

## IV / Central Line Access - Hemodynamics Monitoring

### IV / Central Line Access

Initiate and maintain IV

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

### Hemodynamic Monitoring

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

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

### Vital Signs

<input type="checkbox"/> Vital signs - T/P/R/BP	Routine, Every hour For 3 Hours Monitor every 1 hour for 3 hours, or more frequently as indicated by clinical condition and assessment findings, then re-evaluate frequency of vitals assessment.
<input type="checkbox"/> Pulse oximetry	Routine, Daily Current FIO2 or Room Air: Place SpO2 monitor (near infrared spectroscopy)

### Notify

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

### Blood Cultures

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

Lactic Acid - STAT and repeat 2 times every 3 hours

<input type="checkbox"/> Lactic acid level, SEPSIS - Now and repeat 2x every 3 hours	Now and repeat 2x every 3 hours For 3 Occurrences STAT - SPECIMEN MUST BE DELIVERED IMMEDIATELY TO THE LABORATORY. Repeat lactic acid in 3 hours.
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**Crystalloids for Fluid Resuscitation (for hypotension or lactate level GREATER than or EQUAL to 4 mmol/L, for a target MAP 65-70 or SBP GREATER than 90) (Single Response)**

<input checked="" type="checkbox"/> lactated ringer's bolus + lactated ringer's infusion + Vitals Every 15 Minutes X 4 hours	<b>"And" Linked Panel</b>
<input checked="" type="checkbox"/> lactated ringers bolus	1,000 mL, intravenous, for 60 Minutes, once, For 1 Doses Reassess patient after IV fluid bolus given. If target not met (MAP 65 to 70 mmHg or SBP GREATER than 90 mmHg), notify ordering provider prior to administration of second bolus. Doses start immediately. Notify provider immediately upon completion of fluid bolus administration.
<input checked="" type="checkbox"/> lactated ringer's infusion	126 mL/hr, intravenous, continuous, Starting H+60 Minutes 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.
<input checked="" type="checkbox"/> Sepsis vital signs - T/P/R/BP Every 15 minutes x 4 hours	STAT, Every 15 min For 4 Hours
<input type="checkbox"/> sodium choride 0.9% bolus + sodium chloride infusion + Vitals Every 15 Minutes x 4 hours	<b>"And" Linked Panel</b>
<input type="checkbox"/> sodium chloride 0.9 % bolus	1,000 mL, intravenous, for 60 Minutes, once, For 1 Doses Reassess patient after IV fluid bolus given. If target not met (MAP 65 to 70 mmHg or SBP GREATER than 90 mmHg), notify ordering provider prior to administration of second bolus. Doses start immediately. Notify provider immediately upon completion of fluid bolus administration.
<input type="checkbox"/> sodium chloride 0.9% infusion	126 mL/hr, intravenous, continuous, Starting H+60 Minutes 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.
<input type="checkbox"/> Vital signs - T/P/R/BP - Q15min X 4 hours	STAT, Every 15 min For 4 Hours Monitor vital signs (blood pressure, pulse, respiratory rate and temperature) during the IV fluid bolus administration every 15 minutes. Reassess patient and capture one complete sets of vital signs (blood pressure, pulse, respiratory rate and temperature) after IV fluid bolus has completed and one more complete set of vital signs every 15 minutes for a total of TWO COMPLETE SETS OF VITAL SIGNS after the IV fluid bolus infusion has completed. If the patient's MAP is not in the target range of 65 to 70 mmHg or if the SBP is LESS than 90 mmHg then notify ordering provider prior to administration of second bolus. Doses start immediately. Notify provider immediately upon completion of IV fluid bolus administration for provider volume status documentation.

**Antibiotics**

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

Chorioamnionitis (Single Response)

Does your patient have a SEVERE penicillin allergy?

