> <li>Reason for Therapy: Bacterial Infection Suspected</li> <li>IM Route Selection: I have opted to select the IM route because IV access could not be established</li> <li>Indication: Sepsis</li> <li>Recommendation: Sepsis: Recommended duration is dependent upor patient's clinical response and source identification</li> <li>750 mg, intravenous, every 24 hours</li> <li>Classification: Narrow Spectrum Antibiotic</li> <li>When multiple antimicrobial agents are ordered, you may administer these immediately at the SAME TIME via different IV sites. Do not wait for the first antibiotic to infuse. If agents are Y-site compatible, they may be administered per Y-site protocols. IF the ordered agents are NOT Y site compatible, then administer the Broad-spectrum antibiotic first. Refer to available Y site compatibility information and determination of broad-spectrum antibiotic selection chart.</li> <li>Reason for Therapy: Bacterial Infection Suspected Indication: Sepsis</li> </ul>
] levofloxacin (LEVAQUIN) IV	<ul> <li>Administer dose by deep IM into large muscle mass (e.g. gluteal muscles or lateral part of the thigh).</li> <li>Reason for Therapy: Bacterial Infection Suspected</li> <li>IM Route Selection: I have opted to select the IM route because IV access could not be established</li> <li>Indication: Sepsis</li> <li>Recommendation: Sepsis: Recommended duration is dependent upon patient's clinical response and source identification</li> <li>750 mg, intravenous, every 24 hours</li> <li>Classification: Narrow Spectrum Antibiotic</li> <li>When multiple antimicrobial agents are ordered, you may administer these immediately at the SAME TIME via different IV sites. Do not wait for the first antibiotic to infuse. If agents are Y-site compatible, they may be administered per Y-site protocols. IF the ordered agents are NOT Y site compatible, then administer the Broad-spectrum antibiotic first. Refer to available Y site compatibility information and determination of broad-spectrum antibiotic selection chart.</li> <li>Reason for Therapy: Bacterial Infection Suspected</li> </ul>
[] levofloxacin (LEVAQUIN) IV Yes (Single Response)	<ul> <li>Administer dose by deep IM into large muscle mass (e.g. gluteal muscles or lateral part of the thigh).</li> <li>Reason for Therapy: Bacterial Infection Suspected</li> <li>IM Route Selection: I have opted to select the IM route because IV access could not be established</li> <li>Indication: Sepsis</li> <li>Recommendation: Sepsis: Recommended duration is dependent upon patient's clinical response and source identification</li> <li>750 mg, intravenous, every 24 hours</li> <li>Classification: Narrow Spectrum Antibiotic</li> <li>When multiple antimicrobial agents are ordered, you may administer these immediately at the SAME TIME via different IV sites. Do not wait for the first antibiotic to infuse. If agents are Y-site compatible, they may be administered per Y-site protocols. IF the ordered agents are NOT Y site compatible, then administer the Broad-spectrum antibiotic first. Refer to available Y site compatibility information and determination of broad-spectrum antibiotic selection chart.</li> <li>Reason for Therapy: Bacterial Infection Suspected Indication: Sepsis</li> </ul>

[] aztreonam (AZACTAM) IV	2 g, intravenous, every 6 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 ma be administered per Y-site protocols. IF the ordered agents are NOT Y 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 Percommendation: Sepsis
	Recommendation: Sepsis: Recommended duration is dependent upon patient's clinical response and source identification
[] azithromycin (ZITHROMAX) IV	500 mg, intravenous, for 60 Minutes, every 24 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 ma be administered per Y-site protocols. IF the ordered agents are NOT Y 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 + azithromycin (ZITHROMAX) 500 mg IV	"And" Linked Panel
[] aztreonam (AZACTAM) IM	2 g, intramuscular, every 6 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 Indication: Sepsis IM Route Selection: I have opted to select the IM route because IV access could not be established
[] azithromycin (ZITHROMAX) IV	500 mg, intravenous, for 60 Minutes, every 24 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 ma be administered per Y-site protocols. IF the ordered agents are NOT Y 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

mmunosuppressed, on home infusion therapy or h Combined use of piperacillin/tazobactam and vanc njury.	omycin may be associated with an increased incidence of acute kidney
Does your patient have a SEVERE penicillin AND/OR vancomycin allergy?	
No SEVERE Penicillin OR Vancomycin Allergy Response)	(Single
Use meropenem (MERREM) if history of infection piperacillin/tazobactam or cefepime.	n with ESBL-producing organism or recent prolonged treatment with
) ceFEPime 2 g IV + vancomycin 15 mg/kg IV	
[] ceFEPime (MAXIPIME) IV	2 g, intravenous, every 8 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 ma
	be administered per Y-site protocols. IF the ordered agents are NOT Y
	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
<ul> <li>vancomycin (VANCOCIN) IV + Pharmacy Con Dose (Selection Required)</li> </ul>	isuit to
[] 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
	Indication: Sepsis - Nosocomial Pneumonia or Community-Acquired Pneumonia with Multi-Drug Resistant Risk

 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, every 24 hours
	Classification: Narrow Spectrum Antibiotic
	<ul> <li>When multiple antimicrobial agents are ordered, you may administer these immediately at the SAME TIME via different IV sites. Do not wait for the first antibiotic to infuse. If agents are Y-site compatible, they may be administered per Y-site protocols. IF the ordered agents are NOT Y site compatible, then administer the Broad-spectrum antibiotic first. Refer to available Y site compatibility information and determination of broad-spectrum antibiotic selection chart.</li> <li>Reason for Therapy: Bacterial Infection Suspected Indication: Sepsis: Recommendation: Sepsis: Recommended duration is dependent</li> </ul>
	upon patient's clinical response and source identification
<ul> <li>Optional IV Antibiotic Addition - tobramycin (T mg/kg IV</li> </ul>	OBREX) 7
[] 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
) piperacillin-tazobactam (ZOSYN) 4.5 g IV + va 15 mg/kg IV (NOT HMW)	
[] piperacillin-tazobactam (ZOSYN) IV	4.5 g, intravenous, every 6 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
<ul> <li>vancomycin (VANCOCIN) IV + Pharmacy Con Dose (Selection Required)</li> </ul>	nsult to
d on 3/9/2023 at 3:06 PM from TST Environment	Page 11 of 99

] 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
	Indication: Sepsis - Nosocomial Pneumonia or Community-Acquired
	Pneumonia with Multi-Drug Resistant Risk
Adjunct Antibiotics - amikacin (AMIKIN) 15 mg levofloxacin 750 mg IV (Single Response)	/kg IV +/-
) 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, every 24 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
	Recommendation. Ocpais. Recommended duration is dependent

[] 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
) piperacillin-tazobactam (ZOSYN) EI 4.5 g IV + vancomycin 15 mg/kg IV (HMW Only)	<u> </u>
[] 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, every 8 hours, Starting H+6 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
<ul> <li>vancomycin (VANCOCIN) IV + Pharmacy Cor Dose (Selection Required)</li> </ul>	isult to
[] 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: Indication: Sepsis

[] Pharmacy consult to manage vancomycin	STAT, Until discontinued, Starting S
	Reason for Therapy:
	Duration of Therapy (Days):
	Indication: Sepsis - Nosocomial Pneumonia or Community-Acquired Pneumonia with Multi-Drug Resistant Risk
] Adjunct Antibiotics - amikacin (AMIKIN) 15 mg levofloxacin 750 mg IV (Single Response)	/kg IV +/-
() 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 agen are NOT Y 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
() levofloxacin (LEVAQUIN) IV	Indication: Sepsis 750 mg, intravenous, every 24 hours
	Classification: Narrow Spectrum Antibiotic
] Optional IV Antibiotic Addition - tobramycin (To 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 agen are NOT Y 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-Acquire Pneumonia with Multi-Drug Resistant Risk

[] meropenem (MERREM) IV	500 mg, intravenous, every 6 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
<ul> <li>vancomycin (VANCOCIN) IV + Pharmacy Con Dose (Selection Required)</li> </ul>	nsult to
[] 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 Indication: Sepsis - Nosocomial Pneumonia or Community-Acquired Pneumonia with Multi-Drug Resistant Risk
<ul> <li>Adjunct Antibiotics - amikacin (AMIKIN) 15 mg levofloxacin 750 mg IV (Single Response)</li> </ul>	g/kg IV +/-
() 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, every 24 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
<ul> <li>Optional IV Antibiotic Addition - tobramycir mg/kg IV</li> </ul>	upon patient's clinical response and source identification (TOBREX) 7
[] 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
) ceFEPime 2 g intraMUSCULAR + vancomy IV	· · · · · · · · · · · · · · · · · · ·
[] cefepime (MAXIPIME) IM	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
[] vancomycin (VANCOCIN) IV + Pharmacy (	
Dose (Selection Required)           []         vancomycin (VANCOCIN)           []         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
	Indication: Sepsis - Nosocomial Pneumonia or Community-Acquired
	Pneumonia with Multi-Drug Resistant Risk
<ul> <li>Adjunct Antibiotics - amikacin (AMIKIN) 15 mg levofloxacin 750 mg IV (Single Response)</li> </ul>	/kg IV +/-
() 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 administe
	these immediately at the SAME TIME via different IV sites. Do not
	wait for the first antibiotic to infuse. If agents are Y-site compatible,
	they may be administered per Y-site protocols. IF the ordered agent
	are NOT Y 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, every 24 hours
	Classification: Narrow Spectrum Antibiotic
	When multiple antimicrobial agents are ordered, you may administe
	these immediately at the SAME TIME via different IV sites. Do not
	wait for the first antibiotic to infuse. If agents are Y-site compatible,
	they may be administered per Y-site protocols. IF the ordered agen
	are NOT Y 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 (To	
	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 administe
	these immediately at the SAME TIME via different IV sites. Do not
	wait for the first antibiotic to infuse. If agents are Y-site compatible,
	they may be administered per Y-site protocols. IF the ordered agen
	are NOT Y 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) intraMUSCULAR	0.5 g, intramuscular, every 6 hours 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 upor
	patient's clinical response and source identification
vancomycin (VANCOCIN) IV + Pharmacy Co	
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
] I harmacy consult to manage valicomycin	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
	Indication: Sepsis - Nosocomial Pneumonia or Community-Acquired
	Pneumonia with Multi-Drug Resistant Risk
Adjunct Antibiotics - amikacin (AMIKIN) 15 m	
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, every 24 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

[] 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
[] Pharmacy consult to dose tobramycin	Indication: Sepsis 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
SEVERE Penicillin Allergy (Single Response)	
(i.e. Type 1 immediate hypersensitivity reaction	- anaphylaxis, bronchospasm, angioedema, urticaria)
) aztreonam (AZACTAM) 2 g IV + vancomycin 1 IV	5 mg/kg
[] aztreonam (AZACTAM) IV	2 g, intravenous, every 8 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 wai for the first antibiotic to infuse. If agents are Y-site compatible, they ma be administered per Y-site protocols. IF the ordered agents are NOT Y 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
<ul> <li>vancomycin (VANCOCIN) IV + Pharmacy Con Dose (Selection Required)</li> </ul>	isult 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	<ul> <li>these immediately at the SAME TIME via different IV sites. Do not wait for the first antibiotic to infuse. If agents are Y-site compatible, they may be administered per Y-site protocols. IF the ordered agents are NOT Y site compatible, then administer the Broad-spectrum antibiotic first. Refer to available Y site compatibility information and determination of broad-spectrum antibiotic selection chart.</li> <li>Reason for Therapy: Bacterial Infection Suspected Indication: Sepsis</li> <li>Recommendation: Sepsis: Recommended duration is dependent</li> </ul>

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, every 24 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
] Suspected Anaerobe Coverage: metroNIDAZC (FLAGYL) 500 mg IV	
[] metroNIDAZOLE (FLAGYL) IV	500 mg, intravenous, every 8 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
aztreonam (AZACTAM) 2 g intraMUSCULAR + vancomycin 15 mg/kg IV	
[] aztreonam (AZACTAM) intraMUSCULAR	2 g, intramuscular, every 8 hours (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

[] 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 agent are NOT Y 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
] Adjunct Antibiotics - amikacin (AMIKIN) 15 mg/	upon patient's clinical response and source identification
<ul> <li>Adjunct Antibiotics - amikacin (AMIKIN) 15 mg/ levofloxacin 750 mg IV (Single Response)</li> </ul>	
() 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 administe
	these immediately at the SAME TIME via different IV sites. Do not
	wait for the first antibiotic to infuse. If agents are Y-site compatible, they may be administered per Y-site protocols. IF the ordered agent
	are NOT Y 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, every 24 hours
	Classification: Narrow Spectrum Antibiotic
	When multiple antimicrobial agents are ordered, you may administe
	these immediately at the SAME TIME via different IV sites. Do not
	wait for the first antibiotic to infuse. If agents are Y-site compatible, they may be administered per Y-site protocols. IF the ordered agent
	are NOT Y 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: metroNIDAZC (FLAGYL) 500 mg IV	
[] metroNIDAZOLE (FLAGYL) IV	500 mg, intravenous, every 8 hours
	Classification: Narrow Spectrum Antibiotic
	When multiple antimicrobial agents are ordered, you may administe
	these immediately at the SAME TIME via different IV sites. Do not
	wait for the first antibiotic to infuse. If agents are Y-site compatible, they may be administered per Y-site protocols. IF the ordered agent
	are NOT Y site compatible, then administer the Broad-spectrum
	determination of broad-spectrum antibiotic selection chart.
	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

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

] ceFEPime (MAXIPIME) IV	2 g, intravenous, every 8 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 ma be administered per Y-site protocols. IF the ordered agents are NOT Y 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
<ul> <li>linezolid in dextrose 5% (ZYVOX) 600 mg/300 mL IVPB</li> </ul>	patient's clinical response and source identification 600 mg, intravenous, for 60 Minutes, 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 wair for the first antibiotic to infuse. If agents are Y-site compatible, they ma be administered per Y-site protocols. IF the ordered agents are NOT Y 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 upor 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
() Ievofloxacin (LEVAQUIN) IV	750 mg, intravenous, every 24 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

<ul> <li>7 mg/kg, intravenous, for 60 Minutes, every 24 hours Pharmacy Consult to dose based on renal function</li> <li>Classification: Narrow Spectrum Antibiotic</li> <li>When multiple antimicrobial agents are ordered, you may administer these immediately at the SAME TIME via different IV sites. Do not wait for the first antibiotic to infuse. If agents are Y-site compatible, they may be administered per Y-site protocols. IF the ordered agents are NOT Y 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</li> <li>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</li> <li>VOX) 600</li> <li>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</li> </ul>
<ul> <li>When multiple antimicrobial agents are ordered, you may administer these immediately at the SAME TIME via different IV sites. Do not wait for the first antibiotic to infuse. If agents are Y-site compatible, they may be administered per Y-site protocols. IF the ordered agents are NOT Y 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</li> <li>Routine, Until discontinued, Starting S</li> <li>Which aminoglycoside do you need help dosing? tobramycin Indication: Sepsis - Nosocomial Pneumonia or Community-Acquired Pneumonia with Multi-Drug Resistant Risk</li> <li>VOX) 600</li> <li>2 g, intramuscular, every 8 hours Intramuscular route selected because no IV access available.</li> </ul>
<ul> <li>these immediately at the SAME TIME via different IV sites. Do not wait for the first antibiotic to infuse. If agents are Y-site compatible, they may be administered per Y-site protocols. IF the ordered agents are NOT Y 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</li> <li>Routine, Until discontinued, Starting S</li> <li>Which aminoglycoside do you need help dosing? tobramycin Indication: Sepsis - Nosocomial Pneumonia or Community-Acquired Pneumonia with Multi-Drug Resistant Risk</li> <li>VOX) 600</li> <li>2 g, intramuscular, every 8 hours Intramuscular route selected because no IV access available.</li> </ul>
<ul> <li>they may be administered per Y-site protocols. IF the ordered agents are NOT Y 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</li> <li>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</li> <li>VOX) 600</li> <li>2 g, intramuscular, every 8 hours Intramuscular route selected because no IV access available.</li> </ul>
are NOT Y 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 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 VOX) 600 2 g, intramuscular, every 8 hours Intramuscular route selected because no IV access available.
<ul> <li>antibiotic first. Refer to available Y site compatibility information and determination of broad-spectrum antibiotic selection chart.</li> <li>Reason for Therapy: Bacterial Infection Suspected Indication: Sepsis</li> <li>Routine, Until discontinued, Starting S</li> <li>Which aminoglycoside do you need help dosing? tobramycin Indication: Sepsis - Nosocomial Pneumonia or Community-Acquired Pneumonia with Multi-Drug Resistant Risk</li> <li>VOX) 600</li> <li>2 g, intramuscular, every 8 hours Intramuscular route selected because no IV access available.</li> </ul>
Reason for Therapy: Bacterial Infection Suspected Indication: Sepsis         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         VOX) 600         2 g, intramuscular, every 8 hours Intramuscular route selected because no IV access available.
Which aminoglycoside do you need help dosing? tobramycin Indication: Sepsis - Nosocomial Pneumonia or Community-Acquired Pneumonia with Multi-Drug Resistant Risk VOX) 600 2 g, intramuscular, every 8 hours Intramuscular route selected because no IV access available.
Indication: Sepsis - Nosocomial Pneumonia or Community-Acquired Pneumonia with Multi-Drug Resistant Risk VOX) 600 2 g, intramuscular, every 8 hours Intramuscular route selected because no IV access available.
Pneumonia with Multi-Drug Resistant Risk VOX) 600 2 g, intramuscular, every 8 hours Intramuscular route selected because no IV access available.
VOX) 600 2 g, intramuscular, every 8 hours Intramuscular route selected because no IV access available.
2 g, intramuscular, every 8 hours Intramuscular route selected because no IV access available.
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
600 mg, intravenous, for 60 Minutes, 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 ma
be administered per Y-site protocols. IF the ordered agents are NOT Y
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 /kg IV +/-
15 mg/kg introveneurs for 20 Minutes ence For 1 Deces
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

() levofloxacin (LEVAQUIN) IV	750 mg, intravenous, every 24 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
[] Optional IV Antibiotic Addition - tobramycin (TC 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
) piperacillin-tazobactam (ZOSYN) 4.5 g IV + linez (ZYVOX) 600 mg IVPB (NOT HMW)	
[] piperacillin-tazobactam (ZOSYN) IV	4.5 g, intravenous, every 6 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
[] linezolid in dextrose 5% (ZYVOX) IVPB	patient's clinical response and source identification 600 mg, intravenous, for 60 Minutes, 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
d on 3/9/2023 at 3:06 PM from TST Environment	Recommendation: Sepsis: Recommended duration is dependent upon patient's clinical response and source identification Page 24 of 99