No (Single Response)

ampicillin 2 g IV + gentamicin 5 mg/kg IV

ampicillin IV

**"And" Linked Panel**

2 g, intravenous, for 30 Minutes, 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: Other

Specify: Chorioamnionitis

gentamicin (GARAMYCIN) IV

5 mg/kg, intravenous, for 30 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: Other

Specify: Chorioamnionitis

ampicillin 2 g IV + gentamicin 5 mg/kg IV + clindamycin (CLEOCIN) 900 mg IV

ampicillin IV

**"And" Linked Panel**

2 g, intravenous, for 30 Minutes, 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: Other

Specify: Chorioamnionitis

[ ] gentamicin (GARAMYCIN) IV	5 mg/kg, intravenous, for 30 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: Other Specify: Chorioamnionitis
[ ] 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: Other Specify: Chorioamnionitis
() gentamicin IV + piperacillin-tazobactam (ZOSYN) IV (Single Response)	
() gentamicin 5 mg/kg IV + piperacillin-tazobactam (ZOSYN) 3.375 g IV - NOT HMW	
[ ] gentamicin (GARAMYCIN) IVPB	5 mg/kg, intravenous, for 30 Minutes, every 24 hours First dose STAT - within an hour - after blood and other cultures obtained.
	Classification: Narrow Spectrum Antibiotic
	When multiple antimicrobial agents are ordered, you may administer these immediately at the SAME TIME via different IV sites. Do not wait for the first antibiotic to infuse. If agents are Y-site compatible, they may be administered per Y-site protocols. IF the ordered agents are NOT Y site compatible, then administer the Broad-spectrum antibiotic first. Refer to available Y site compatibility information and determination of broad-spectrum antibiotic selection chart. Reason for Therapy: Bacterial Infection Suspected Indication: Other Specify: Chorioamnionitis

[ ] piperacillin-tazobactam (ZOSYN) IV	3.375 g, intravenous, for .5 Hours, every 6 hours First dose STAT - within an hour - after blood and other cultures obtained.
	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: Other Specify: Chorioamnionitis
() gentamicin 5 mg/kg IV + piperacillin-tazobactam (ZOSYN) 3.375 g IV - HMW Only	
[ ] gentamicin (GARAMYCIN) IVPB	5 mg/kg, intravenous, for 30 Minutes, every 24 hours First dose STAT - within an hour - after blood and other cultures obtained. Reason for Therapy: Bacterial Infection Suspected Indication: Other Specify: Chorioamnionitis
[ ] piperacillin-tazobactam (ZOSYN) 3.375 g IV	<b>"Followed by" Linked Panel</b>
[ ] piperacillin-tazobactam (ZOSYN) 3.375 g IV Once	3.375 g, intravenous, for .5 Hours, once, For 1 Doses Classification: Broad Spectrum Antibiotic
	When multiple antimicrobial agents are ordered, you may administer these immediately at the SAME TIME via different IV sites. Do not wait for the first antibiotic to infuse. If agents are Y-site compatible, they may be administered per Y-site protocols. IF the ordered agents are NOT Y site compatible, then administer the Broad-spectrum antibiotic first. Refer to available Y site compatibility information and determination of broad-spectrum antibiotic selection chart. Reason for Therapy: Bacterial Infection Suspected Indication: Sepsis
[ ] piperacillin-tazobactam (ZOSYN) 3.375 g IV every 8 hours	3.375 g, intravenous, for 4 Hours, every 8 hours, Starting H+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
() If Pseudomonas Suspected - gentamicin 5 mg/kg IV + piperacillin-tazobactam (ZOSYN) 4.5 g IV - NOT HMW	

[ ] gentamicin (GARAMYCIN) IVPB	5 mg/kg, intravenous, for 30 Minutes, every 24 hours First dose STAT - within an hour - after blood and other cultures obtained.
	Classification: Narrow Spectrum Antibiotic
	When multiple antimicrobial agents are ordered, you may administer these immediately at the SAME TIME via different IV sites. Do not wait for the first antibiotic to infuse. If agents are Y-site compatible, they may be administered per Y-site protocols. IF the ordered agents are NOT Y site compatible, then administer the Broad-spectrum antibiotic first. Refer to available Y site compatibility information and determination of broad-spectrum antibiotic selection chart.
	Reason for Therapy: Bacterial Infection Suspected
	Indication: Other
	Specify: Chorioamnionitis
[ ] piperacillin-tazobactam (ZOSYN) IV	4.5 g, intravenous, for .5 Hours, every 6 hours First dose STAT - within an hour - after blood and other cultures obtained.
	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: Other
	Specify: Chorioamnionitis
() If Pseudomonas Suspected - gentamicin 5 mg/kg IV + piperacillin-tazobactam (ZOSYN) 4.5 g IV - HMW Only	
[ ] gentamicin (GARAMYCIN) IVPB	5 mg/kg, intravenous, for 30 Minutes, every 24 hours First dose STAT - within an hour - after blood and other cultures obtained.
	Reason for Therapy: Bacterial Infection Suspected
	Indication: Other
	Specify: Chorioamnionitis
[ ] piperacillin-tazobactam (ZOSYN) 4.5 g IV	<b>"Followed by" Linked Panel</b>
[ ] 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

<input type="checkbox"/> 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
<p>When multiple antimicrobial agents are ordered, you may administer these immediately at the SAME TIME via different IV sites. Do not wait for the first antibiotic to infuse. If agents are Y-site compatible, they may be administered per Y-site protocols. IF the ordered agents are NOT Y site compatible, then administer the Broad-spectrum antibiotic first. Refer to available Y site compatibility information and determination of broad-spectrum antibiotic selection chart. Reason for Therapy: Bacterial Infection Suspected Indication: Sepsis</p>	
<input type="checkbox"/> gentamicin 5 mg/kg IV + clindamycin (CLEOCIN) 900 mg IV	<b>"And" Linked Panel</b>
<input type="checkbox"/> gentamicin (GARAMYCIN) IV	5 mg/kg, intravenous, for 30 Minutes, every 24 hours Classification: Narrow Spectrum Antibiotic
<p>When multiple antimicrobial agents are ordered, you may administer these immediately at the SAME TIME via different IV sites. Do not wait for the first antibiotic to infuse. If agents are Y-site compatible, they may be administered per Y-site protocols. IF the ordered agents are NOT Y site compatible, then administer the Broad-spectrum antibiotic first. Refer to available Y site compatibility information and determination of broad-spectrum antibiotic selection chart. Reason for Therapy: Bacterial Infection Suspected Indication: Other Specify: Chorioamnionitis</p>	
<input type="checkbox"/> clindamycin (CLEOCIN) IV	900 mg, intravenous, for 30 Minutes, every 8 hours Classification: Broad Spectrum Antibiotic
<p>When multiple antimicrobial agents are ordered, you may administer these immediately at the SAME TIME via different IV sites. Do not wait for the first antibiotic to infuse. If agents are Y-site compatible, they may be administered per Y-site protocols. IF the ordered agents are NOT Y site compatible, then administer the Broad-spectrum antibiotic first. Refer to available Y site compatibility information and determination of broad-spectrum antibiotic selection chart Reason for Therapy: Bacterial Infection Suspected Indication: Other Specify: Chorioamnionitis</p>	
<input type="checkbox"/> Yes (Single Response)	
<input type="checkbox"/> aztreonam (AZACTAM) 2 g IV + gentamicin 5 mg/kg IV	<b>"And" Linked Panel</b>
<input type="checkbox"/> aztreonam (AZACTAM) IV	2 g, intravenous, every 6 hours Classification: Broad Spectrum Antibiotic
<p>When multiple antimicrobial agents are ordered, you may administer these immediately at the SAME TIME via different IV sites. Do not wait for the first antibiotic to infuse. If agents are Y-site compatible, they may be administered per Y-site protocols. IF the ordered agents are NOT Y site compatible, then administer the Broad-spectrum antibiotic first. Refer to available Y site compatibility information and determination of broad-spectrum antibiotic selection chart. Reason for Therapy: Bacterial Infection Suspected Indication: Sepsis</p>	