() 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 agent are NOT Y 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, every 24 hours Classification: Narrow Spectrum Antibiotic
	When multiple antimicrobial agents are ordered, you may administe
	these immediately at the SAME TIME via different IV sites. Do not wait for the first antibiotic to infuse. If agents are Y-site compatible,
	they may be administered per Y-site protocols. IF the ordered agent
	are NOT Y 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
] Optional IV Antibiotic Addition - tobramycin (TC	upon patient's clinical response and source identification
] Optional IV Antibiotic Addition - tobramycin (TC 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 administe
	these immediately at the SAME TIME via different IV sites. Do not wait for the first antibiotic to infuse. If agents are Y-site compatible,
	they may be administered per Y-site protocols. IF the ordered agent
	are NOT Y 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
piperacillin-tazobactam (ZOSYN) EI IV + linezoli (ZYVOX) 600 mg IVPB (HMW Only)	
] piperacillin-tazobactam (ZOSYNI) EI IV	4.5 g, intravenous, for 4 Hours, every 8 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 wa
	for the first antibiotic to infuse. If agents are Y-site compatible, they m be administered per Y-site protocols. IF the ordered agents are NOT
	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 upo
	patient's clinical response and source identification
on 3/9/2023 at 3:06 PM from TST Environment	Page 25 of

[]       linezolid in dextrose 5% (ZYVOX)       IVPB       600 mg, intravenous, for 60 Minutes, every 12 Classification: Narrow Spectrum Antibiotic         []       linezolid in dextrose 5% (ZYVOX)       IVPB       600 mg, intravenous, for 60 Minutes, every 12 Classification: Narrow Spectrum Antibiotic         []       linezolid in dextrose 5% (ZYVOX)       IVPB       600 mg, intravenous, for 60 Minutes, every 12 Classification: Narrow Spectrum Antibiotic         []       https://www.spinitesteature.commendation:       Sepsis       Recommendation:       Sepsis: Recommended ture         []       Adjunct Antibiotics - amikacin (AMIKIN) 15 mg/kg IV +/-       lissification: Narrow Spectrum Antibiotic         []       Adjunct Antibiotics - amikacin (AMIKIN) 15 mg/kg IV +/-       Classification: Narrow Spectrum Antibiotic         []       Adjunct Antibiotics - amikacin (AMIKIN) 15 mg/kg IV +/-       Classification: Narrow Spectrum Antibiotic         []       Adjunct Antibiotics - amikacin (AMIKIN) 15 mg/kg IV +/-       Classification: Narrow Spectrum Antibiotics         []       Adjunct Antibiotics - amikacin (AMIKIN) 10 mg/kg IV +/-       Classification: Narrow Spectrum Antibiotics         []       Adjunct Antibiotics - amikacin (AMIKIN) 15 mg/kg IV +/-       Classification: Narrow Spectrum Antibiotics         []       Adjunct Antibiotics Addition - tobramycin (Classification: Narrow Spectrum Antibiotics       Recommendation: Sepsis         []       Ivoftoxa	
these immediately at the SAME TIME via differ for the first antibiotic to infuse. If agents are Y- be administered per Y-site protocols. IF the ord site compatibile, then administer the Broad-spe Refer to available Y site compatibility informati- broad-spectrum antibiotic selection chart. Reason for Therapy: Bacterial Infection Suspe- Indication: Sepsis: Recommended dur patient's clinical response and source identifica [] 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, Classification: Narrow Spectrum Antibiotic are NOT Y site compatible, then administer the antibiotic first. Refer to available Y site compatible, then administer these immediately at the SAME TIME via diffi wait for the first antibiotic to infuse. If agents a they may be administered per Y-site protocol are NOT Y site compatible, then administer these immediately at the SAME TIME via diffi wait for the first antibiotic first. Refer to available Y site compatible, then administer antibiotic first. Refer to available Y site compatible, then administer they may be administered per Y-site protocol are NOT Y site compatible, then administer the antibiotic first. Refer to available Y site compatible, then administer they may be administered per Y-site protocol are NOT Y site compatible, then administer the antibiotic first. Refer to available Y site compatible, then administer the antibiotic first. Refer to available Y site compatible, then administer the antibiotic first. Refer to available Y site compatible, then administer the antibiotic first. Refer to available Y site compatible, then administer the antibiotic first. Refer to available Y site compatible, then administer the antibiotic first. Refer to available Y site compatible, then administer the antibiotic first. Refer to available Y site compatible, then administer the antibiotic first. Refer to available Y site compatible, then administer the antibiotic first.	2 hours
patient's clinical response and source identifical exponse on pilot (Single Response)         () amikacin (AMIKIN) IV       15 mg/kg IV +/- levofloxacin 750 mg IV (Single Response)         () amikacin (AMIKIN) IV       15 mg/kg, intravenous, for 30 Minutes, once, Classification: Narrow Spectrum Antibiotic When multiple antimicrobial agents are order these immediately at the SAME TIME via diff wait for the first antibiotic of first. Refer to available Y site compatible, then administer the antibiotic first. Refer to available Y site compatible to a spectrum antibiotic or first. Refer to available Y site compatible to the first antibiotic to first. Refer to available Y sise compatible to first. Refer to available Y	erent IV sites. Do not wait -site compatible, they may rdered agents are NOT Y ectrum antibiotic first. tion and determination of ected
levofloxacin 750 mg IV (Single Response)         () amikacin (AMIKIN) IV       15 mg/kg, intravenous, for 30 Minutes, once, Classification: Narrow Spectrum Antibiotic         When multiple antimicrobial agents are order these immediately at the SAME TIME via diff wait for the first antibiotic to infuse. If agents a they may be administered per Y-site protocol are NOT Y site compatible, then administer thantibiotic first. Refer to available Y site compateterm innation of broad-spectrum antibiotic Susp. Indication: Sepsis         () levofloxacin (LEVAQUIN) IV       750 mg, intravenous, every 24 hours         Classification: Narrow Spectrum Antibiotic       When multiple antimicrobial agents are order these immediately at the SAME TIME via diff wait for the first antibiotic to infuse. If agents a they may be administered per Y-site protocol are NOT Y site compatible, then administer thantibiotic first. Refer to available Y site compate determination of broad-spectrum antibiotic serves are NOT Y site compatible, then administer thantibiotic response and source in antibiotic first. Refer to available Y site compatible, then administer thantibiotic in Sepsis         () Optional IV Antibiotic Addition - tobramycin (TOBREX) 7       7 mg/kg, intravenous, for 60 Minutes, every 2 Pharmacy Consult to dose based on renal fur Classification: Narrow Spectrum Antibiotic         () I tobramycin (TOBREX) IV       7 mg/kg, intravenous, for 60 Minutes, every 2 Pharmacy Consult to dose based on renal fur classification: Narrow Spectrum Antibiotic         () Optional IV Antibiotic Addition - tobramycin (TOBREX) 7       7 mg/kg, intravenous, for 60 Minutes, every 2 Pharmacy Consult to dose based on renal fur Classification: Narrow Spectrum Antibiotic <t< td=""><td></td></t<>	
<ul> <li>() amikacin (AMIKIN) IV</li> <li>15 mg/kg, intravenous, for 30 Minutes, once, Classification: Narrow Spectrum Antibiotic</li> <li>When multiple antimicrobial agents are ordern these immediately at the SAME TIME via diff wait for the first antibiotic to infuse. If agents a they may be administered per Y-site protocob are NOT Y site compatible, then administer thation: Sepsis</li> <li>() levofloxacin (LEVAQUIN) IV</li> <li>750 mg, intravenous, every 24 hours</li> <li>Classification: Narrow Spectrum antibiotic Sepsis</li> <li>() levofloxacin (LEVAQUIN) IV</li> <li>750 mg, intravenous, every 24 hours</li> <li>Classification: Narrow Spectrum antibiotic to the first antibiotic first. Refer to available Y site compared they may be administer of agents are ordern these immediately at the SAME TIME via diffusation: Narrow Spectrum antibiotic set they may be administer of agents are tordern these immediately at the SAME TIME via diffusation tharrow Spectrum antibiotic set they may be administer of a per Y-site protocol are NOT Y site compatible, then administer than thibiotic first. Refer to available Y site compatible, then administer than thibiotic first. Refer to available Y site compatible, then administer than thibiotic first. Refer to available Y site compatible, then administer than thibiotic classification - tobramycin (TOBREX) 7</li> <li>() Optional IV Antibiotic Addition - tobramycin (TOBREX) 7</li> <li>mg/kg IV</li> <li>Tobramycin (TOBREX) IV</li> <li>The may be administered per Y-site protocol are NOT Y site compatible, then administer these immediately at the SAME TIME via diffusation: Narrow Spectrum Antibiotic</li> <li>When multiple antimicrobial agents are ordern these immediately at the SAME TIME via diffusation: Narrow Spectrum Antibiotic</li> <li>When multiple antimicrobial agents are order they may be administered per Y-site protocol are NOT Y site compatible, the administer thantibiotic first. Refer to available Y site compatible to</li></ul>	
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[] tobramycin (TOBREX) IV       7 mg/kg, intravenous, for 60 Minutes, every 2         Pharmacy Consult to dose based on renal fur       Classification: Narrow Spectrum Antibiotic         When multiple antimicrobial agents are ordered these immediately at the SAME TIME via difference wait for the first antibiotic to infuse. If agents a they may be administered per Y-site protocols are NOT Y site compatible, then administer the antibiotic first. Refer to available Y site compared determination of broad-spectrum antibiotic se Reason for Therapy: Bacterial Infection Suspendence in the Series         [] Pharmacy consult to dose tobramycin       Routine, Until discontinued, Starting S Which aminoglycoside do you need help dosi	
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Which aminoglycoside do you need help dosi	ferent IV sites. Do not are Y-site compatible, ols. IF the ordered agents the Broad-spectrum patibility information and election chart.
Indication: Sepsis - Nosocomial Pneumonia o Pneumonia with Multi-Drug Resistant Risk	
) meropenem (MERREM) 500 mg IV + linezolid (ZYVOX)	

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] meropenem (MERREM) IV	500 mg, intravenous, every 6 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 ma be administered per Y-site protocols. IF the ordered agents are NOT Y site compatible, then administer the Broad spectrum antibiotic first
	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, 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 ma
	be administered per Y-site protocols. IF the ordered agents are NOT Y 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 m levofloxacin 750 mg IV (Single Response)	ng/kg IV +/-
() 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
() levofloxacin (LEVAQUIN) IV	Indication: Sepsis 750 mg, intravenous, every 24 hours
() levofloxacin (LEVAQUIN) 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
	Recommendation: Sepsis: Recommended duration is dependent upon patient's clinical response and source identification

[] 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
SEVERE Penicillin AND Vancomycin Allergy ( Response)	Single
	on - anaphylaxis, bronchospasm, angioedema, urticaria)
) aztreonam (AZACTAM) 2 g IV + linezolid (ZY mg IVPB	/VOX) 600
[] aztreonam (AZACTAM) IV	2 g, intravenous, every 8 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
[] linezolid in dextrose 5% (ZYVOX) IVPB	600 mg, intravenous, for 60 Minutes, 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

<ul><li>15 mg/kg, intravenous, for 30 Minutes, once, For 1 Doses Classification: Narrow Spectrum Antibiotic</li><li>When multiple antimicrobial agents are ordered, you may administer these immediately at the SAME TIME via different IV sites. Do not wait for the first antibiotic to infuse. If agents are Y-site compatible,</li></ul>
these immediately at the SAME TIME via different IV sites. Do not wait for the first antibiotic to infuse. If agents are Y-site compatible,
they may be administered per Y-site protocols. IF the ordered agents are NOT Y 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 750 mg, intravenous, every 24 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
OLE
500 mg, intravenous, every 8 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
- linezolid
2 g, intramuscular, every 8 hours (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
600 mg, intravenous, for 60 Minutes, 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 ma be administered per Y-site protocols. IF the ordered agents are NOT Y 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

() 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 administe
	these immediately at the SAME TIME via different IV sites. Do not
	wait for the first antibiotic to infuse. If agents are Y-site compatible,
	they may be administered per Y-site protocols. IF the ordered agent
	are NOT Y 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, every 24 hours
	Classification: Narrow Spectrum Antibiotic
	When multiple antimicrobial agents are ordered, you may administe
	these immediately at the SAME TIME via different IV sites. Do not
	wait for the first antibiotic to infuse. If agents are Y-site compatible,
	they may be administered per Y-site protocols. IF the ordered agent are NOT Y 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: metroN	
(FLAGYL) 500 mg IV [] metroNIDAZOLE (FLAGYL) IV	500 mg, intravenous, every 8 hours
	Classification: Narrow Spectrum Antibiotic
	When multiple antimicrobial agents are ordered, you may administe
	these immediately at the SAME TIME via different IV sites. Do not
	wait for the first antibiotic to infuse. If agents are Y-site compatible,
	they may be administered per Y-site protocols. IF the ordered agent
	are NOT Y 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
Jrinary Tract Infection (Single Response) Does your patient have a SEVERE penicillin a	allerav?
No (Single Response) ) cefTRIAXone (ROCEPHIN) 1 g IV	
[] cefTRIAxone (ROCEPHIN) IV	1 g, intravenous, for 30 Minutes, every 24 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 agent are NOT Y 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 upo
	patient's clinical response and source identification

are NOT Y 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 - Urinary Tract Infection     () celTRIAXone (ROCEPHIN) 1 g intraMUSCULAR     I g, intramuscular, every 24 hours     Intramuscular route selected because no IV access available.     Administer dose by deep IM into large muscle mass (e.g. gluteal     muscular, see yor 24 hours     IntraMUSCULAR     Intramuscular, every 24 hours     IntraMUSCULAR     Intramuscular, every 24 hours     IntraMUSCULAR     Intramiscular 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     Supported     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 IN     Tokramycin (TOBREX) IV     7 mg/kg, intravenous, for 60 Minutes, every 24 hours     Pharmacy Consult to dose tobramycin     Classification: Narrow Spectrum Antibiotic     When multiple antimicrobial agents are V-site compatible,     these immediately at the SAME TIME via different IV sites. Do not     wait for the first antibiotic bills cells on ordered agents     are NOT Y site compatible, then administer the Broad-spectrum     antibiotic first. Refer to available Y site protocols. IF the ordered agents     are NOT Y site compatible, then administer these descend for thard;     function: Sepsis     Classification: Stepsis - Urinary Tract Infection     Support     () ceFEPIme 1 g IV     () ceFEPIme 1 g 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           [] Pharmacy consult to dose tobramycin Inframuscular, every 24 hours         Indication: Sepsis           [] CefTRIAXone (ROCEPHIN) 1.g intraMUSCULAR         Intramuscular, every 24 hours           Intramuscular, every 24 hours         Indication: Sepsis           Intramuscular, every 24 hours         Intramuscular, every 24 hours           Intramuscular, every 24 hours         Intramuscular outs estected because no IV access available. Administer dose by deep IM into large muscle mass (e.g. gluteal muscles or lateral part of the bitgh). Reason for Therapy: Bacterial Infection Suspected M Route Selecton: Interve opted to select the IM route because IV access could not be established indication: Sepsis: Recommended duration is dependent upon patient's clinical response and source identification           [] Optional IV Antibiotic Addition - tobramycin (TOBREX) 7         7           mg/kg IV         7 mg/kg, intravenous, for 60 Minutes, every 24 hours Pharmacy Consult to dose tobramycin (TOBREX) IV           7 mg/kg IV         7 mg/kg, intravenous, for 60 Minutes, every 24 hours Pharmacy exerce administer the Broad spectrum antibiotic           [] Ph	[] tobramycin (TOBREX) IV	
these immediately at the SAME TIME via different IV sites. Do not wait for the first antibiotic binduse. If agents are Y-site compatible, they may be administered per Y-site protocols. If the ordered agents are NOT Y site compatibile, 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 Information of broad-spectrum antibiotic selection chart.       Reason for Therapy: Bacterial Infection Suspected Indication: Sepsis         [] CetTRIAXone (ROCEPHIN) 1 g intraMUSCULAR       1 g, intramuscular, every 24 hours IntraMUSCULAR       Intramuscular could selected because no IV access available. Administer dose by deep Min to large muscle mass (e.g. gluteal muscles or lateral part of the thigh). Reason for Therapy: Bacterial Infection Suspected IN Route Selection: I have opted to select the IM route because IV access could not be established Indication: Sepsis: Recommended duration is dependent upon patient's clinical response and source identification         [] Optional IV Antibiotic Addition - tobramycin (TOBREX) 7 mg/kg IV       7 mg/kg, intravenous, for 60 Minutes, every 24 hours Pharmacy Consult to dose tobramycin (TOBREX) IV         [] I tobramycin (TOBREX) IV       7 mg/kg, intravenous, for 60 Minutes, every 24 hours Pharmacy Consult to dose tobramycin (I cassification: Narrow Spectrum Antibiotic         [] Pharmacy consult to dose tobramycin (I cassification: Sepsis - Urinary Tract Infection Suspected Indication: Sepsis       The ordered agents are NOT Y site compatibile, then administer the Broad-spectrum antibiotic first. Refer to available Y site compatibility informat		Classification: Narrow Spectrum Antibiotic
Which aminoglycoside do you need help dosing? tobramycin Indication: Sepsis - Urinary Tract Infection         ) cefTRIAXone (ROCEPHIN) 1 g intraMUSCULAR         1 g, intramuscular out sepsis - Urinary Tract Infection         intraMUSCULAR         intraMUSCULAR         1 g, intramuscular out sepsis - Urinary Tract Infection         Administer dose by deep IM into large musclemass (e.g. gluteal muscles or lateral part of the triph). 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 Recommended duration is dependent upon patient's clinical response and source identification         [] Optional IV Antibiotic Addition - tobramycin (TOBREX) 7       mg/kg IV         [] optional IV Antibiotic Addition - tobramycin (TOBREX) 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 attribiotic to infure. If agents are Y-site compatible, they may be administered per Y-site protocols. IF the ordered agents are NOT Y site compatible. The addresed agents		these immediately at the SAME TIME via different IV sites. Do not wait for the first antibiotic to infuse. If agents are Y-site compatible, they may be administered per Y-site protocols. IF the ordered agents are NOT Y 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
cefTRIAXone (ROCEPHIN) 1 g intraMUSCULAR       1 g, intramuscular, every 24 hours         intraMUSCULAR       1 g, 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 high).       Reason for Therapy: Bacterial Infection Suspected         IM Route Selection: 1 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         I optional IV Antibiotic Addition - tobramycin (TOBREX) 7       mg/kg IV         I 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, the administer the Broad-spectrum antibiotic first. Refer to available Y site compatible, indication: Sepsis         [] Pharmacy consult to dose tobramycin       Routine, Until discontinued, Starting S         [] Pharmacy consult to dose tobramycin       1 g, intravenous, every 6 hours         [] Pharmacy consult to dose tobramycin       1 g, intravenous, every 6 hours         [] Pharmacy consult to dose tobramycin       1 g, intravenous, every 6 hours         [] ceF	[] Pharmacy consult to dose tobramycin	Which aminoglycoside do you need help dosing? tobramycin
[] ceFEPime 1 g IV       1 g, intramuscular, every 24 hours         IntraMUSCULAR       1 g, 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: 1 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         [] Optional IV Antibiotic Addition - 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       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 solection chart. Reason for Therapy: Bacterial Inflection Suspected Indication: Sepsis         [] Pharmacy consult to dose tobramycin I. ceFEPime 1 g IV       1 g, intravenous, every 6 hours Classification: Broad Spectrum Antibiotic         [] ceFEPime 1 g IV       1 g, intravenous, every 6 hours Classification: Broad Spectrum Antibiotic         [] ceFEPime 1 g IV       1 g, int	) cefTRIAXone (ROCEPHIN) 1 g intraMUSCULA	
patient's clinical response and source identification         [] Optional IV Antibiotic Addition - tobramycin (TOBREX) 7         mg/kg IV         [] tobramycin (TOBREX) IV         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 - Urinary Tract Infection         [] ceFEPime 1 g IV       1 g, intravenous, every 6 hours Classification: Broad Spectrum Antibiotic         [] oeFEPime (MAXIPIME) IV       1 g, intravenous, every 6 hours Classification: Broad Spectrum Antibiotic         [] oeFEPime (MAXIPIME) IV       1 g, intravenous, every 6 hours Classification: Broad Spectrum Antibiotic         [] oeFEPime (MAXIPIME) IV       1 g, intravenous, every 6 hours Classification: Broad Spectrum Antibiotic         When multiple anti	[] cefTRIAXone (ROCEPHIN) 1 g	1 g, intramuscular, every 24 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
[] 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 - Urinary Tract Infection         (] ceFEPime 1 g IV       1 g, intravenous, every 6 hours Classification: Broad Spectrum Antibiotic         [] ceFEPime (MAXIPIME) IV       1 g, intravenous, every 6 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 anteriorister the Broad-spectrum antibiotic first. Refer to available Y site compatible, they may be administer the Broad-spectrum antibiotic first. Refer to available Y site compatible, they may be administer the administer the Broad-spectrum		
When multiple antimicrobial agents are ordered, you may administer these immediately at the SAME TIME via different IV sites. Do not wait for the first antibiotic to infuse. If agents are Y-site compatible, they may be administered per Y-site protocols. IF the ordered agents are NOT Y site compatible, there and indication: Sepsis         [] Pharmacy consult to dose tobramycin       Routine, Until discontinued, Starting S         [] Pharmacy consult to dose tobramycin       Routine, Until discontinued, Starting S         [] Pharmacy consult to dose tobramycin       Routine, Until discontinued, Starting S         [] ceFEPime 1 g IV       1 g, intravenous, every 6 hours         [] ceFEPime (MAXIPIME) IV       1 g, intravenous, every 6 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 first. Refer to available Y site compatibile, they may be administered per Y-site protocols. IF the ordered agents are NOT Y site compatibile, they may be administered per Y-site compatibile, they may be administered per Y-site protocols. IF the ordered agents are NOT Y site compatibile, information and determination of broad-spectrum antibiotic first. Refer to available Y site compatibile, information and determination of broad-spectrum antibiotic selection chart. Reason for Therapy: Bacterial Infection Suspected Indication: Sepsis	mg/kg IV	7 mg/kg, intravenous, for 60 Minutes, every 24 hours
these immediately at the SAME TIME via different IV sites. Do not wait for the first antibiotic to infuse. If agents are Y-site compatible, they may be administered per Y-site protocols. IF the ordered agents are NOT Y 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 - Urinary Tract Infection Classification: Broad Spectrum Antibiotic 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		Classification: Narrow Spectrum Antibiotic
[] Pharmacy consult to dose tobramycin       Routine, Until discontinued, Starting S Which aminoglycoside do you need help dosing? tobramycin Indication: Sepsis - Urinary Tract Infection         ) ceFEPime 1 g IV       1 g, intravenous, every 6 hours Classification: Broad Spectrum Antibiotic         [] ceFEPime (MAXIPIME) IV       1 g, intravenous, every 6 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 multipic selection chart. Reason for Therapy: Bacterial Infection Suspected Indication: Sepsis Recommendation: Sepsis: Recommended duration is dependent upon		these immediately at the SAME TIME via different IV sites. Do not wait for the first antibiotic to infuse. If agents are Y-site compatible, they may be administered per Y-site protocols. IF the ordered agents are NOT Y 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
) ceFEPime 1 g IV         [] ceFEPime (MAXIPIME) IV       1 g, intravenous, every 6 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	[] Pharmacy consult to dose tobramycin	Routine, Until discontinued, Starting S Which aminoglycoside do you need help dosing? tobramycin
<ul> <li>[] ceFEPime (MAXIPIME) IV</li> <li>1 g, intravenous, every 6 hours Classification: Broad Spectrum Antibiotic</li> <li>When multiple antimicrobial agents are ordered, you may administer these immediately at the SAME TIME via different IV sites. Do not wait for the first antibiotic to infuse. If agents are Y-site compatible, they may be administered per Y-site protocols. IF the ordered agents are NOT Y 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</li> </ul>		Indication: Sepsis - Urinary Tract Infection
these immediately at the SAME TIME via different IV sites. Do not wait for the first antibiotic to infuse. If agents are Y-site compatible, they may be administered per Y-site protocols. IF the ordered agents are NOT Y 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		
		these immediately at the SAME TIME via different IV sites. Do not wait for the first antibiotic to infuse. If agents are Y-site compatible, they may be administered per Y-site protocols. IF the ordered agents are NOT Y 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