[ ] gentamicin (GARAMYCIN) IV	5 mg/kg, intravenous, for 30 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: Other Specify: Chorioamnionitis
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[ ] clindamycin (CLEOCIN) IV	900 mg, intravenous, for 30 Minutes, every 8 hours Classification: Narrow Spectrum Antibiotic
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() aztreonam (AZACTAM) 2 g intraMUSCULAR + gentamicin 5 mg/kg IV	<b>"And" Linked Panel</b>



[ ] aztreonam (AZACTAM) IM	2 g, intramuscular, 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
[ ] gentamicin (GARAMYCIN) IV	5 mg/kg, intravenous, for 30 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: Other Specify: Chorioamnionitis
() aztreonam (AZACTAM) 2 g intraMUSCULAR + gentamicin 5 mg/kg IV + clindamycin (CLEOCIN) 900 mg IV	<b>"And" Linked Panel</b>
[ ] aztreonam (AZACTAM) IM	2 g, intramuscular, 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 IM Route Selection: I have opted to select the IM route because IV access could not be established
[ ] gentamicin (GARAMYCIN) IV	5 mg/kg, intravenous, for 30 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: Other Specify: Chorioamnionitis

<input type="checkbox"/> clindamycin (CLEOCIN) IV	<p>900 mg, intravenous, for 30 Minutes, every 8 hours          Classification: Narrow Spectrum Antibiotic</p> <p>When multiple antimicrobial agents are ordered, you may administer these immediately at the SAME TIME via different IV sites. Do not wait for the first antibiotic to infuse. If agents are Y-site compatible, they may be administered per Y-site protocols. IF the ordered agents are NOT Y site compatible, then administer the Broad-spectrum antibiotic first. Refer to available Y site compatibility information and determination of broad-spectrum antibiotic selection chart.          Reason for Therapy: Bacterial Infection Suspected          Indication: Sepsis</p>
<input type="checkbox"/> Community-Acquired Pneumonia (Single Response) Does your patient have a SEVERE penicillin allergy?	
<input type="checkbox"/> No (Single Response)	
<input type="checkbox"/> cefTRIAxone (ROCEPHIN) 1 g IV + azithromycin (ZITHROMAX) 500 mg IV	<p><b>"And" Linked Panel</b></p>
<input type="checkbox"/> cefTRIAxone (ROCEPHIN) IV	<p>1 g, intravenous, for 30 Minutes, every 24 hours          Classification: Broad Spectrum Antibiotic</p> <p>When multiple antimicrobial agents are ordered, you may administer these immediately at the SAME TIME via different IV sites. Do not wait for the first antibiotic to infuse. If agents are Y-site compatible, they may be administered per Y-site protocols. IF the ordered agents are NOT Y site compatible, then administer the Broad-spectrum antibiotic first. Refer to available Y site compatibility information and determination of broad-spectrum antibiotic selection chart.          Reason for Therapy: Bacterial Infection Suspected          Indication: Sepsis</p>
<input type="checkbox"/> azithromycin (ZITHROMAX) IV	<p>500 mg, intravenous, for 60 Minutes, every 24 hours          Classification: Narrow Spectrum Antibiotic</p> <p>When multiple antimicrobial agents are ordered, you may administer these immediately at the SAME TIME via different IV sites. Do not wait for the first antibiotic to infuse. If agents are Y-site compatible, they may be administered per Y-site protocols. IF the ordered agents are NOT Y site compatible, then administer the Broad-spectrum antibiotic first. Refer to available Y site compatibility information and determination of broad-spectrum antibiotic selection chart.          Reason for Therapy: Bacterial Infection Suspected          Indication: Sepsis</p>
<input type="checkbox"/> cefTRIAxone (ROCEPHIN) 1 g intraMUSCULAR + azithromycin (ZITHROMAX) 500 mg IV	<p><b>"And" Linked Panel</b></p>
<input type="checkbox"/> cefTRIAxone (ROCEPHIN) IM	<p>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          Indication: Sepsis          IM Route Selection: I have opted to select the IM route because IV access could not be established</p>