mg/kg IV	Z malka introvoncuo for 60 Minutos overy 24 hours
[] 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 agent are NOT Y 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 - Urinary Tract Infection
ceFEPime 2 g intraMUSCULAR	
[] cefepime (MAXIPIME) intraMUSCULAR	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 upo patient's clinical response and source identification
<ul> <li>Optional IV Antibiotic Addition - tobramycin ( mg/kg IV</li> </ul>	(IOBREX) 7
[] 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 administe these immediately at the SAME TIME via different IV sites. Do not wait for the first antibiotic to infuse. If agents are Y-site compatible, they may be administered per Y-site protocols. IF the ordered agent
	are NOT Y 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 - Urinary Tract Infection

[] piperacillin-tazobactam (ZOSYN) IV	4.5 g, intravenous, every 6 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
<ul> <li>Optional IV Antibiotic Addition - tobramycin (TO mg/kg IV</li> </ul>	OBREX) 7
[] 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 - Urinary Tract Infection
) piperacillin-tazobactam (ZOSYN) EI 4.5 g IV (HI	
[] piperacillin-tazobactam (ZOSYN) EI IV	4.5 g, intravenous, for 4 Hours, every 8 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
] Optional IV Antibiotic Addition - tobramycin (TC	patient's clinical response and source identification DBREX) 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
d on 3/9/2023 at 3:06 PM from TST Environment	Indication: Sepsis Page 33 of 99

[] Pharmacy consult to dose tobramycin	Routine, Until discontinued, Starting S Which aminoglycoside do you need help dosing? tobramycin Indication: Sepsis - Urinary Tract Infection
) ertapenem (INVANZ) 1 g IV	
[] ertapenem (INVanz) IV	1 g, intravenous, every 24 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 ma be administered per Y-site protocols. IF the ordered agents are NOT Y 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
<ul> <li>Optional IV Antibiotic Addition - tobramycin ( mg/kg IV</li> </ul>	(TOBREX) 7
[] 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 - Urinary Tract Infection
) ertapenem (INVANZ) 1 g in lidocaine (PF) intraMUSCULAR	
[] ertapenem in lidocaine PF (INVanz) intraMUSCULAR	<ul> <li>1 g, intramuscular, every 24 hours</li> <li>Intramuscular route selected because no IV access available.</li> <li>Administer dose by deep IM into large muscle mass (e.g. gluteal muscles or lateral part of the thigh).</li> <li>DO NOT GIVE IM ertapenem INTRAVENOUSLY! (Solution contains lidocaine). Administer IM ertapenem within 1 hr of reconstitution!</li> <li>Reason for Therapy: Bacterial Infection Suspected</li> <li>IM Route Selection: I have opted to select the IM route because IV access could not be established</li> <li>Indication: Sepsis</li> <li>Recommendation: Sepsis: Recommended duration is dependent upon patient's clinical response and source identification</li> </ul>

[] 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 - Urinary Tract Infection
) meropenem (MERREM) IV	
[] meropenem (MERREM) IV	1 g, intravenous, every 24 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
<ul> <li>Optional IV Antibiotic Addition - tobramycin (TO mg/kg IV</li> </ul>	OBREA) /
[] 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 - Urinary Tract Infection
) meropenem (MERREM) 1 g intraMUSCULAR [] meropenem (MERREM) intraMUSCULAR	Which aminoglycoside do you need help dosing? tobramycin

[] 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
[] Pharmacy consult to dose tobramycin	Indication: Sepsis Routine, Until discontinued, Starting S Which aminoglycoside do you need help dosing? tobramycin Indication: Sepsis - Urinary Tract Infection
Yes (Single Response)	
) aztreonam (AZACTAM) 2 g IV	
[] aztreonam (AZACTAM) 2 g IV	2 g, intravenous, every 8 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 ma be administered per Y-site protocols. IF the ordered agents are NOT Y 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 (T 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 Reason for Therapy: Bacterial Infection Suspected
[] Pharmacy consult to dose tobramycin	Indication: Sepsis STAT, Until discontinued, Starting S Which aminoglycoside do you need help dosing? tobramycin Indication: Sepsis - Urinary Tract Infection
) aztreonam (AZACTAM) intraMUSCULAR	
[] aztreonam (AZACTAM) intraMUSCULAR	2 g, intramuscular, every 8 hours 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 (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 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 - Urinary Tract Infection
Skin and Soft Tissue Infection - Uncomplicated Ce	

[

) No (Single Response)	
() cefTRIAxone (ROCEPHIN) 1 g IV + vancomyci	n IV 15
mg/kg	
[] cefTRIAxone (ROCEPHIN) IV	1 g, intravenous, for 30 Minutes, daily
	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
<ul> <li>vancomycin (VANCOCIN) IV + Pharmacy Cor Dose (Selection Required)</li> </ul>	nsult to
[] 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): 3
	Indication: Sepsis
	Recommendation: Sepsis: Recommended duration is dependent
) cefTRIAXone (ROCEPHIN) intraMUSCULAR x	upon patient's clinical response and source identification
) cefTRIAXone (ROCEPHIN) intraMUSCULAR x ceftriaxone (ROCEPHIN) IV + vancomycin 15 n	
[] cefTRIAXone (ROCEPHIN) intraMUSCULAR AND cefTRIAXone (ROCEPHIN) IV x 2 Days	
[] 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
	IM Route Selection: I have opted to select the IM route because IV
	access could not be established

[] cefTRIAxone (ROCEPHIN) IV	1 g, intravenous, for 30 Minutes, daily, Starting S+1 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 Cor Dose (Selection Required)	
[] vancomycin (VANCOCIN)	15 mg/kg, intravenous, every 12 hours, For 3 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): 3 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 (Z 600 mg IV	YVOX)
[] cefTRIAxone (ROCEPHIN) IV	1 g, intravenous, for 30 Minutes, 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

[] linezolid in dextrose 5% (ZYVOX) IVPB	600 mg, intravenous, for 60 Minutes, 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
() cefTRIAXone (ROCEPHIN) intraMUSCULAR x	
ceftriaxone (ROCEPHIN) IV + linezolid 600 mg [] cefTRIAXone (ROCEPHIN) intraMUSCULAR AND cefTRIAXone (ROCEPHIN) IV x 2 Days	
[] 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 IM Route Selection: I have opted to select the IM route because IV access could not be established
[] cefTRIAxone (ROCEPHIN) IV	1 g, intravenous, for 30 Minutes, daily, Starting S+1 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
<ul> <li>[] linezolid in dextrose 5% (ZYVOX) 600 mg/300 mL IVPB</li> </ul>	600 mg, intravenous, for 60 Minutes, daily 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: Recommended duration is dependent upon patiently administer and assume identification
Skin and Soft Tissue Infection - Complicated (necro fasciitis, gangrene, diabetic foot) (Single Response)	
Does your patient have a SEVERE penicillin AND/C	
<ul> <li>No SEVERE Penicillin OR Vancomycin Allergy</li> <li>[] piperacillin-tazobactam (ZOSYN) 4.5 g IV + van 15 mg/kg IV (NOT HMW)</li> </ul>	comycin

[] piperacillin-tazobactam (ZOSYN) IV	3.375 g, intravenous, for .5 Hours, every 6 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
[] vancomycin (VANCOCIN) IV + Pharmacy Cons Dose (Selection Required)	sult to
[] 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 STAT, Until discontinued, Starting S
[] Pharmacy consult to manage vancomycin	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, every 8 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
] 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
	When multiple antimicrobial agents are ordered, you may administer these immediately at the SAME TIME via different IV sites. Do not wait for the first antibiotic to infuse. If agents are Y-site compatible, they may be administered per Y-site protocols. IF the ordered agents are NOT Y 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
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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
<ul> <li>Optional Adjunct: clindamycin (CLEOCIN)</li> <li>900 mg IV</li> </ul>	900 mg, intravenous, for 30 Minutes, every 8 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 wa for the first antibiotic to infuse. If agents are Y-site compatible, they m be administered per Y-site protocols. IF the ordered agents are NOT site compatible, then administer the Broad-spectrum antibiotic first. Refer to available Y site compatibility information and determination o broad-spectrum antibiotic selection chart. Reason for Therapy: Bacterial Infection Suspected Indication: Sepsis
SEVERE Penicillin Allergy (Single Response)	
aztreonam (AZACTAM) 2 g IV + tobramycin (T0 mg/kg IV + vancomycin 15 mg/kg IV + clindamy (CLEOCIN) 600 mg IV	
] aztreonam (AZACTAM) IV	2 g, intravenous, every 8 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 wa
	for the first antibiotic to infuse. If agents are Y-site compatible, they m be administered per Y-site protocols. IF the ordered agents are NOT site compatible, then administer the Broad-spectrum antibiotic first.
	Refer to available Y site compatibility information and determination o
	broad-spectrum antibiotic selection chart. Reason for Therapy: Bacterial Infection Suspected
	Indication: Sepsis

[] 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
[] Pharmacy consult to dose tobramycin	Indication: Sepsis 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 Cor Dose (Selection Required)	
[] vancomycin (VANCOCIN)	15 mg/kg, intravenous, every 12 hours
	Classification: Narrow Spectrum Antibiotic
Image: Pharmacy consult to manage vancomycin	<ul> <li>When multiple antimicrobial agents are ordered, you may administer these immediately at the SAME TIME via different IV sites. Do not wait for the first antibiotic to infuse. If agents are Y-site compatible, they may be administered per Y-site protocols. IF the ordered agents are NOT Y site compatible, then administer the Broad-spectrum antibiotic first. Refer to available Y site compatibility information and determination of broad-spectrum antibiotic selection chart.</li> <li>Reason for Therapy: Bacterial Infection Suspected Indication: Sepsis</li> <li>Recommendation: Sepsis: Recommended duration is dependent upon patient's clinical response and source identification</li> <li>STAT, Until discontinued, Starting S</li> <li>Reason for Therapy (Days): Indication: Sepsis</li> <li>Recommendation: Sepsis: Recommended duration is dependent upon patient's clinical response and source identification</li> </ul>
[] clindamycin (CLEOCIN) IV	900 mg, intravenous, for 30 Minutes, every 8 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 ma be administered per Y-site protocols. IF the ordered agents are NOT Y 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) IV	2 g, intravenous, every 8 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
[] 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
<ul> <li>vancomycin (VANCOCIN) IV + Pharmacy Cor Dose (Selection Required)</li> </ul>	
[] 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, every 6 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
<ul> <li>aztreonam (AZACTAM) 2 g intraMUSCULAR + tobramycin (TOBREX) 7 mg/kg IV + vancomyc mg/kg IV + clindamycin (CLEOCIN) 600 mg IV</li> </ul>	
[] aztreonam (AZACTAM) intraMUSCULAR	2 g, intramuscular, every 8 hours (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 Cor Dose (Selection Required)	
[] vancomycin (VANCOCIN)	15 mg/kg, intravenous, every 12 hours Classification: Narrow Spectrum Antibiotic
	<ul> <li>When multiple antimicrobial agents are ordered, you may administer these immediately at the SAME TIME via different IV sites. Do not wait for the first antibiotic to infuse. If agents are Y-site compatible, they may be administered per Y-site protocols. IF the ordered agents are NOT Y site compatible, then administer the Broad-spectrum antibiotic first. Refer to available Y site compatibility information and determination of broad-spectrum antibiotic selection chart.</li> <li>Reason for Therapy: Bacterial Infection Suspected Indication: Sepsis</li> <li>Recommendation: Sepsis: Recommended duration is dependent upon patient's clinical response and source identification</li> </ul>
[] 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, every 8 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
<ul> <li>aztreonam (AZACTAM) 2 g intraMUSCULAR + tobramycin (TOBREX) 7 mg/kg IV + vancomyci mg/kg IV + metroNIDAZOLE (FLAGYL) 500 mg</li> </ul>	n 15
[] aztreonam (AZACTAM) intraMUSCULAR	2 g, intramuscular, every 8 hours 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	y 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 agent are NOT Y 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 Cor	
Dose (Selection Required)           []         vancomycin (VANCOCIN) IV	15 mg/kg, intravenous, every 12 hours Classification: Broad Spectrum Antibiotic
	<ul> <li>When multiple antimicrobial agents are ordered, you may administer these immediately at the SAME TIME via different IV sites. Do not wait for the first antibiotic to infuse. If agents are Y-site compatible, they may be administered per Y-site protocols. IF the ordered agents are NOT Y site compatible, then administer the Broad-spectrum antibiotic first. Refer to available Y site compatibility information and determination of broad-spectrum antibiotic selection chart.</li> <li>Reason for Therapy: Bacterial Infection Suspected Indication: Sepsis</li> <li>Recommendation: Sepsis: Recommended duration is dependent upon patient's clinical response and source identification</li> </ul>
[] 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, every 6 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
) SEVERE Vancomycin Allergy	
<ul> <li>[] piperacillin-tazobactam (ZOSYN) 4.5 g IV + lin (ZYVOX) 600 mg IV (NOT HMW)</li> </ul>	ezolid
[] piperacillin-tazobactam (ZOSYN) IV	4.5 g, intravenous, for .5 Hours, every 6 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
[] linezolid in dextrose 5% (ZYVOX) IVPB	patient's clinical response and source identification 600 mg, intravenous, for 60 Minutes, 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 wai for the first antibiotic to infuse. If agents are Y-site compatible, they ma be administered per Y-site protocols. IF the ordered agents are NOT Y 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 Adjunct: clindamycin (CLEOCIN) 900 mg IV	900 mg, intravenous, for 30 Minutes, every 8 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 wai for the first antibiotic to infuse. If agents are Y-site compatible, they may be administered per Y-site protocols. IF the ordered agents are NOT Y 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

(ZYVOX) 600 mg IV (HMW Only)

[] piperacillin-tazobactam (ZOSYN) EI IV	4.5 g, intravenous, for 4 Hours, every 8 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
[] linezolid in dextrose 5% (ZYVOX) IVPB	600 mg, intravenous, for 60 Minutes, 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
<ul> <li>Optional Adjunct: clindamycin (CLEOCIN) 900 mg IV</li> </ul>	900 mg, intravenous, for 30 Minutes, every 8 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
) SEVERE Penicillin AND Vancomycin Allergy (Si Response)	Indication: Sepsis
<ul> <li>aztreonam (AZACTAM) 2 g IV + tobramycin (T mg/kg IV + linezolid (ZYVOX) 600 mg IV + cline</li> </ul>	
(CLEOCIN) 600 mg IV	2 g, intravenous, every 8 hours
[] aztreonam (AZACTAM) IV	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 apartrum antibiatic calaction abort
	broad-spectrum antibiotic selection chart.
	Reason for Therapy: Bacterial Infection Suspected Indication: Sepsis

[] 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
[] linezolid in dextrose 5% (ZYVOX) IVPB	600 mg, intravenous, for 60 Minutes, 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
[] clindamycin (CLEOCIN) IV	900 mg, intravenous, for 30 Minutes, every 8 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
) aztreonam (AZACTAM) 2 g IV + tobramycin (To mg/kg IV + linezolid (ZYVOX) 600 mg IV + metroNIDAZOLE (FLAGYL) 500 mg IV	OBREX) 7
[] aztreonam (AZACTAM) IV	2 g, intravenous, every 8 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

[] 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
[] linezolid in dextrose 5% (ZYVOX) IVPB	600 mg, intravenous, for 60 Minutes, 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
[] metroNIDAZOLE (FLAGYL) IV	500 mg, intravenous, every 6 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
) aztreonam (AZACTAM) 2 g intraMUSCULAR + tobramycin (TOBREX) 7 mg/kg IV + linezolid (ZY 600 mg IV + clindamycin (CLEOCIN) 600 mg IV	/VOX)
[] aztreonam (AZACTAM) intraMUSCULAR	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 Indication: Sepsis IM Route Selection: I have opted to select the IM route because IV
[] tobramycin (TOBREX) 7 mg/kg IV	IM Route Selection: I have opted to select the IM route because IV access could not be established

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
Routine, Until discontinued, Starting S Which aminoglycoside do you need help dosing? tobramycin Indication: Sepsis - Complicated Skin and Soft Tissue Infection
600 mg, intravenous, for 60 Minutes, 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 600 mg, intravenous, for 30 Minutes, every 8 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
⊦ ZYVOX) ng IV
2 g, intramuscular, every 8 hours 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 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 agent are NOT Y 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
[] linezolid in dextrose 5% (ZYVOX) IVPB	600 mg, intravenous, for 60 Minutes, 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 ma be administered per Y-site protocols. IF the ordered agents are NOT Y 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
[] metroNIDAZOLE (FLAGYL) IV	patient's clinical response and source identification 500 mg, intravenous, every 6 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
Sepsis of Unknown Source or IV Catheter-Related	
Infection (Single Response)	P vancomvoin allorav2
Does your patient have a SEVERE penicillin AND/O	
() No SEVERE Penicillin OR Vancomycin Allergy (S	ingle
Response)	

[] ceFEPime (MAXIPIME) IV	2 g, intravenous, every 8 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 ma be administered per Y-site protocols. IF the ordered agents are NOT Y 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
<ul> <li>vancomycin (VANCOCIN) IV + Pharmacy Cor Dose (Selection Required)</li> </ul>	
[] 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
[] Optional IV Antibiotic Addition - tobramycin (T	upon patient's clinical response and source identification OBREX) 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 of Unknown Source or IV Catheter-Related Infection

15 mg/kg IV (NOT HMW, HMWB)

[] piperacillin-tazobactam (ZOSYN) IV	4.5 g, intravenous, every 6 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 ma be administered per Y-site protocols. IF the ordered agents are NOT Y 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
<ul> <li>vancomycin (VANCOCIN) IV + Pharmacy Con Dose (Selection Required)</li> </ul>	sult to
[] 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
<ul> <li>Optional IV Antibiotic Addition - tobramycin (TO mg/kg IV</li> </ul>	upon patient's clinical response and source identification DBREX) 7
[] 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 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 (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	4.5 g, intravenous, for 4 Hours, every 8 hours, Starting H+6 Hours
every 8 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
] vancomycin (VANCOCIN) IV + Pharmacy Con Dose (Selection Required)	isult to
[] 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
[] Pharmacy consult to manage vancomycin	determination of broad-spectrum antibiotic selection chart.
	Reason for Therapy:
	Indication: Sepsis STAT, Until discontinued, Starting S
	Reason for Therapy:
	Duration of Therapy (Days):
	Indication: Sepsis of Unknown Source or IV Catheter-Related
] Adjunct Antibiotics - amikacin (AMIKIN) 15 mg	Infection I/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 agent
	are NOT Y 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, every 24 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. 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:
[] 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 + vancor mg/kg IV	
[] meropenem (MERREM) IV	500 mg, intravenous, every 6 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 Consult to

[] 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
[] Optional IV Antibiotic Addition - tobramycin (T	OBREX) 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 agent are NOT Y 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 IV	
[] cefepime (MAXIPIME) IM	<ul> <li>2 g, intramuscular, every 8 hours</li> <li>Intramuscular route selected because no IV access available.</li> <li>Administer dose by deep IM into large muscle mass (e.g. gluteal muscles or lateral part of the thigh).</li> <li>Reason for Therapy: Bacterial Infection Suspected</li> <li>IM Route Selection: I have opted to select the IM route because IV access could not be established</li> <li>Indication: Sepsis</li> <li>Recommendation: Sepsis: Recommended duration is dependent upon patient's clinical response and source identification</li> </ul>

[] 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
] Optional IV Antibiotic Addition - tobramycin (T	
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
[] Pharmacy consult to dose tobramycin	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
	Routine, Until discontinued, Starting S
	Which aminoglycoside do you need help dosing? tobramycin Indication: Sepsis of Unknown Source or IV Catheter-Related
	Infection
meropenem (MERREM) 500 mg intraMUSCUL/ vancomycin 15 mg/kg IV	
] meropenem (MERREM) intraMUSCULAR	0.5 g, intramuscular, every 6 hours
	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 upor
	patient's clinical response and source identification

[] 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
[] Optional IV Antibiotic Addition - tobramycin (	
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 entimicrobial egents are ordered, you may administer
	When multiple antimicrobial agents are ordered, you may administer these immediately at the SAME TIME via different IV sites. Do not
	wait for the first antibiotic to infuse. If agents are Y-site compatible,
	they may be administered per Y-site protocols. IF the ordered agents
	are NOT Y 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
	meetion
SEVERE Penicillin Allergy (Single Response)	
	n - anaphylaxis, bronchospasm, angioedema, urticaria)
(i.e. Type 1 immediate hypersensitivity reaction ) aztreonam (AZACTAM) 2 g IV + tobramycin (7	n - anaphylaxis, bronchospasm, angioedema, urticaria)
<ul> <li>(i.e. Type 1 immediate hypersensitivity reaction</li> <li>aztreonam (AZACTAM) 2 g IV + tobramycin (Tmg/kg IV + vancomycin 15 mg/kg IV</li> </ul>	n - anaphylaxis, bronchospasm, angioedema, urticaria) TOBREX) 7
(i.e. Type 1 immediate hypersensitivity reaction ) aztreonam (AZACTAM) 2 g IV + tobramycin (7	n - anaphylaxis, bronchospasm, angioedema, urticaria) TOBREX) 7 2 g, intravenous, every 8 hours
<ul> <li>(i.e. Type 1 immediate hypersensitivity reaction</li> <li>aztreonam (AZACTAM) 2 g IV + tobramycin (Tmg/kg IV + vancomycin 15 mg/kg IV</li> </ul>	n - anaphylaxis, bronchospasm, angioedema, urticaria) TOBREX) 7
<ul> <li>(i.e. Type 1 immediate hypersensitivity reaction</li> <li>aztreonam (AZACTAM) 2 g IV + tobramycin (Tmg/kg IV + vancomycin 15 mg/kg IV</li> </ul>	n - anaphylaxis, bronchospasm, angioedema, urticaria) OBREX) 7 2 g, intravenous, every 8 hours Classification: Broad Spectrum Antibiotic
<ul> <li>(i.e. Type 1 immediate hypersensitivity reaction</li> <li>aztreonam (AZACTAM) 2 g IV + tobramycin (Tmg/kg IV + vancomycin 15 mg/kg IV</li> </ul>	<ul> <li>n - anaphylaxis, bronchospasm, angioedema, urticaria)</li> <li>OBREX) 7</li> <li>2 g, intravenous, every 8 hours Classification: Broad Spectrum Antibiotic</li> <li>When multiple antimicrobial agents are ordered, you may administer</li> </ul>
<ul> <li>(i.e. Type 1 immediate hypersensitivity reaction</li> <li>aztreonam (AZACTAM) 2 g IV + tobramycin (Tmg/kg IV + vancomycin 15 mg/kg IV</li> </ul>	<ul> <li>n - anaphylaxis, bronchospasm, angioedema, urticaria)</li> <li>OBREX) 7</li> <li>2 g, intravenous, every 8 hours Classification: Broad Spectrum Antibiotic</li> <li>When multiple antimicrobial agents are ordered, you may administer these immediately at the SAME TIME via different IV sites. Do not wait</li> </ul>
<ul> <li>(i.e. Type 1 immediate hypersensitivity reaction</li> <li>aztreonam (AZACTAM) 2 g IV + tobramycin (Tmg/kg IV + vancomycin 15 mg/kg IV</li> </ul>	<ul> <li>n - anaphylaxis, bronchospasm, angioedema, urticaria)</li> <li><sup>¬</sup>OBREX) 7</li> <li><sup>2</sup> g, intravenous, every 8 hours Classification: Broad Spectrum Antibiotic</li> <li>When multiple antimicrobial agents are ordered, you may administer these immediately at the SAME TIME via different IV sites. Do not wait for the first antibiotic to infuse. If agents are Y-site compatible, they ma</li> </ul>
<ul> <li>(i.e. Type 1 immediate hypersensitivity reaction</li> <li>aztreonam (AZACTAM) 2 g IV + tobramycin (Tmg/kg IV + vancomycin 15 mg/kg IV</li> </ul>	<ul> <li>n - anaphylaxis, bronchospasm, angioedema, urticaria)</li> <li><sup>¬</sup>OBREX) 7</li> <li><sup>2</sup> g, intravenous, every 8 hours Classification: Broad Spectrum Antibiotic</li> <li>When multiple antimicrobial agents are ordered, you may administer these immediately at the SAME TIME via different IV sites. Do not wait for the first antibiotic to infuse. If agents are Y-site compatible, they ma be administered per Y-site protocols. IF the ordered agents are NOT Y</li> </ul>
<ul> <li>(i.e. Type 1 immediate hypersensitivity reaction</li> <li>aztreonam (AZACTAM) 2 g IV + tobramycin (Tmg/kg IV + vancomycin 15 mg/kg IV</li> </ul>	<ul> <li>n - anaphylaxis, bronchospasm, angioedema, urticaria)</li> <li>OBREX) 7</li> <li>2 g, intravenous, every 8 hours Classification: Broad Spectrum Antibiotic</li> <li>When multiple antimicrobial agents are ordered, you may administer these immediately at the SAME TIME via different IV sites. Do not wait for the first antibiotic to infuse. If agents are Y-site compatible, they ma be administered per Y-site protocols. IF the ordered agents are NOT Y site compatible, then administer the Broad-spectrum antibiotic first.</li> </ul>
<ul> <li>(i.e. Type 1 immediate hypersensitivity reaction</li> <li>aztreonam (AZACTAM) 2 g IV + tobramycin (Tmg/kg IV + vancomycin 15 mg/kg IV</li> </ul>	<ul> <li>n - anaphylaxis, bronchospasm, angioedema, urticaria)</li> <li>OBREX) 7</li> <li>2 g, intravenous, every 8 hours Classification: Broad Spectrum Antibiotic</li> <li>When multiple antimicrobial agents are ordered, you may administer these immediately at the SAME TIME via different IV sites. Do not wait for the first antibiotic to infuse. If agents are Y-site compatible, they ma be administered per Y-site protocols. IF the ordered agents are NOT Y site compatible, then administer the Broad-spectrum antibiotic first.</li> </ul>
<ul> <li>(i.e. Type 1 immediate hypersensitivity reaction</li> <li>aztreonam (AZACTAM) 2 g IV + tobramycin (Tmg/kg IV + vancomycin 15 mg/kg IV</li> </ul>	<ul> <li>n - anaphylaxis, bronchospasm, angioedema, urticaria)</li> <li>TOBREX) 7</li> <li>2 g, intravenous, every 8 hours Classification: Broad Spectrum Antibiotic</li> <li>When multiple antimicrobial agents are ordered, you may administer these immediately at the SAME TIME via different IV sites. Do not wait for the first antibiotic to infuse. If agents are Y-site compatible, they ma be administered per Y-site protocols. IF the ordered agents are NOT Y site compatible, then administer the Broad-spectrum antibiotic first. Refer to available Y site compatibility information and determination of</li> </ul>

[] 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 appartum antibiotic selection abort
	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
] vancomycin (VANCOCIN) IV + Pharmacy Con 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
	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 of Unknown Source or IV Catheter-Related Infection
	Indication: Sepsis Recommendation: Sepsis: Recommended duration is dependent upon patient's clinical response and source identification
<ul> <li>aztreonam (AZACTAM) 2 g intraMUSCULAR + tobramycin (TOBREX) 7 mg/kg IV + vancomyci mg/kg IV</li> </ul>	
] aztreonam (AZACTAM) intraMUSCULAR	2 g, intramuscular, every 8 hours 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
] tobramycin (TOBREX) 7 mg/kg IV	access could not be established

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
Routine, Until discontinued, Starting S Which aminoglycoside do you need help dosing? tobramycin Indication: Sepsis of Unknown Source or IV Catheter-Related Infection
nsult to
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 Indication: Sepsis: Recommended duration is dependent
upon patient's clinical response and source identification
<ul> <li>STAT, Until discontinued, Starting S</li> <li>Reason for Therapy: Bacterial Infection Suspected</li> <li>Duration of Therapy (Days):</li> <li>Indication: Sepsis of Unknown Source or IV Catheter-Related</li> <li>Infection</li> <li>Indication: Sepsis</li> <li>Recommendation: Sepsis: Recommended duration is dependent</li> <li>upon patient's clinical response and source identification</li> </ul>
)
ncomycin may be associated with an increased incidence of acute kidney
V
2 g, intravenous, every 8 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

[] linezolid in dextrose 5% (ZYVOX) IVPB	600 mg, intravenous, for 60 Minutes, 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
<ul> <li>Optional IV Antibiotic Addition - tobramycin (T mg/kg IV</li> </ul>	OBREX) 7
[] 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 of Unknown Source or IV Catheter-Related Infection
<ul> <li>() piperacillin-tazobactam (ZOSYN) 4.5 g IV + line (ZYVOX) 600 mg IV (NOT HMW)</li> </ul>	
[] piperacillin-tazobactam (ZOSYN) IV	4.5 g, intravenous, every 6 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
[] linezolid in dextrose 5% (ZYVOX) IVPB	600 mg, intravenous, for 60 Minutes, 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
ed on 3/9/2023 at 3:06 PM from TST Environment	patient's clinical response and source identification Page 61 of 99

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 of Unknown Source or IV Catheter-Related Infection
) piperacillin-tazobactam (ZOSYN) EI 4.5 g IV - (ZYVOX) 600 mg IV ( HMW Only)	+ linezolid
[] piperacillin-tazobactam (ZOSYNI) EI IV	4.5 g, intravenous, for 4 Hours, every 8 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 wa for the first antibiotic to infuse. If agents are Y-site compatible, they m be administered per Y-site protocols. IF the ordered agents are NOT site compatible, then administer the Broad-spectrum antibiotic first. Refer to available Y site compatibility information and determination o broad-spectrum antibiotic selection chart. Reason for Therapy: Bacterial Infection Suspected Indication: Sepsis
	Recommendation: Sepsis: Recommended duration is dependent upo patient's clinical response and source identification
[] linezolid in dextrose 5% (ZYVOX) IVPB	600 mg, intravenous, for 60 Minutes, 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

[] 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 of Unknown Source or IV Catheter-Related Infection
() meropenem (MERREM) 500 mg IV + linezolid (2	
600 mg IV [] meropenem (MERREM) IV	500 mg, intravenous, every 6 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
[] linezolid in dextrose 5% (ZYVOX) IVPB	600 mg, intravenous, for 60 Minutes, 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
Optional IV Antibiotic Addition - tobramycin (TC	Recommendation: Sepsis: Recommended duration is dependent upon patient's clinical response and source identification
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
ed on 3/9/2023 at 3:06 PM from TST Environment	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 + linezolid (Z mg IV	
[] cefepime (MAXIPIME) IM	<ul> <li>2 g, intramuscular, every 8 hours</li> <li>Intramuscular route selected because no IV access available.</li> <li>Administer dose by deep IM into large muscle mass (e.g. gluteal muscles or lateral part of the thigh).</li> <li>Reason for Therapy: Bacterial Infection Suspected</li> <li>IM Route Selection: I have opted to select the IM route because IV access could not be established</li> <li>Indication: Sepsis</li> <li>Recommendation: Sepsis: Recommended duration is dependent upon patient's clinical response and source identification</li> </ul>
[] linezolid in dextrose 5% (ZYVOX) IVPB	600 mg, intravenous, for 60 Minutes, every 12 hours 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 mg/kg IV	(TOBREX) 7
[] 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 of Unknown Source or IV Catheter-Related Infection
) meropenem (MERREM) 500 mg intraMUSCU linezolid (ZYVOX) 600 mg IV	
[] meropenem (MERREM) intraMUSCULAR	<ul> <li>0.5 g, intramuscular, every 6 hours</li> <li>Administer dose by deep IM into large muscle mass (e.g. gluteal muscles or lateral part of the thigh)</li> <li>Reason for Therapy: Bacterial Infection Suspected</li> <li>IM Route Selection: I have opted to select the IM route because IV access could not be established</li> <li>Indication: Sepsis</li> <li>Recommendation: Sepsis: Recommended duration is dependent upon patient's clinical response and source identification</li> </ul>

[] linezolid in dextrose 5% (ZYVOX) IVPB	600 mg, intravenous, for 60 Minutes, 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
<ul> <li>Optional IV Antibiotic Addition - tobramycin ( mg/kg IV</li> </ul>	
[] 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 of Unknown Source or IV Catheter-Related Infection
) SEVERE Penicillin AND Vancomycin Allergy ( Response)	Single
	on - anaphylaxis, bronchospasm, angioedema, urticaria)
() aztreonam (AZACTAM) 2 g IV + tobramycin ( mg/kg IV + linezolid (ZYVOX) 600 mg IV	TOBREX) 7
[] aztreonam (AZACTAM) IV	2 g, intravenous, every 8 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