<input type="checkbox"/> azithromycin (ZITHROMAX) IV	<p>500 mg, intravenous, for 60 Minutes, every 24 hours  Classification: Narrow Spectrum Antibiotic</p> <p>When multiple antimicrobial agents are ordered, you may administer these immediately at the SAME TIME via different IV sites. Do not wait for the first antibiotic to infuse. If agents are Y-site compatible, they may be administered per Y-site protocols. IF the ordered agents are NOT Y site compatible, then administer the Broad-spectrum antibiotic first. Refer to available Y site compatibility information and determination of broad-spectrum antibiotic selection chart.  Reason for Therapy: Bacterial Infection Suspected  Indication: Sepsis</p>
<p>( ) Yes (Single Response)</p>	
<input type="checkbox"/> aztreonam (AZACTAM) 2 g IV + azithromycin (ZITHROMAX) 500 mg IV	<p><b>"And" Linked Panel</b></p>
<input type="checkbox"/> aztreonam (AZACTAM) IV	<p>2 g, intravenous, every 6 hours  Classification: Broad Spectrum Antibiotic</p> <p>When multiple antimicrobial agents are ordered, you may administer these immediately at the SAME TIME via different IV sites. Do not wait for the first antibiotic to infuse. If agents are Y-site compatible, they may be administered per Y-site protocols. IF the ordered agents are NOT Y site compatible, then administer the Broad-spectrum antibiotic first. Refer to available Y site compatibility information and determination of broad-spectrum antibiotic selection chart.  Reason for Therapy: Bacterial Infection Suspected  Indication: Sepsis</p>
<input type="checkbox"/> azithromycin (ZITHROMAX) IV	<p>500 mg, intravenous, for 60 Minutes, every 24 hours  Classification: Narrow Spectrum Antibiotic</p> <p>When multiple antimicrobial agents are ordered, you may administer these immediately at the SAME TIME via different IV sites. Do not wait for the first antibiotic to infuse. If agents are Y-site compatible, they may be administered per Y-site protocols. IF the ordered agents are NOT Y site compatible, then administer the Broad-spectrum antibiotic first. Refer to available Y site compatibility information and determination of broad-spectrum antibiotic selection chart.  Reason for Therapy: Bacterial Infection Suspected  Indication: Sepsis</p>
<input type="checkbox"/> aztreonam (AZACTAM) 2 g intraMUSCULAR + azithromycin (ZITHROMAX) 500 mg IV	<p><b>"And" Linked Panel</b></p>
<input type="checkbox"/> aztreonam (AZACTAM) IM	<p>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</p>

<input type="checkbox"/> azithromycin (ZITHROMAX) IV	<p>500 mg, intravenous, for 60 Minutes, every 24 hours  Classification: Narrow Spectrum Antibiotic</p> <p>When multiple antimicrobial agents are ordered, you may administer these immediately at the SAME TIME via different IV sites. Do not wait for the first antibiotic to infuse. If agents are Y-site compatible, they may be administered per Y-site protocols. IF the ordered agents are NOT Y site compatible, then administer the Broad-spectrum antibiotic first. Refer to available Y site compatibility information and determination of broad-spectrum antibiotic selection chart.  Reason for Therapy: Bacterial Infection Suspected  Indication: Sepsis  IM Route Selection: I have opted to select the IM route because IV access could not be established</p>
<input type="checkbox"/> Nosocomial Pneumonia OR Community-Acquired Pneumonia with Multi Drug-Resistant Risk (Single Response) (e.g. Nursing home resident, IV antibiotic exposure or hospitalization within previous 90 days, chronic dialysis, immunosuppressed, on home infusion therapy or home wound care) Combined use of piperacillin/tazobactam and vancomycin may be associated with an increased incidence of acute kidney injury.  Does your patient have a SEVERE penicillin allergy?	
<input type="checkbox"/> No (Single Response) Use meropenem (MERREM) if history of infection with ESBL-producing organism or recent prolonged treatment with piperacillin/tazobactam or cefepime.	
<input type="checkbox"/> ceFEPime 2 g IV + vancomycin 15 mg/kg IV <input type="checkbox"/> ceFEPime (MAXIPIME) IV	<p>2 g, intravenous, every 8 hours  Classification: Broad Spectrum Antibiotic</p> <p>When multiple antimicrobial agents are ordered, you may administer these immediately at the SAME TIME via different IV sites. Do not wait for the first antibiotic to infuse. If agents are Y-site compatible, they may be administered per Y-site protocols. IF the ordered agents are NOT Y site compatible, then administer the Broad-spectrum antibiotic first. Refer to available Y site compatibility information and determination of broad-spectrum antibiotic selection chart.  Reason for Therapy: Bacterial Infection Suspected  Indication: Sepsis</p>
<input type="checkbox"/> vancomycin (VANCOCIN) IV + Pharmacy Consult to Dose	
<input type="checkbox"/> vancomycin (VANCOCIN)	<p>15 mg/kg, intravenous, every 12 hours  Classification: Narrow Spectrum Antibiotic</p> <p>When multiple antimicrobial agents are ordered, you may administer these immediately at the SAME TIME via different IV sites. Do not wait for the first antibiotic to infuse. If agents are Y-site compatible, they may be administered per Y-site protocols. IF the ordered agents are NOT Y site compatible, then administer the Broad-spectrum antibiotic first. Refer to available Y site compatibility information and determination of broad-spectrum antibiotic selection chart.  Reason for Therapy: Bacterial Infection Suspected  Indication: Sepsis</p>
<input type="checkbox"/> Pharmacy consult to manage vancomycin	<p>STAT, Until discontinued, Starting S  Indication:</p>