[] 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 of Unknown Source or IV Catheter-Related Infection
[] linezolid in dextrose 5% (ZYVOX) IVPB	600 mg, intravenous, for 60 Minutes, 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 ma be administered per Y-site protocols. IF the ordered agents are NOT Y 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
<ul> <li>aztreonam (AZACTAM) 2 g intraMUSCULAR + tobramycin (TOBREX) 7 mg/kg IV + linezolid (2 600 mg IV</li> </ul>	
aztreonam (AZACTAM) intraMUSCULAR	2 g, intramuscular, every 8 hours 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
[] tobramycin (TOBREX) 7 mg/kg IV	access could not be established
[] 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
	<ul> <li>When multiple antimicrobial agents are ordered, you may administer these immediately at the SAME TIME via different IV sites. Do not wait for the first antibiotic to infuse. If agents are Y-site compatible, they may be administered per Y-site protocols. IF the ordered agents are NOT Y site compatible, then administer the Broad-spectrum antibiotic first. Refer to available Y site compatibility information and determination of broad-spectrum antibiotic selection chart.</li> <li>Reason for Therapy: Bacterial Infection Suspected Indication: Sepsis</li> </ul>
[] 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

[] linezolid in dextrose 5% (ZYVOX) IVPB	600 mg, intravenous, for 60 Minutes, 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 ma
	be administered per Y-site protocols. IF the ordered agents are NOT Y
	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
Intra-Abdominal Infections (Single Response)	
Sources: Complicated Intra-abdominal Infection G	producing organism or recent prolonged treatment with zosyn or cefepime. Guidelines. Clinical Infectious Diseases 2010; 50:133-64. ANTIBIOTIC 2016. Houston Methodist Hospital/Department of Laboratory
Does your patient have a SEVERE penicillin allerg	gy?
) No SEVERE Penicillin OR Vancomycin Allergy	
[] ceFEPime + metroNIDAZOLE (FLAGYL) OR	
piperacillin-tazobactam (ZOSYN) IV OR mero	penem
(MERREM) IV (Single Response) (Selection	
() ceFEPime 2 g IV + metroNIDAZOLE (FLAG)	
[] ceFEPime (MAXIPIME) IV	2 g, intravenous, every 8 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 agent
	are NOT Y 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, every 8 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
	these immediately at the SAME TIME via different IV sites. Do not wait for the first antibiotic to infuse. If agents are Y-site compatible,
	wait for the first antibiotic to infuse. If agents are Y-site compatible, they may be administered per Y-site protocols. IF the ordered agent
	wait for the first antibiotic to infuse. If agents are Y-site compatible, they may be administered per Y-site protocols. IF the ordered agent are NOT Y site compatible, then administer the Broad-spectrum
	wait for the first antibiotic to infuse. If agents are Y-site compatible, they may be administered per Y-site protocols. IF the ordered agent are NOT Y site compatible, then administer the Broad-spectrum antibiotic first. Refer to available Y site compatibility information and
	wait for the first antibiotic to infuse. If agents are Y-site compatible, they may be administered per Y-site protocols. IF the ordered agent are NOT Y site compatible, then administer the Broad-spectrum antibiotic first. Refer to available Y site compatibility information and determination of broad-spectrum antibiotic selection chart.
	wait for the first antibiotic to infuse. If agents are Y-site compatible, they may be administered per Y-site protocols. IF the ordered agent are NOT Y site compatible, then administer the Broad-spectrum antibiotic first. Refer to available Y site compatibility information and

[] cefepime (MAXIPIME) IM	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
[] metronidazole (FLAGYL) IV	500 mg, intravenous, every 8 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
() piperacillin-tazobactam (ZOSYN) 4.5 g IV	
[] piperacillin-tazobactam (ZOSYN) IV	4.5 g, intravenous, every 6 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
() If Pseudomonas Suspected - piperacillin-tazol	
(ZOSYN) 4.5 g IV	-
[] piperacillin-tazobactam (ZOSYN) 4.5 g IV	4.5 g, intravenous, for .5 Hours, once, For 1 Doses
Once	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, every 8 hours, Starting H+6 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
() meropenem (MERREM) 500 mg IV	
[] meropenem (MERREM) IV	500 mg, intravenous, every 6 hours Reason for Therapy: Bacterial Infection Suspected Indication: Sepsis Recommendation: Sepsis: Recommended duration is dependent upon patient's clinical response and source identification
() meropenem (MERREM) 500 mg intraMUSCUL	
[] meropenem (MERREM) injection	<ul> <li>0.5 g, intramuscular, every 6 hours</li> <li>Intramuscular route selected because no IV access available.</li> <li>Administer dose by deep IM into large muscle mass (e.g. gluteal muscles or lateral part of the thigh).</li> <li>Reason for Therapy: Bacterial Infection Suspected</li> <li>IM Route Selection: I have opted to select the IM route because IV access could not be established</li> <li>Indication: Sepsis</li> <li>Recommendation: Sepsis: Recommended duration is dependent</li> </ul>
	upon patient's clinical response and source identification
[] IF health-care associated, ADD - vancomycin (VANCOCIN) IV (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
<ul> <li>IF high risk or severe, consider antifungal covera fluconazole (DIFLUCAN) 400 mg IV</li> </ul>	
<ul> <li>IF high risk or severe, consider antifungal covera fluconazole (DIFLUCAN) 400 mg IV</li> <li>fluconazole (DIFLUCAN) IV</li> </ul>	400 mg, intravenous, for 60 Minutes, every 24 hours Reason for Therapy: Bacterial Infection Suspected Indication: Sepsis Recommendation: Sepsis: Recommended duration is dependent upon patient's clinical response and source identification
fluconazole (DIFLUCAN) 400 mg IV	Reason for Therapy: Bacterial Infection Suspected Indication: Sepsis

] aztreonam (AZACTAM) IV	2 g, intravenous, every 8 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 write for the first antibiation to infuse.
	wait for the first antibiotic to infuse. If agents are Y-site compatible, they may be administered per Y-site protocols. IF the ordered agents are NOT Y 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, every 8 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
<ul> <li>IF health-care associated, ADD - vancomycir</li> <li>IV (Selection Required)</li> </ul>	n 15 mg/kg
[] 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 antibiation to infuse.
	wait for the first antibiotic to infuse. If agents are Y-site compatible, they may be administered per Y-site protocols. IF the ordered agent are NOT Y 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
[] IF high risk or severe, consider antifungal cove fluconazole (DIFLUCAN) IV or micafungin (M)	erage:
IV (Single Response)	

() fluconazole (DIFLUCAN) IV	800 mg, intravenous, for 60 Minutes, every 24 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
() micafungin (MYCAMINE) IVPB (RESTRICTED)	100 mg, intravenous 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:
) aztreonam (AZACTAM) 2 g intraMUSCULAR + metroNIDAZOLE (FLAGYL) 500 mg IV	
[] aztreonam (AZACTAM) intraMUSCULAR	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 Indication: Sepsis IM Route Selection: I have opted to select the IM route because IV
[] metroNIDAZOLE (FLAGYL) IV	access could not be established 500 mg, intravenous, every 8 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 agent are NOT Y 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)	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 agent
	are NOT Y 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
] IF high risk or severe, consider antifungal cove	
fluconazole (DIFLUCAN) IV or micafungin (M)	
IV (Single Response)	,
Note: Use fluconazole (DIFLUCAN) only in pa	tients with absolutely no risk factors for C. glabrata or resistance
() fluconazole (DIFLUCAN) IV	800 mg, intravenous, for 60 Minutes, every 24 hours
	Classification: Narrow Spectrum Antibiotic
	When multiple entimicrobial accusts are endered your reavisition
	When multiple antimicrobial agents are ordered, you may administer
	these immediately at the SAME TIME via different IV sites. Do not wait for the first antibiotic to infuse. If agents are Y-site compatible,
	they may be administered per Y-site protocols. IF the ordered agents
	are NOT Y 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
() micafungin (MYCAMINE) IVPB	100 mg, intravenous
(RESTRICTED)	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
	these immediately at the SAME TIME via different IV sites. Do not wait for the first antibiotic to infuse. If agents are Y-site compatible,
	these immediately at the SAME TIME via different IV sites. Do not wait for the first antibiotic to infuse. If agents are Y-site compatible, they may be administered per Y-site protocols. IF the ordered agents are NOT Y site compatible, then administer the Broad-spectrum
	these immediately at the SAME TIME via different IV sites. Do not wait for the first antibiotic to infuse. If agents are Y-site compatible, they may be administered per Y-site protocols. IF the ordered agents are NOT Y site compatible, then administer the Broad-spectrum antibiotic first. Refer to available Y site compatibility information and
	these immediately at the SAME TIME via different IV sites. Do not wait for the first antibiotic to infuse. If agents are Y-site compatible, they may be administered per Y-site protocols. IF the ordered agents are NOT Y site compatible, then administer the Broad-spectrum antibiotic first. Refer to available Y site compatibility information and determination of broad-spectrum antibiotic selection chart.
	these immediately at the SAME TIME via different IV sites. Do not wait for the first antibiotic to infuse. If agents are Y-site compatible, they may be administered per Y-site protocols. IF the ordered agents are NOT Y 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
	these immediately at the SAME TIME via different IV sites. Do not wait for the first antibiotic to infuse. If agents are Y-site compatible, they may be administered per Y-site protocols. IF the ordered agents are NOT Y 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
	these immediately at the SAME TIME via different IV sites. Do not wait for the first antibiotic to infuse. If agents are Y-site compatible, they may be administered per Y-site protocols. IF the ordered agents are NOT Y 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
	<ul> <li>these immediately at the SAME TIME via different IV sites. Do not wait for the first antibiotic to infuse. If agents are Y-site compatible, they may be administered per Y-site protocols. IF the ordered agents are NOT Y site compatible, then administer the Broad-spectrum antibiotic first. Refer to available Y site compatibility information and determination of broad-spectrum antibiotic selection chart.</li> <li>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?</li> </ul>
	<ul> <li>these immediately at the SAME TIME via different IV sites. Do not wait for the first antibiotic to infuse. If agents are Y-site compatible, they may be administered per Y-site protocols. IF the ordered agents are NOT Y site compatible, then administer the Broad-spectrum antibiotic first. Refer to available Y site compatibility information and determination of broad-spectrum antibiotic selection chart.</li> <li>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?</li> <li>Reason for Therapy: Other</li> </ul>
	<ul> <li>these immediately at the SAME TIME via different IV sites. Do not wait for the first antibiotic to infuse. If agents are Y-site compatible, they may be administered per Y-site protocols. IF the ordered agents are NOT Y site compatible, then administer the Broad-spectrum antibiotic first. Refer to available Y site compatibility information and determination of broad-spectrum antibiotic selection chart.</li> <li>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?</li> <li>Reason for Therapy: Other Specify: Sepsis</li> </ul>
SEVERE Vancomvcin Allerov	<ul> <li>these immediately at the SAME TIME via different IV sites. Do not wait for the first antibiotic to infuse. If agents are Y-site compatible, they may be administered per Y-site protocols. IF the ordered agents are NOT Y site compatible, then administer the Broad-spectrum antibiotic first. Refer to available Y site compatibility information and determination of broad-spectrum antibiotic selection chart.</li> <li>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?</li> <li>Reason for Therapy: Other</li> </ul>
SEVERE Vancomycin Allergy ceFEPime + metroNIDAZOLE (FLAGYL) OR	<ul> <li>these immediately at the SAME TIME via different IV sites. Do not wait for the first antibiotic to infuse. If agents are Y-site compatible, they may be administered per Y-site protocols. IF the ordered agents are NOT Y site compatible, then administer the Broad-spectrum antibiotic first. Refer to available Y site compatibility information and determination of broad-spectrum antibiotic selection chart.</li> <li>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?</li> <li>Reason for Therapy: Other Specify: Sepsis</li> </ul>
	these immediately at the SAME TIME via different IV sites. Do not wait for the first antibiotic to infuse. If agents are Y-site compatible, they may be administered per Y-site protocols. IF the ordered agents are NOT Y 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:
ceFEPime + metroNIDAZOLE (FLAGYL) OR	these immediately at the SAME TIME via different IV sites. Do not wait for the first antibiotic to infuse. If agents are Y-site compatible, they may be administered per Y-site protocols. IF the ordered agents are NOT Y 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:

[] ceFEPime (MAXIPIME) IV	2 g, intravenous, every 8 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. 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, every 8 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
<ul> <li>() ceFEPime 2 g intraMUSCULAR + metroNIDAZ (FLAGYL) 500 mg IV</li> </ul>	OLE
[] cefepime (MAXIPIME) IM	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
[] metronidazole (FLAGYL) IV	500 mg, intravenous, every 8 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
() piperacillin-tazobactam (ZOSYN) 4.5 g IV	4.5 a intravanque avary 6 hours
[] piperacillin-tazobactam (ZOSYN) IV	4.5 g, intravenous, every 6 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
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<ul> <li>If Pseudomonas Suspected - piperacillin-tazob (ZOSYN) 4.5 g IV</li> </ul>	actam "Followed by" Linked Panel
<ul> <li>[] piperacillin-tazobactam (ZOSYN) 4.5 g IV Once</li> </ul>	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 agent are NOT Y 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, every 8 hours, Starting H+6 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 agent are NOT Y 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) 500 mg IV	
] meropenem (MERREM) IV	500 mg, intravenous, every 6 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 agent are NOT Y 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) 500 mg intraMUSCUL	
] meropenem (MERREM) injection	<ul> <li>0.5 g, intramuscular, every 6 hours</li> <li>Intramuscular route selected because no IV access available.</li> <li>Administer dose by deep IM into large muscle mass (e.g. gluteal muscles or lateral part of the thigh).</li> <li>Reason for Therapy: Bacterial Infection Suspected</li> <li>IM Route Selection: I have opted to select the IM route because IV access could not be established</li> <li>Indication: Sepsis</li> </ul>
	Recommendation: Sepsis: Recommended duration is dependent upon patient's clinical response and source identification

<ul> <li>IF health-care associated, ADD - linezolid in dextrose 5% (ZYVOX) IVPB</li> </ul>	600 mg, intravenous, for 60 Minutes, 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. Refe 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
[] IF high risk or severe, consider antifungal cov fluconazole (DIFLUCAN) 400 mg IV	
[] fluconazole (DIFLUCAN) IV	400 mg, intravenous, for 60 Minutes, every 24 hours Reason for Therapy: Bacterial Infection Suspected Indication: Sepsis
	Recommendation: Sepsis: Recommended duration is dependent upon
) SEVERE Penicillin AND Vancomycin Allergy ( Response)	patient's clinical response and source identification Single
<ul> <li>() aztreonam (AZACTAM) 2 g IV + metroNIDAZ (FLAGYL) 500 mg IV</li> </ul>	OLE
[] aztreonam (AZACTAM) IV	2 g, intravenous, every 8 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. Type of Therapy: New Anti-Infective Order Reason for Therapy: Bacterial Infection Suspected
	Indication: Sepsis
[] metroNIDAZOLE (FLAGYL) IV	500 mg, intravenous, every 8 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. Type of Therapy: New Anti-Infective Order Reason for Therapy: Bacterial Infection Suspected

[] IF health-care associated, ADD - linezolid in dextrose 5% (ZYVOX) IVPB	600 mg, intravenous, for 60 Minutes, 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
[] IF high risk or severe, consider antifungal cove fluconazole (DIFLUCAN) IV or micafungin (MY IV (Single Response)	rage:
	ients with absolutely no risk factors for C. glabrata or resistance
() fluconazole (DIFLUCAN) IV	800 mg, intravenous, for 60 Minutes, every 24 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
() micafungin (MYCAMINE) IVPB (RESTRICTED)	100 mg, intravenous 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:
() aztreonam (AZACTAM) 2 g intraMUSCULAR + metroNIDAZOLE (FLAGYL) 500 mg IV	
[] aztreonam (AZACTAM) intraMUSCULAR	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 Indication: Sepsis IM Route Selection: I have opted to select the IM route because IV access could not be established

[] metroNIDAZOLE (FLAGYL) IV	500 mg, intravenous, every 8 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. Type of Therapy: New Anti-Infective Order
	Reason for Therapy: Bacterial Infection Suspected
	Indication: Sepsis
<ul> <li>IF healthcare-associated, ADD - linezolid in dextrose 5% (ZYVOX) IVPB</li> </ul>	600 mg, intravenous, for 60 Minutes, 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 wai
	for the first antibiotic to infuse. If agents are Y-site compatible, they may be administered per Y-site protocols. IF the ordered agents are NOT Y
	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 high risk or severe, consider antifungal cov fluconazole (DIFLUCAN) IV or micafungin (M	erage:
IV (Single Response) Note: Use fluconazole (DIELUCAN) only in pa	atients with absolutely no risk factors for C. glabrata or resistance
() fluconazole (DIFLUCAN) IV	800 mg, intravenous, for 60 Minutes, every 24 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
	antipiotic first. Refer to available Y site compatibility information and
	antibiotic first. Refer to available Y site compatibility information and determination of broad-spectrum antibiotic selection chart.
	determination of broad-spectrum antibiotic selection chart. Per Med Staff Policy, R.Ph. will automatically renally dose this
	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.
	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
	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.
() micafungin (MYCAMINE) IVPB	<ul> <li>determination of broad-spectrum antibiotic selection chart.</li> <li>Per Med Staff Policy, R.Ph. will automatically renally dose this medication based on current SCr and CrCl values.</li> <li>Per Med Staff Policy, R.Ph. will automatically switch IV to equivalent PO dose when above approved criteria are satisfied:</li> <li>Reason for Therapy:</li> <li>100 mg, intravenous</li> </ul>
() micafungin (MYCAMINE) IVPB (RESTRICTED)	<ul> <li>determination of broad-spectrum antibiotic selection chart.</li> <li>Per Med Staff Policy, R.Ph. will automatically renally dose this medication based on current SCr and CrCl values.</li> <li>Per Med Staff Policy, R.Ph. will automatically switch IV to equivalent PO dose when above approved criteria are satisfied:</li> <li>Reason for Therapy:</li> <li>100 mg, intravenous</li> <li>Classification: Narrow Spectrum Antibiotic</li> </ul>
	<ul> <li>determination of broad-spectrum antibiotic selection chart.</li> <li>Per Med Staff Policy, R.Ph. will automatically renally dose this medication based on current SCr and CrCl values.</li> <li>Per Med Staff Policy, R.Ph. will automatically switch IV to equivalent PO dose when above approved criteria are satisfied:</li> <li>Reason for Therapy:</li> <li>100 mg, intravenous</li> <li>Classification: Narrow Spectrum Antibiotic</li> <li>When multiple antimicrobial agents are ordered, you may administer</li> </ul>
	<ul> <li>determination of broad-spectrum antibiotic selection chart.</li> <li>Per Med Staff Policy, R.Ph. will automatically renally dose this medication based on current SCr and CrCl values.</li> <li>Per Med Staff Policy, R.Ph. will automatically switch IV to equivalent PO dose when above approved criteria are satisfied:</li> <li>Reason for Therapy:</li> <li>100 mg, intravenous</li> <li>Classification: Narrow Spectrum Antibiotic</li> <li>When multiple antimicrobial agents are ordered, you may administer these immediately at the SAME TIME via different IV sites. Do not</li> </ul>
	<ul> <li>determination of broad-spectrum antibiotic selection chart.</li> <li>Per Med Staff Policy, R.Ph. will automatically renally dose this medication based on current SCr and CrCl values.</li> <li>Per Med Staff Policy, R.Ph. will automatically switch IV to equivalent PO dose when above approved criteria are satisfied:</li> <li>Reason for Therapy:</li> <li>100 mg, intravenous</li> <li>Classification: Narrow Spectrum Antibiotic</li> <li>When multiple antimicrobial agents are ordered, you may administer these immediately at the SAME TIME via different IV sites. Do not wait for the first antibiotic to infuse. If agents are Y-site compatible,</li> </ul>
	<ul> <li>determination of broad-spectrum antibiotic selection chart.</li> <li>Per Med Staff Policy, R.Ph. will automatically renally dose this medication based on current SCr and CrCl values.</li> <li>Per Med Staff Policy, R.Ph. will automatically switch IV to equivalent PO dose when above approved criteria are satisfied:</li> <li>Reason for Therapy:</li> <li>100 mg, intravenous</li> <li>Classification: Narrow Spectrum Antibiotic</li> <li>When multiple antimicrobial agents are ordered, you may administer these immediately at the SAME TIME via different IV sites. Do not wait for the first antibiotic to infuse. If agents are Y-site compatible,</li> </ul>
	<ul> <li>determination of broad-spectrum antibiotic selection chart.</li> <li>Per Med Staff Policy, R.Ph. will automatically renally dose this medication based on current SCr and CrCl values.</li> <li>Per Med Staff Policy, R.Ph. will automatically switch IV to equivalent PO dose when above approved criteria are satisfied:</li> <li>Reason for Therapy:</li> <li>100 mg, intravenous</li> <li>Classification: Narrow Spectrum Antibiotic</li> <li>When multiple antimicrobial agents are ordered, you may administer these immediately at the SAME TIME via different IV sites. Do not wait for the first antibiotic to infuse. If agents are Y-site compatible, they may be administered per Y-site protocols. IF the ordered agents are NOT Y site compatible, then administer the Broad-spectrum antibiotic first. Refer to available Y site compatibility information and</li> </ul>
	<ul> <li>determination of broad-spectrum antibiotic selection chart.</li> <li>Per Med Staff Policy, R.Ph. will automatically renally dose this medication based on current SCr and CrCl values.</li> <li>Per Med Staff Policy, R.Ph. will automatically switch IV to equivalent PO dose when above approved criteria are satisfied:</li> <li>Reason for Therapy:</li> <li>100 mg, intravenous</li> <li>Classification: Narrow Spectrum Antibiotic</li> <li>When multiple antimicrobial agents are ordered, you may administer these immediately at the SAME TIME via different IV sites. Do not wait for the first antibiotic to infuse. If agents are Y-site compatible, they may be administered per Y-site protocols. IF the ordered agents are NOT Y site compatible, then administer the Broad-spectrum antibiotic first. Refer to available Y site compatibility information and determination of broad-spectrum antibiotic selection chart.</li> </ul>
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	<ul> <li>determination of broad-spectrum antibiotic selection chart.</li> <li>Per Med Staff Policy, R.Ph. will automatically renally dose this medication based on current SCr and CrCl values.</li> <li>Per Med Staff Policy, R.Ph. will automatically switch IV to equivalent PO dose when above approved criteria are satisfied:</li> <li>Reason for Therapy:</li> <li>100 mg, intravenous</li> <li>Classification: Narrow Spectrum Antibiotic</li> <li>When multiple antimicrobial agents are ordered, you may administer these immediately at the SAME TIME via different IV sites. Do not wait for the first antibiotic to infuse. If agents are Y-site compatible, they may be administered per Y-site protocols. IF the ordered agents are NOT Y site compatible, then administer the Broad-spectrum antibiotic first. Refer to available Y site compatibility information and determination of broad-spectrum antibiotic selection chart.</li> <li>RESTRICTED to Infectious Diseases (ID), Solid Organ Transplant (SOT), Bone Marrow Transplant (BMT), and Hematology/Oncology</li> </ul>
	<ul> <li>determination of broad-spectrum antibiotic selection chart.</li> <li>Per Med Staff Policy, R.Ph. will automatically renally dose this medication based on current SCr and CrCl values.</li> <li>Per Med Staff Policy, R.Ph. will automatically switch IV to equivalent PO dose when above approved criteria are satisfied:</li> <li>Reason for Therapy:</li> <li>100 mg, intravenous</li> <li>Classification: Narrow Spectrum Antibiotic</li> <li>When multiple antimicrobial agents are ordered, you may administer these immediately at the SAME TIME via different IV sites. Do not wait for the first antibiotic to infuse. If agents are Y-site compatible, they may be administered per Y-site protocols. IF the ordered agents are NOT Y site compatible, then administer the Broad-spectrum antibiotic first. Refer to available Y site compatibility information and determination of broad-spectrum antibiotic selection chart.</li> <li>RESTRICTED to Infectious Diseases (ID), Solid Organ Transplant</li> </ul>
	<ul> <li>determination of broad-spectrum antibiotic selection chart.</li> <li>Per Med Staff Policy, R.Ph. will automatically renally dose this medication based on current SCr and CrCl values.</li> <li>Per Med Staff Policy, R.Ph. will automatically switch IV to equivalent PO dose when above approved criteria are satisfied:</li> <li>Reason for Therapy:</li> <li>100 mg, intravenous</li> <li>Classification: Narrow Spectrum Antibiotic</li> <li>When multiple antimicrobial agents are ordered, you may administer these immediately at the SAME TIME via different IV sites. Do not wait for the first antibiotic to infuse. If agents are Y-site compatible, they may be administered per Y-site protocols. IF the ordered agents are NOT Y site compatible, then administer the Broad-spectrum antibiotic first. Refer to available Y site compatibility information and determination of broad-spectrum antibiotic selection chart.</li> <li>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?</li> <li>Reason for Therapy: Other</li> </ul>
	<ul> <li>determination of broad-spectrum antibiotic selection chart.</li> <li>Per Med Staff Policy, R.Ph. will automatically renally dose this medication based on current SCr and CrCl values.</li> <li>Per Med Staff Policy, R.Ph. will automatically switch IV to equivalent PO dose when above approved criteria are satisfied:</li> <li>Reason for Therapy:</li> <li>100 mg, intravenous</li> <li>Classification: Narrow Spectrum Antibiotic</li> <li>When multiple antimicrobial agents are ordered, you may administer these immediately at the SAME TIME via different IV sites. Do not wait for the first antibiotic to infuse. If agents are Y-site compatible, they may be administered per Y-site protocols. IF the ordered agents are NOT Y site compatible, then administer the Broad-spectrum antibiotic first. Refer to available Y site compatibility information and determination of broad-spectrum antibiotic selection chart.</li> <li>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?</li> </ul>

Does your patient have a SEVERE penicillin allergy	?
() No SEVERE Penicillin OR Vancomycin Allergy (S Response)	Single
	f proven or suspected pneumococcal meningitis due to S. pneumoniae
<ul> <li>() cefTRIAXone (ROCEPHIN) 2 g IV + vancomycir mg/kg IV - For Patients LESS than 50 years old</li> </ul>	ח 15
[] cefTRIAxone (ROCEPHIN) IV	2 g, intravenous, for 30 Minutes, 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
<ul> <li>vancomycin (VANCOCIN) IV + Pharmacy Cons Dose (Selection Required)</li> </ul>	
[] 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
[] OPTIONAL Additional Therapies -	0.15 mg/kg, intravenous, once, For 1 Doses
<ul> <li>dexamethasone (DECADRON) IV</li> <li>() cefTRIAXone (ROCEPHIN) 2 g IV + vancomycir mg/kg IV + ampicillin 2 g IV - For Patients GREA than 50 years old</li> </ul>	
[] cefTRIAxone (ROCEPHIN) IV	2 g, intravenous, for 30 Minutes, 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

Dose (Selection Required)           I 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 agent
	are NOT Y 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
] ampicillin IV	2 g, intravenous, for 30 Minutes, every 4 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
] OPTIONAL Additional Therapies -	0.15 mg/kg, intravenous, once, For 1 Doses
dexamethasone (DECADRON) IV	Administer 15-20 minutes before 1st dose of antibiotics.
] OPTIONAL Additional Therapies - riFAMpin (RIFADIN) capsule	600 mg, oral, daily Reason for Therapy: Bacterial Infection Suspected
	Indication: Sepsis
cefTRIAXone (ROCEPHIN) 2 g intraMUSCUL/ vancomycin 15 mg/kg IV - For Patients LESS t	\R +
years old ] cefTRIAXone (ROCEPHIN) IM	2 g, intramuscular, every 12 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

[] 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 agent
	are NOT Y 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
[] OPTIONAL Additional Therapies -	upon patient's clinical response and source identification 0.15 mg/kg, intravenous, once, For 1 Doses
[] OPTIONAL Additional Therapies - dexamethasone (DECADRON) IV	Administer 15-20 minutes before 1st dose of antibiotics.
[] OPTIONAL Additional Therapies - riFAMpin	600 mg, oral, daily
(RIFADIN) capsule	Reason for Therapy: Bacterial Infection Suspected
(	Indication: Sepsis
old [] cefTRIAXone (ROCEPHIN) IM	2 g, intramuscular, every 12 hours
[] CETTRIAXONE (ROCEPHIN) IM	2 g, intramuscular, every 12 nours 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 upo
[] vancomycin (VANCOCIN) IV + Pharmacy Cor	patient's clinical response and source identification
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 agent
	are NOT Y site compatible, then administer the Broad-spectrum
	antibiotic first. Refer to available Y site compatibility information and
	determination of hroad-spectrum antihiotic selection chart
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	Reason for Therapy: Bacterial Infection Suspected Indication: Sepsis
	Reason for Therapy: Bacterial Infection Suspected
[] Pharmacy consult to manage vancomycin	Reason for Therapy: Bacterial Infection Suspected Indication: Sepsis Recommendation: Sepsis: Recommended duration is dependent
[] Pharmacy consult to manage vancomycin	Reason for Therapy: Bacterial Infection Suspected Indication: Sepsis Recommendation: Sepsis: Recommended duration is dependent upon patient's clinical response and source identification STAT, Until discontinued, Starting S Reason for Therapy: Bacterial Infection Suspected
[] Pharmacy consult to manage vancomycin	<ul> <li>Reason for Therapy: Bacterial Infection Suspected</li> <li>Indication: Sepsis</li> <li>Recommendation: Sepsis: Recommended duration is dependent upon patient's clinical response and source identification</li> <li>STAT, Until discontinued, Starting S</li> <li>Reason for Therapy: Bacterial Infection Suspected</li> <li>Duration of Therapy (Days):</li> </ul>
[] Pharmacy consult to manage vancomycin	<ul> <li>Reason for Therapy: Bacterial Infection Suspected Indication: Sepsis</li> <li>Recommendation: Sepsis: Recommended duration is dependent upon patient's clinical response and source identification</li> <li>STAT, Until discontinued, Starting S</li> <li>Reason for Therapy: Bacterial Infection Suspected</li> <li>Duration of Therapy (Days): Indication: Sepsis</li> </ul>
[] Pharmacy consult to manage vancomycin	<ul> <li>Reason for Therapy: Bacterial Infection Suspected</li> <li>Indication: Sepsis</li> <li>Recommendation: Sepsis: Recommended duration is dependent upon patient's clinical response and source identification</li> <li>STAT, Until discontinued, Starting S</li> <li>Reason for Therapy: Bacterial Infection Suspected</li> <li>Duration of Therapy (Days):</li> <li>Indication: Sepsis</li> <li>Recommendation: Sepsis: Recommended duration is dependent</li> </ul>
[] Pharmacy consult to manage vancomycin	<ul> <li>Reason for Therapy: Bacterial Infection Suspected</li> <li>Indication: Sepsis</li> <li>Recommendation: Sepsis: Recommended duration is dependent</li> <li>upon patient's clinical response and source identification</li> <li>STAT, Until discontinued, Starting S</li> <li>Reason for Therapy: Bacterial Infection Suspected</li> <li>Duration of Therapy (Days):</li> <li>Indication: Sepsis</li> </ul>

[] ampicillin IM	2 g, intramuscular, every 4 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 Indication: Sepsis
[] OPTIONAL Additional Therapies -	0.15 mg/kg, intravenous, once, For 1 Doses
dexamethasone (DECADRON) IV	Administer 15-20 minutes before 1st dose of antibiotics.
[] OPTIONAL Additional Therapies - riFAMpin	600 mg, oral, daily
(RIFADIN) capsule	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
<ul> <li>aztreonam (AZACTAM) 2 g IV + vancomycin 1 IV</li> </ul>	5 mg/kg
[] aztreonam (AZACTAM) IV	2 g, 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 ma
	be administered per Y-site protocols. IF the ordered agents are NOT Y 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
	Reason for Therapy: Bacterial Infection Suspected Indication: Sepsis
<ul> <li>vancomycin (VANCOCIN) IV + Pharmacy Con Dose (Selection Required)</li> </ul>	Reason for Therapy: Bacterial Infection Suspected Indication: Sepsis
Dose (Selection Required)	Reason for Therapy: Bacterial Infection Suspected Indication: Sepsis nsult to
	Reason for Therapy: Bacterial Infection Suspected Indication: Sepsis
Dose (Selection Required)	Reason for Therapy: Bacterial Infection Suspected Indication: Sepsis nsult to 15 mg/kg, intravenous, every 12 hours Classification: Narrow Spectrum Antibiotic
Dose (Selection Required)	Reason for Therapy: Bacterial Infection Suspected Indication: Sepsis Insult to 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
Dose (Selection Required)	Reason for Therapy: Bacterial Infection Suspected Indication: Sepsis nsult to 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,
Dose (Selection Required)	Reason for Therapy: Bacterial Infection Suspected Indication: Sepsis Insult to 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
Dose (Selection Required)	Reason for Therapy: Bacterial Infection Suspected Indication: Sepsis Insult to 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
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Dose (Selection Required)	Reason for Therapy: Bacterial Infection Suspected Indication: Sepsis Insult to 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
Dose (Selection Required)	Reason for Therapy: Bacterial Infection Suspected Indication: Sepsis Insult to 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
Dose (Selection Required)	Reason for Therapy: Bacterial Infection Suspected Indication: Sepsis nsult to 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
Dose (Selection Required)	Reason for Therapy: Bacterial Infection Suspected Indication: Sepsis Insult to 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
Dose (Selection Required)         [] vancomycin (VANCOCIN)	Reason for Therapy: Bacterial Infection Suspected Indication: Sepsis Insult to 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 Indication: Sepsis
Dose (Selection Required)	Reason for Therapy: Bacterial Infection Suspected Indication: Sepsis         nsult to         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 Indication: Sepsis         STAT, Until discontinued, Starting S
Dose (Selection Required)         [] vancomycin (VANCOCIN)	Reason for Therapy: Bacterial Infection Suspected Indication: Sepsis         nsult to         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 Indication: Sepsis         STAT, Until discontinued, Starting S Reason for Therapy: Bacterial Infection Suspected Duration of Therapy (Days):
Dose (Selection Required)         [] vancomycin (VANCOCIN)	Reason for Therapy: Bacterial Infection Suspected Indication: Sepsis         nsult to         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 Indication: Sepsis         STAT, Until discontinued, Starting S Reason for Therapy: Bacterial Infection Suspected Duration of Therapy (Days): Indication: Sepsis
Dose (Selection Required)         [] vancomycin (VANCOCIN)	Reason for Therapy: Bacterial Infection Suspected Indication: Sepsis         Insult to         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 Indication: Sepsis         STAT, Until discontinued, Starting S Reason for Therapy: Bacterial Infection Suspected Duration of Therapy (Days): Indication: Sepsis         Recommendation: Sepsis         Recommendation: Sepsis
Dose (Selection Required)         [] vancomycin (VANCOCIN)	Reason for Therapy: Bacterial Infection Suspected Indication: Sepsis         Insult to         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 Indication: Sepsis         STAT, Until discontinued, Starting S Reason for Therapy: Bacterial Infection Suspected Duration of Therapy (Days): Indication: Sepsis         Recommendation: Sepsis         Recommendation: Sepsis         Recommendation: Sepsis         Reason for Therapy: Bacterial Infection Suspected Duration of Therapy (Days): Indication: Sepsis         Recommendation: Sepsis
Dose (Selection Required)         [] vancomycin (VANCOCIN)	Reason for Therapy: Bacterial Infection Suspected Indication: Sepsis         Insult to         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 Indication: Sepsis         STAT, Until discontinued, Starting S Reason for Therapy: Bacterial Infection Suspected Duration of Therapy (Days): Indication: Sepsis         Recommendation: Sepsis         Reason for Therapy: Bacterial Infection Suspected         Duration of Therapy: Bacterial Infection Suspected         Duration of Therapy: Bacterial Infection Suspected         Duration of Therapy: Bacterial Infection Suspected         Duration: Sepsis         Recommendation: Sepsis
Dose (Selection Required)         [] vancomycin (VANCOCIN)	Reason for Therapy: Bacterial Infection Suspected Indication: Sepsis Insult to 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 Indication: Sepsis STAT, Until discontinued, Starting S Reason for Therapy (Days): Indication: Sepsis Recommendation: Sepsis: Recommended duration is dependent upon patient's clinical response and source identification Indication: Sepsis Recommendation: Sepsis: Recommended duration is dependent upon patient's clinical response and source identification Indication: Sepsis Recommendation: Sepsis: Recommended duration is dependent upon patient's clinical response and source identification Indication: Sepsis - Bacterial Meningitis - Community-Acquired and

[] aztreonam (AZACTAM) intraMUSCULAR	2 g, intramuscular, 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 IM Route Selection: I have opted to select the IM route because IV access could not be established
[] vancomycin (VANCOCIN) IV + Pharmacy Cor	
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 Indication: Sepsis
[] 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 Indication: Sepsis - Bacterial Meningitis - Community-Acquired and ImmunoCOMPETENT
[] OPTIONAL Additional Therapies -	0.15 mg/kg, intravenous, once, For 1 Doses
dexamethasone (DECADRON) IV	Administer 15-20 minutes before 1st dose of antibiotics.
) SEVERE Vancomycin Allergy (Single Response Dexamethasone is recommended for treatment of	<i>)</i> of proven or suspected pneumococcal meningitis due to S. pneumoniae
() cefTRIAXone (ROCEPHIN) 2 g IV + linezolid (Z	
600 mg IV - For Patients LESS than 50 years o [] cefTRIAxone (ROCEPHIN) IV	2 g, intravenous, for 30 Minutes, 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

[] linezolid in dextrose 5% (ZYVOX) IVPB	600 mg, intravenous, for 60 Minutes, 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
<ul> <li>OPTIONAL Additional Therapies - dexamethasone (DECADRON) IV</li> </ul>	0.15 mg/kg, intravenous, once, For 1 Doses Administer 15-20 minutes before 1st dose of antibiotics.
<ul> <li>cefTRIAXone (ROCEPHIN) 2 g IV + linezolid (2 600 mg IV + ampicillin 2 g IV - For Patients GR than 50 years old</li> </ul>	
[] cefTRIAxone (ROCEPHIN) IV	2 g, intravenous, for 30 Minutes, 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
[] vancomycin (VANCOCIN) IV + Pharmacy Con 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

[] ampicillin IV	2 g, intravenous, for 30 Minutes, every 4 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
[] OPTIONAL Additional Therapies -	0.15 mg/kg, intravenous, once, For 1 Doses Administer 15-20 minutes before 1st dose of antibiotics.
dexamethasone (DECADRON) IV [] OPTIONAL Additional Therapies - riFAMpin	600 mg, oral, daily
(RIFADIN) capsule	Reason for Therapy: Bacterial Infection Suspected Indication: Sepsis
<ul> <li>cefTRIAXone (ROCEPHIN) 2 g intraMUSCULA linezolid (ZYVOX) 600 mg IV - For Patients LES 50 years old</li> </ul>	R +
[] cefTRIAXone (ROCEPHIN) IM	2 g, intramuscular, every 12 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: Sensie
	Indication: Sepsis Recommendation: Sepsis: Recommended duration is dependent upon patient's clinical response and source identification
[] vancomycin (VANCOCIN) IV + Pharmacy Con Dose (Selection Required)	
[] vancomycin (VANCOCIŃ)	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
[] Pharmacy consult to manage vancomycin	upon patient's clinical response and source identification 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

] linezolid in dextrose 5% (ZYVOX) IVPB	<ul> <li>600 mg, intravenous, for 60 Minutes, every 12 hours Classification: Narrow Spectrum Antibiotic</li> <li>When multiple antimicrobial agents are ordered, you may administer these immediately at the SAME TIME via different IV sites. Do not wait for the first antibiotic to infuse. If agents are Y-site compatible, they ma</li> </ul>
	these immediately at the SAME TIME via different IV sites. Do not wait for the first antibiotic to infuse. If agents are Y-site compatible, they ma
	be administered per Y-site protocols. IF the ordered agents are NOT Y
	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 -	0.15 mg/kg, intravenous, once, For 1 Doses
dexamethasone (DECADRON) IV	Administer 15-20 minutes before 1st dose of antibiotics.
OPTIONAL Additional Therapies - riFAMpin	600 mg, oral, daily Reason for Therapy: Restarial Infaction Supported
(RIFADIN) capsule	Reason for Therapy: Bacterial Infection Suspected Indication: Sepsis
cefTRIAXone (ROCEPHIN) 2 g intraMUSCULA	
linezolid (ZYVOX) 600 mg IV + ampicillin 2 g	
intraMUSCULAR - For Patients GREATER that old	n 50 years
] cefTRIAXone (ROCEPHIN) IM	2 g, intramuscular, every 12 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
	Indication: Sepsis
	Recommendation: Sepsis: Recommended duration is dependent upor
	patient's clinical response and source identification
] linezolid in dextrose 5% (ZYVOX) IVPB	600 mg, intravenous, for 60 Minutes, 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 ma
	be administered per Y-site protocols. IF the ordered agents are NOT Y
	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, every 4 hours
1	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 -	0.15 mg/kg, intravenous, once, For 1 Doses
dexamethasone (DECADRON) IV	Administer 15-20 minutes before 1st dose of antibiotics.
[] OPTIONAL Additional Therapies - riFAMpin (RIFADIN) capsule	600 mg, oral, daily Reason for Therapy: Bacterial Infection Suspected Indication: Sepsis
SEVERE Penicillin AND Vancomycin Allergy (Si Response)	
	of proven or suspected pneumococcal meningitis due to S. pneumoniae

[] aztreonam (AZACTAM) IV	2 g, 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 ma be administered per Y-site protocols. IF the ordered agents are NOT Y 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, 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 ma be administered per Y-site protocols. IF the ordered agents are NOT Y 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 Additional Therapies -	0.15 mg/kg, intravenous, once, For 1 Doses
<ul> <li>dexamethasone (DECADRON) IV</li> <li>aztreonam (AZACTAM) 2 g intraMUSCL (ZYVOX) 600 mg IV</li> </ul>	Administer 15-20 minutes before 1st dose of antibiotics. ILAR + linezolid
[] aztreonam (AZACTAM) IM	2 g, intramuscular, 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 ma be administered per Y-site protocols. IF the ordered agents are NOT Y 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 IM Route Selection: I have opted to select the IM route because IV access could not be established
[] linezolid in dextrose 5% (ZYVOX) IVPB	
	When multiple antimicrobial agents are ordered, you may administer these immediately at the SAME TIME via different IV sites. Do not wait for the first antibiotic to infuse. If agents are Y-site compatible, they ma be administered per Y-site protocols. IF the ordered agents are NOT Y 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
	0.15 mg/kg, intravenous, once, For 1 Doses
[] OPTIONAL Additional Therapies - dexamethasone (DECADRON) IV	Administer 15-20 minutes before 1st dose of antibiotics.

Does your patient have a SEVERE penicillin allergy	?
() No SEVERE Penicillin OR Vancomycin Allergy (S Response)	Single
	f proven or suspected pneumococcal meningitis due to S. pneumoniae
() ceFEPime 2 g IV or meropenem (MERREM) 2 g vancomycin 15 mg/kg IV - For Patients LESS th years old	an 50
<ul> <li>[] ceFEPime 2 g IV or meropenem (MERREM) 2 (Single Response)</li> </ul>	gıv
() ceFEPime (MAXIPIME) IV	2 g, intravenous, every 8 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
() meropenem (MERREM) IV	2 g, intravenous, every 8 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
[] vancomycin (VANCOCIN) IV + Pharmacy Con	upon patient's clinical response and source identification sult to
Dose (Selection Required)           []         vancomycin (VANCOCIN)           []         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 Indication: Sepsis - Bacterial Meningitis - Community-Acquired and ImmunoSUPPRESSED

[] OPTIONAL Additional Therapies -	0.15 mg/kg, intravenous, once, For 1 Doses
dexamethasone (DECADRON) IV	Administer 15-20 minutes before 1st dose of antibiotics.
() ceFEPime 2 g IV or meropenem (MERREM)	
vancomycin 15 mg/kg IV + ampicillin 2 g IV - GREATER than 50 years old	FOLPALIENIS
[] ceFEPime 2 g IV or meropenem (MERREM	) 2 a IV
(Single Response)	/ 2 9 1 1
() ceFEPime (MAXIPIME) IV	2 g, intravenous, every 8 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
() meropenem (MERREM) IV	upon patient's clinical response and source identification 2 g, intravenous, every 8 hours
() meropenem (MERREM) IV	Classification: Broad Spectrum Antibiotic
vancomycin (VANCOCIN) IV + Pharmacy C	When multiple antimicrobial agents are ordered, you may administer these immediately at the SAME TIME via different IV sites. Do not wait for the first antibiotic to infuse. If agents are Y-site compatible, they may be administered per Y-site protocols. IF the ordered agents are NOT Y 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
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:
[] Pharmacy consult to manage vancomycin	STAT, Until discontinued, Starting S Reason for Therapy: Duration of Therapy (Days): Indication: Sepsis - Bacterial Meningitis - Community-Acquired and ImmunoSUPPRESSED

[] ampicillin IV	2 g, intravenous, for 30 Minutes, every 4 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
[] OPTIONAL Additional Therapies -	0.15 mg/kg, intravenous, once, For 1 Doses
dexamethasone (DECADRON) IV	Administer 15-20 minutes before 1st dose of antibiotics.
[] OPTIONAL Additional Therapies - riFAMpin	600 mg, oral, daily
(RIFADIN) capsule	Reason for Therapy: Bacterial Infection Suspected Indication: Sepsis
) ceFEPime 2 g intraMUSCULAR or meropenem	
(MERREM) 2 g IV + vancomycin 15 mg/kg IV - F Patients LESS than 50 years old	For
[] ceFEPime 2 g intraMUSCULAR + meropenem (MERREM) 2 g IV (Single Response)	
() cefepime (MAXIPIME) intraMUSCULAR	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
() meropenem (MERREM) IV	2 g, intravenous, every 8 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
[] vancomycin (VANCOCIN) IV + Pharmacy Cons	
Dose (Selection Required)           Image: selection required           Image: selection required	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
1 ODTIONAL Additional Theranica	upon patient's clinical response and source identification
[] OPTIONAL Additional Therapies -	0.15 mg/kg, intravenous, once, For 1 Doses Administer 15-20 minutes before 1st dose of antibiotics.
dexamethasone (DECADRON) IV	
[] OPTIONAL Additional Therapies - riFAMpin (RIFADIN) capsule	600 mg, oral, daily Reason for Therapy: Bacterial Infection Suspected
(INI ADIN) capsule	Indication: Sepsis
() ceFEPime 2 g intraMUSCULAR or meropenem	
(MERREM) 2 g IV + ampicillin 2 g intraMUSCUI Patients GREATER than 50 years old	
[] ceFEPime 2 g intraMUSCULAR + meropenem	)
(MERREM) 2 g IV (Single Response)	
() cefepime (MAXIPIME) intraMUSCULAR	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
() meropenem (MERREM) IV	2 g, intravenous, every 8 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
[] vancomycin (VANCOCIN) IV + Pharmacy Con	
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

[] ampicillin IM	2 g, intramuscular, every 4 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
	Indication: Sepsis
[] OPTIONAL Additional Therapies -	0.15 mg/kg, intravenous, once, For 1 Doses
dexamethasone (DECADRON) IV	Administer 15-20 minutes before 1st dose of antibiotics.
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 1 IV	5 mg/kg
[] aztreonam (AZACTAM) IV	2 g, 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 ma be administered per Y-site protocols. IF the ordered agents are NOT Y
	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 Cor 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
	Indication: Sepsis
[] 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
	Indication: Sepsis - Bacterial Meningitis - Community-Acquired and
	ImmunoCOMPETENT
	0.15 mg/kg, intravenous, once, For 1 Doses
1 OPTIONAL Additional Therapies -	
[] OPTIONAL Additional Therapies - dexamethasone (DECADRON) IV	Administer 15-20 minutes before 1st dose of antibiotics.

[] aztreonam (AZACTAM) intraMUSCULAR	2 g, intramuscular, 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 IM Route Selection: I have opted to select the IM route because IV access could not be established
<ul> <li>vancomycin (VANCOCIN) IV + Pharmacy Cor Dose (Selection Required)</li> </ul>	
I 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
	Indication: Sepsis
[] 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
	Indication: Sepsis - Bacterial Meningitis - Community-Acquired and
	ImmunoCOMPETENT
[] OPTIONAL Additional Therapies -	0.15 mg/kg, intravenous, once, For 1 Doses Administer 15-20 minutes before 1st dose of antibiotics.
dexamethasone (DECADRON) IV () SEVERE Vancomycin Allergy (Single Response)	
() ceFEPime 2 g IV or meropenem (MERREM) 2	
linezolid (ZYVOX) 600 mg IV - For Patients LES	SS than
50 years old          50 years old         [] ceFEPime 2 g IV or meropenem (MERREM) 2	
(Single Response)	<u>- </u>
() ceFEPime (MAXIPIME) IV	2 g, intravenous, every 8 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

() meropenem (MERREM) IV	
	2 g, intravenous, every 8 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
[] linezolid in dextrose 5% (ZYVOX) IVPB	600 mg, intravenous, for 60 Minutes, 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 ma
	be administered per Y-site protocols. IF the ordered agents are NOT Y
	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 (ZYVOX) 600 mg IV + ampicillin 2 g I	
Patients GREATER than 50 years old [] ceFEPime 2 g IV or meropenem (MERREM)	
Patients GREATER than 50 years old	
Patients GREATER than 50 years old [] ceFEPime 2 g IV or meropenem (MERREM) (Single Response)	) 2 g IV
Patients GREATER than 50 years old [] ceFEPime 2 g IV or meropenem (MERREM) (Single Response)	2 g IV 2 g, intravenous, every 8 hours
Patients GREATER than 50 years old [] ceFEPime 2 g IV or meropenem (MERREM) (Single Response)	<ul> <li>2 g IV</li> <li>2 g, intravenous, every 8 hours Classification: Broad Spectrum Antibiotic</li> <li>When multiple antimicrobial agents are ordered, you may administer these immediately at the SAME TIME via different IV sites. Do not</li> </ul>
Patients GREATER than 50 years old [] ceFEPime 2 g IV or meropenem (MERREM) (Single Response)	<ul> <li>2 g IV</li> <li>2 g, intravenous, every 8 hours Classification: Broad Spectrum Antibiotic</li> <li>When multiple antimicrobial agents are ordered, you may administer these immediately at the SAME TIME via different IV sites. Do not wait for the first antibiotic to infuse. If agents are Y-site compatible,</li> </ul>
Patients GREATER than 50 years old [] ceFEPime 2 g IV or meropenem (MERREM) (Single Response)	<ul> <li>2 g IV</li> <li>2 g, intravenous, every 8 hours Classification: Broad Spectrum Antibiotic</li> <li>When multiple antimicrobial agents are ordered, you may administer these immediately at the SAME TIME via different IV sites. Do not wait for the first antibiotic to infuse. If agents are Y-site compatible, they may be administered per Y-site protocols. IF the ordered agent</li> </ul>
Patients GREATER than 50 years old [] ceFEPime 2 g IV or meropenem (MERREM) (Single Response)	<ul> <li>2 g IV</li> <li>2 g, intravenous, every 8 hours Classification: Broad Spectrum Antibiotic</li> <li>When multiple antimicrobial agents are ordered, you may administer these immediately at the SAME TIME via different IV sites. Do not wait for the first antibiotic to infuse. If agents are Y-site compatible, they may be administered per Y-site protocols. IF the ordered agent are NOT Y site compatible, then administer the Broad-spectrum</li> </ul>
Patients GREATER than 50 years old [] ceFEPime 2 g IV or meropenem (MERREM) (Single Response)	<ul> <li>2 g IV</li> <li>2 g, intravenous, every 8 hours Classification: Broad Spectrum Antibiotic</li> <li>When multiple antimicrobial agents are ordered, you may administer these immediately at the SAME TIME via different IV sites. Do not wait for the first antibiotic to infuse. If agents are Y-site compatible, they may be administered per Y-site protocols. IF the ordered agent are NOT Y site compatible, then administer the Broad-spectrum antibiotic first. Refer to available Y site compatibility information and</li> </ul>
Patients GREATER than 50 years old [] ceFEPime 2 g IV or meropenem (MERREM) (Single Response)	<ul> <li>2 g IV</li> <li>2 g, intravenous, every 8 hours Classification: Broad Spectrum Antibiotic</li> <li>When multiple antimicrobial agents are ordered, you may administer these immediately at the SAME TIME via different IV sites. Do not wait for the first antibiotic to infuse. If agents are Y-site compatible, they may be administered per Y-site protocols. IF the ordered agent are NOT Y site compatible, then administer the Broad-spectrum</li> </ul>
Patients GREATER than 50 years old [] ceFEPime 2 g IV or meropenem (MERREM) (Single Response)	<ul> <li>2 g IV</li> <li>2 g, intravenous, every 8 hours Classification: Broad Spectrum Antibiotic</li> <li>When multiple antimicrobial agents are ordered, you may administer these immediately at the SAME TIME via different IV sites. Do not wait for the first antibiotic to infuse. If agents are Y-site compatible, they may be administered per Y-site protocols. IF the ordered agent are NOT Y 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</li> </ul>
Patients GREATER than 50 years old [] ceFEPime 2 g IV or meropenem (MERREM) (Single Response)	<ul> <li>2 g IV</li> <li>2 g, intravenous, every 8 hours Classification: Broad Spectrum Antibiotic</li> <li>When multiple antimicrobial agents are ordered, you may administer these immediately at the SAME TIME via different IV sites. Do not wait for the first antibiotic to infuse. If agents are Y-site compatible, they may be administered per Y-site protocols. IF the ordered agent are NOT Y 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</li> </ul>
Patients GREATER than 50 years old [] ceFEPime 2 g IV or meropenem (MERREM) (Single Response) () ceFEPime (MAXIPIME) IV	<ul> <li>2 g IV</li> <li>2 g, intravenous, every 8 hours Classification: Broad Spectrum Antibiotic</li> <li>When multiple antimicrobial agents are ordered, you may administer these immediately at the SAME TIME via different IV sites. Do not wait for the first antibiotic to infuse. If agents are Y-site compatible, they may be administered per Y-site protocols. IF the ordered agent are NOT Y 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</li> </ul>
Patients GREATER than 50 years old [] ceFEPime 2 g IV or meropenem (MERREM) (Single Response)	<ul> <li>2 g IV</li> <li>2 g, intravenous, every 8 hours Classification: Broad Spectrum Antibiotic</li> <li>When multiple antimicrobial agents are ordered, you may administer these immediately at the SAME TIME via different IV sites. Do not wait for the first antibiotic to infuse. If agents are Y-site compatible, they may be administered per Y-site protocols. IF the ordered agent are NOT Y 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 2 g, intravenous, every 8 hours</li> </ul>
Patients GREATER than 50 years old [] ceFEPime 2 g IV or meropenem (MERREM) (Single Response) () ceFEPime (MAXIPIME) IV	<ul> <li>2 g IV</li> <li>2 g, intravenous, every 8 hours Classification: Broad Spectrum Antibiotic</li> <li>When multiple antimicrobial agents are ordered, you may administer these immediately at the SAME TIME via different IV sites. Do not wait for the first antibiotic to infuse. If agents are Y-site compatible, they may be administered per Y-site protocols. IF the ordered agent are NOT Y 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</li> </ul>
Patients GREATER than 50 years old [] ceFEPime 2 g IV or meropenem (MERREM) (Single Response) () ceFEPime (MAXIPIME) IV	<ul> <li>2 g IV</li> <li>2 g, intravenous, every 8 hours Classification: Broad Spectrum Antibiotic</li> <li>When multiple antimicrobial agents are ordered, you may administer these immediately at the SAME TIME via different IV sites. Do not wait for the first antibiotic to infuse. If agents are Y-site compatible, they may be administered per Y-site protocols. IF the ordered agent are NOT Y 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</li> <li>2 g, intravenous, every 8 hours Classification: Broad Spectrum Antibiotic</li> <li>When multiple antimicrobial agents are ordered, you may administer</li> </ul>
Patients GREATER than 50 years old [] ceFEPime 2 g IV or meropenem (MERREM) (Single Response) () ceFEPime (MAXIPIME) IV	<ul> <li>2 g IV</li> <li>2 g, intravenous, every 8 hours Classification: Broad Spectrum Antibiotic</li> <li>When multiple antimicrobial agents are ordered, you may administer these immediately at the SAME TIME via different IV sites. Do not wait for the first antibiotic to infuse. If agents are Y-site compatible, they may be administered per Y-site protocols. IF the ordered agent are NOT Y 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</li> <li>2 g, intravenous, every 8 hours Classification: Broad Spectrum Antibiotic</li> <li>When multiple antimicrobial agents are ordered, you may administer these immediately at the SAME TIME via different IV sites. Do not</li> </ul>
Patients GREATER than 50 years old [] ceFEPime 2 g IV or meropenem (MERREM) (Single Response) () ceFEPime (MAXIPIME) IV	<ul> <li>2 g IV</li> <li>2 g, intravenous, every 8 hours Classification: Broad Spectrum Antibiotic</li> <li>When multiple antimicrobial agents are ordered, you may administer these immediately at the SAME TIME via different IV sites. Do not wait for the first antibiotic to infuse. If agents are Y-site compatible, they may be administered per Y-site protocols. IF the ordered agent are NOT Y 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</li> <li>2 g, intravenous, every 8 hours Classification: Broad Spectrum Antibiotic</li> <li>When multiple antimicrobial agents are ordered, you may administer these immediately at the SAME TIME via different IV sites. Do not wait for the first antibiotic to infuse. If agents are Y-site compatible,</li> </ul>
Patients GREATER than 50 years old [] ceFEPime 2 g IV or meropenem (MERREM) (Single Response) () ceFEPime (MAXIPIME) IV	<ul> <li>2 g IV</li> <li>2 g, intravenous, every 8 hours Classification: Broad Spectrum Antibiotic</li> <li>When multiple antimicrobial agents are ordered, you may administer these immediately at the SAME TIME via different IV sites. Do not wait for the first antibiotic to infuse. If agents are Y-site compatible, they may be administered per Y-site protocols. IF the ordered agent are NOT Y 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</li> <li>2 g, intravenous, every 8 hours Classification: Broad Spectrum Antibiotic</li> <li>When multiple antimicrobial agents are ordered, you may administer these immediately at the SAME TIME via different IV sites. Do not wait for the first antibiotic to infuse. If agents are Y-site compatible, they may be administered per Y-site protocols. IF the ordered agent</li> </ul>
Patients GREATER than 50 years old [] ceFEPime 2 g IV or meropenem (MERREM) (Single Response) () ceFEPime (MAXIPIME) IV	<ul> <li>2 g IV</li> <li>2 g, intravenous, every 8 hours Classification: Broad Spectrum Antibiotic</li> <li>When multiple antimicrobial agents are ordered, you may administer these immediately at the SAME TIME via different IV sites. Do not wait for the first antibiotic to infuse. If agents are Y-site compatible, they may be administered per Y-site protocols. IF the ordered agent are NOT Y 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</li> <li>2 g, intravenous, every 8 hours Classification: Broad Spectrum Antibiotic</li> <li>When multiple antimicrobial agents are ordered, you may administer these immediately at the SAME TIME via different IV sites. Do not wait for the first antibiotic to infuse. If agents are Y-site compatible, they may be administered per Y-site protocols. IF the ordered agent are NOT Y site compatible, then administer the Broad-spectrum</li> </ul>
Patients GREATER than 50 years old [] ceFEPime 2 g IV or meropenem (MERREM) (Single Response) () ceFEPime (MAXIPIME) IV	<ul> <li>2 g IV</li> <li>2 g, intravenous, every 8 hours Classification: Broad Spectrum Antibiotic</li> <li>When multiple antimicrobial agents are ordered, you may administer these immediately at the SAME TIME via different IV sites. Do not wait for the first antibiotic to infuse. If agents are Y-site compatible, they may be administered per Y-site protocols. IF the ordered agent are NOT Y 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</li> <li>2 g, intravenous, every 8 hours Classification: Broad Spectrum Antibiotic</li> <li>When multiple antimicrobial agents are ordered, you may administer these immediately at the SAME TIME via different IV sites. Do not wait for the first antibiotic to infuse. If agents are Y-site compatible, they may be administered per Y-site protocols. IF the ordered agent are NOT Y site compatible, then administer the Broad-spectrum antibiotic first. Refer to available Y site compatibility information and</li> </ul>
Patients GREATER than 50 years old [] ceFEPime 2 g IV or meropenem (MERREM) (Single Response) () ceFEPime (MAXIPIME) IV	<ul> <li>2 g IV</li> <li>2 g, intravenous, every 8 hours Classification: Broad Spectrum Antibiotic</li> <li>When multiple antimicrobial agents are ordered, you may administer these immediately at the SAME TIME via different IV sites. Do not wait for the first antibiotic to infuse. If agents are Y-site compatible, they may be administered per Y-site protocols. IF the ordered agent are NOT Y 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</li> <li>2 g, intravenous, every 8 hours Classification: Broad Spectrum Antibiotic</li> <li>When multiple antimicrobial agents are ordered, you may administer these immediately at the SAME TIME via different IV sites. Do not wait for the first antibiotic to infuse. If agents are Y-site compatible, they may be administered per Y-site protocols. IF the ordered agent are NOT Y site compatible, then administer the Broad-spectrum antibiotic first. Refer to available Y site compatibility information and determination of broad-spectrum antibiotic selection chart.</li> </ul>
Patients GREATER than 50 years old [] ceFEPime 2 g IV or meropenem (MERREM) (Single Response) () ceFEPime (MAXIPIME) IV	<ul> <li>2 g IV</li> <li>2 g, intravenous, every 8 hours Classification: Broad Spectrum Antibiotic</li> <li>When multiple antimicrobial agents are ordered, you may administer these immediately at the SAME TIME via different IV sites. Do not wait for the first antibiotic to infuse. If agents are Y-site compatible, they may be administered per Y-site protocols. IF the ordered agent are NOT Y 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</li> <li>2 g, intravenous, every 8 hours Classification: Broad Spectrum Antibiotic</li> <li>When multiple antimicrobial agents are ordered, you may administer these immediately at the SAME TIME via different IV sites. Do not wait for the first antibiotic to infuse. If agents are Y-site compatible, they may be administered per Y-site protocols. IF the ordered agent are NOT Y 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</li> </ul>
Patients GREATER than 50 years old [] ceFEPime 2 g IV or meropenem (MERREM) (Single Response) () ceFEPime (MAXIPIME) IV	<ul> <li>2 g IV</li> <li>2 g, intravenous, every 8 hours Classification: Broad Spectrum Antibiotic</li> <li>When multiple antimicrobial agents are ordered, you may administer these immediately at the SAME TIME via different IV sites. Do not wait for the first antibiotic to infuse. If agents are Y-site compatible, they may be administered per Y-site protocols. IF the ordered agent are NOT Y 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</li> <li>2 g, intravenous, every 8 hours Classification: Broad Spectrum Antibiotic</li> <li>When multiple antimicrobial agents are ordered, you may administer these immediately at the SAME TIME via different IV sites. Do not wait for the first antibiotic to infuse. If agents are Y-site compatible, they may be administered per Y-site protocols. IF the ordered agent are NOT Y site compatible, then administer the Broad-spectrum antibiotic first. Refer to available Y site compatibility information and determination of broad-spectrum antibiotic selection chart.</li> </ul>

[] linezolid in dextrose 5% (ZYVOX) IVPB	600 mg, intravenous, for 60 Minutes, 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
[] ampicillin IV	2 g, intravenous, for 30 Minutes, every 4 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
<ul> <li>ceFEPime 2 g intraMUSCULAR or meropenen (MERREM) 2 g IV + linezolid (ZYVOX) 600 mg Patients LESS than 50 years old</li> <li>ceFEPime 2 g intraMUSCULAR + meropener</li> </ul>	IV - For
(MERREM) 2 g IV (Single Response)	
() cefepime (MAXIPIME) intraMUSCULAR	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
() meropenem (MERREM) IV	2 g, intravenous, every 8 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

[] linezolid in dextrose 5% (ZYVOX) IVPB	600 mg, intravenous, for 60 Minutes, 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
) ceFEPime 2 g intraMUSCULAR or meropenen	
(MERREM) IV + linezolid (ZYVOX) 600 mg IV ampicillin 2 g intraMUSCULAR - For Patients (	
than 50 years old	
[] ceFEPime 2 g intraMUSCULAR + meropener	m
(MERREM) 2 g IV (Single Response)	
() cefepime (MAXIPIME) intraMUSCULAR	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
() meropenem (MERREM) IV	2 g, intravenous, every 8 hours Classification: Broad Spectrum Antibiotic
	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
	Indication: Sepsis Recommendation: Sepsis: Recommended duration is dependent upon patient's clinical response and source identification
[] linezolid in dextrose 5% (ZYVOX) IVPB	Indication: Sepsis Recommendation: Sepsis: Recommended duration is dependent
[] linezolid in dextrose 5% (ZYVOX) IVPB	<ul> <li>Indication: Sepsis</li> <li>Recommendation: Sepsis: Recommended duration is dependent upon patient's clinical response and source identification</li> <li>600 mg, intravenous, for 60 Minutes, every 12 hours</li> <li>Classification: Narrow Spectrum Antibiotic</li> <li>When multiple antimicrobial agents are ordered, you may administer</li> </ul>
[] linezolid in dextrose 5% (ZYVOX) IVPB	Indication: Sepsis Recommendation: Sepsis: Recommended duration is dependent upon patient's clinical response and source identification 600 mg, intravenous, for 60 Minutes, 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
[] linezolid in dextrose 5% (ZYVOX) IVPB	<ul> <li>Indication: Sepsis</li> <li>Recommendation: Sepsis: Recommended duration is dependent upon patient's clinical response and source identification</li> <li>600 mg, intravenous, for 60 Minutes, every 12 hours Classification: Narrow Spectrum Antibiotic</li> <li>When multiple antimicrobial agents are ordered, you may administer these immediately at the SAME TIME via different IV sites. Do not wait for the first antibiotic to infuse. If agents are Y-site compatible, they may be administered per Y-site protocols. IF the ordered agents are NOT Y site compatible, then administer the Broad-spectrum antibiotic first.</li> </ul>
[] linezolid in dextrose 5% (ZYVOX) IVPB	<ul> <li>Indication: Sepsis</li> <li>Recommendation: Sepsis: Recommended duration is dependent upon patient's clinical response and source identification</li> <li>600 mg, intravenous, for 60 Minutes, every 12 hours Classification: Narrow Spectrum Antibiotic</li> <li>When multiple antimicrobial agents are ordered, you may administer these immediately at the SAME TIME via different IV sites. Do not wait for the first antibiotic to infuse. If agents are Y-site compatible, they may be administered per Y-site protocols. IF the ordered agents are NOT Y site compatible, then administer the Broad-spectrum antibiotic first. Refer to available Y site compatibility information and determination of</li> </ul>
[] linezolid in dextrose 5% (ZYVOX) IVPB	<ul> <li>Indication: Sepsis</li> <li>Recommendation: Sepsis: Recommended duration is dependent upon patient's clinical response and source identification</li> <li>600 mg, intravenous, for 60 Minutes, every 12 hours Classification: Narrow Spectrum Antibiotic</li> <li>When multiple antimicrobial agents are ordered, you may administer these immediately at the SAME TIME via different IV sites. Do not wait for the first antibiotic to infuse. If agents are Y-site compatible, they may be administered per Y-site protocols. IF the ordered agents are NOT Y 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</li> </ul>
[] linezolid in dextrose 5% (ZYVOX) IVPB	<ul> <li>Indication: Sepsis</li> <li>Recommendation: Sepsis: Recommended duration is dependent upon patient's clinical response and source identification</li> <li>600 mg, intravenous, for 60 Minutes, every 12 hours Classification: Narrow Spectrum Antibiotic</li> <li>When multiple antimicrobial agents are ordered, you may administer these immediately at the SAME TIME via different IV sites. Do not wait for the first antibiotic to infuse. If agents are Y-site compatible, they may be administered per Y-site protocols. IF the ordered agents are NOT Y site compatible, then administer the Broad-spectrum antibiotic first. Refer to available Y site compatibility information and determination of broad-spectrum antibiotic selection chart.</li> </ul>

[] ampicillin IV	2 g, intravenous, for 30 Minutes, every 4 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
() SEVERE Penicillin AND Vancomycin Allergy (S	Single
Response) Dexamethasone is recommended for treatmen	t of proven or suspected pneumococcal meningitis due to S. pneumoniae
() aztreonam (AZACTAM) 2 g IV + linezolid (ZY mg IV	
[] aztreonam (AZACTAM) IV	2 g, intravenous, every 12 hours Classification: Broad Spectrum Antibiotic
	<ul> <li>When multiple antimicrobial agents are ordered, you may administer these immediately at the SAME TIME via different IV sites. Do not wait for the first antibiotic to infuse. If agents are Y-site compatible, they may be administered per Y-site protocols. IF the ordered agents are NOT Y site compatible, then administer the Broad-spectrum antibiotic first.</li> <li>Refer to available Y site compatibility information and determination of broad-spectrum antibiotic selection chart.</li> <li>Reason for Therapy: Bacterial Infection Suspected Indication: Sepsis</li> </ul>
[] linezolid in dextrose 5% (ZYVOX) IVPB	600 mg, intravenous, for 60 Minutes, 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
() aztreonam (AZACTAM) 2 g intraMUSCULAR (ZYVOX) 600 mg IV	
[] aztreonam (AZACTAM) IM	2 g, intramuscular, every 12 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 Indication: Sepsis IM Route Selection: I have opted to select the IM route because IV access could not be established

<ul> <li>hydrocortisone sodium succinate (Solu-CORTEF) injection</li> </ul>	50 mg, intravenous, every 6 hours For patients with shock refractory to fluids and vasopressors.
	nended in the case of hypotension which is refractory to both fluids Id also be considered for patients with a history of recent and/or
[] 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.
Inotropic Therapy	0.5.20 meg/kg/min_introvonous_titrated
() 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.
() 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.
Vasopressor Therapy (if unresponsive to initial fluid ** if unresponsive to initial fluid bolus **	
	Administer 500 mL intravenous once for patients not responding to initialfluid resuscitation with crystalloids. Indication:
Colloid / Albumin (for patients not responding to ini ] albumin human 5 % infusion	tial fluid resuscitation with crystalloids) 25 g, intravenous, once, For 1 Doses
Additional Management of Sepsis	
	250 mL, intravenous, PRN, line care For flushing of extension tubing sets after administration of intermittent infusions. Program sodium chloride bag to run at the same infusion rate as medication given for a total volume equal to contents of tubing sets used. Change bag every 24 hours.
sodium chloride 0.9% bag for line care [X] sodium chloride 0.9% bag for line care	250 mL introvonous DRN line core
	Indication: Sepsis Recommendation: Sepsis: Recommended duration is dependent upon patient's clinical response and source identification
	broad-spectrum antibiotic selection chart. Reason for Therapy: Bacterial Infection Suspected
	When multiple antimicrobial agents are ordered, you may administer these immediately at the SAME TIME via different IV sites. Do not wai for the first antibiotic to infuse. If agents are Y-site compatible, they ma be administered per Y-site protocols. IF the ordered agents are NOT Y site compatible, then administer the Broad-spectrum antibiotic first. Refer to available Y site compatibility information and determination of
	Classification: Narrow Spectrum Antibiotic

[] 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
[] B natriuretic peptide	STAT For 1 Occurrences
[] Troponin T	STAT For 1 Occurrences
[] Fibrinogen	STAT For 1 Occurrences
[] Hepatic function panel	STAT For 1 Occurrences
[] Ionized calcium	STAT For 1 Occurrences
[] Lactic acid level	STAT For 1 Occurrences
[] Magnesium	STAT For 1 Occurrences
[] Phosphorus	STAT For 1 Occurrences
[] Type and screen	STAT For 1 Occurrences

## 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, I-Stat	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
[] Fibrinogen	STAT For 1 Occurrences
[] B natriuretic peptide	STAT For 1 Occurrences
[] Troponin T	STAT For 1 Occurrences
[] Hepatic function panel	STAT For 1 Occurrences
[] Ionized calcium	STAT For 1 Occurrences
[] Lactic acid level	STAT For 1 Occurrences
[] Magnesium	STAT For 1 Occurrences
[] Phosphorus	STAT For 1 Occurrences
[] Type and screen	STAT For 1 Occurrences

## 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, I-Stat	STAT For 1 Occurrences	
[] Partial thromboplastin time	STAT For 1 Occurrences	
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[] CBC with differential	STAT For 1 Occurrences	
[] Fibrinogen	STAT For 1 Occurrences	
[] B natriuretic peptide	STAT For 1 Occurrences	
[] Troponin T	STAT For 1 Occurrences	
[] Hepatic function panel	STAT For 1 Occurrences	
[] Ionized calcium	STAT For 1 Occurrences	
[] Lactic acid, I-Stat	STAT For 1 Occurrences	
[] Magnesium	STAT For 1 Occurrences	
[] Phosphorus	STAT For 1 Occurrences	
[] Type and screen	STAT For 1 Occurrences	

## Laboratory - Repeat

[] Basic metabolic panel	Every 6 hours, Starting S For 2 Occurrences
[] Blood gas, venous	Every 6 hours, Starting S For 2 Occurrences
[] CBC with differential	Every 6 hours, Starting S For 2 Occurrences

#### Laboratory - Additional Microbiology Screens

[] Aerobic culture	Once For 1 Occurrences
[] Anaerobic culture	Once For 1 Occurrences
[] Respiratory culture, quantitative	Once For 1 Occurrences, Mini bronchial alveolar lavage
[] Respiratory pathogen panel with COVID-19 RT-PCR	Once For 1 Occurrences
[] Sputum culture	Once For 1 Occurrences, Sputum
[] Urinalysis screen and microscopy, with reflex to culture	Once For 1 Occurrences
	Specimen Source: Urine
	Specimen Site:

#### Laboratory - Additional Microbiology Screens

[] Aerobic culture	Once
[] Anaerobic culture	Once
[] Gastrointestinal pathogens panel, PCR	Once, Stool
[] Respiratory culture, quantitative	Once, Mini bronchial alveolar lavage
[] Respiratory pathogen panel with COVID-19 RT-PCR	Once
[] Sputum culture	Once, Sputum
[] Urine Culture and Urinalysis	"And" Linked Panel
[] Urine culture Once	e For 1 Occurrences, Urine
[] Urinalysis STA	T For 1 Occurrences

#### Laboratory - Additional Microbiology Screens

[] Aerobic culture	Once For 1 Occurrences
] Anaerobic culture	Once For 1 Occurrences
] Gastrointestinal pathogens panel, PCR	Once For 1 Occurrences, Stool
] Respiratory culture, quantitative	Once For 1 Occurrences, Mini bronchial alveolar lavage
] Respiratory pathogen panel with COVID-19 RT-PCR	Once For 1 Occurrences
] Sputum culture	Once For 1 Occurrences, Sputum
] Urinalysis	Once For 1 Occurrences
] Urine culture	Once For 1 Occurrences, Urine

## Imaging

Chest X -Ray

[] Chest 1 Vw Portable	STAT, 1 time imaging, Starting S at 1:00 AM For 1
[] Chest 2 Vw	STAT, 1 time imaging, Starting S at 1:00 AM For 1

# Consults

#### **Antibiotics Pharmacy Consult**

[] 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
Consults	
[] 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