[ ] Adjunct Antibiotics - gentamicin 5 mg/kg IV +/- metroNIDAZOLE 500 mg IV	5 mg/kg, intravenous, for 30 Minutes, every 24 hours Classification: Narrow Spectrum Antibiotic
[ ] gentamicin (GARAMYCIN) 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 may be administered per Y-site protocols. IF the ordered agents are NOT Y site compatible, then administer the Broad-spectrum antibiotic 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 Reason for Therapy: Bacterial Infection Suspected Indication: Sepsis
() ceFEPime 2 g intraMUSCULAR + vancomycin 15 mg/kg 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 Indication: Sepsis IM Route Selection: I have opted to select the IM route because IV access could not be established
[ ] vancomycin (VANCOGIN) IV + Pharmacy Consult to Dose	
[ ] vancomycin (VANCOGIN)	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
[ ] Pharmacy consult to manage vancomycin	STAT, Until discontinued, Starting S Indication:
[ ] Adjunct Antibiotics - gentamicin 5 mg/kg IV +/- metroNIDAZOLE 500 mg IV	

[ ] gentamicin (GARAMYCIN) IVPB	5 mg/kg, intravenous, for 30 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
[ ] metroNIDAZOLE (FLAGYL) IV	500 mg, intravenous, every 8 hours Reason for Therapy: Bacterial Infection Suspected Indication: Sepsis
() piperacillin-tazobactam (ZOSYN) 4.5 g IV + vancomycin 15 mg/kg IV	
[ ] 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 Type of Therapy: New Anti-Infective Order
[ ] vancomycin (VANCOGIN) IV + Pharmacy Consult to Dose	
[ ] vancomycin (VANCOGIN)	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
[ ] Pharmacy consult to manage vancomycin	STAT, Until discontinued, Starting S Indication:
[ ] Adjunct Antibiotics - gentamicin 5 mg/kg IV +/- metroNIDAZOLE 500 mg IV	

[ ] gentamicin (GARAMYCIN) IVPB	5 mg/kg, intravenous, for 30 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
[ ] metroNIDAZOLE (FLAGYL) IV	500 mg, intravenous, every 8 hours Reason for Therapy: Bacterial Infection Suspected Indication: Sepsis
( ) piperacillin-tazobactam (ZOSYN) 4.5 g IV + vancomycin 15 mg/kg IV	
[ ] piperacillin-tazobactam (ZOSYN) 4.5 g IV	<b>"Followed by" Linked Panel</b>
[ ] 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
[ ] 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
[ ] vancomycin (VANCOCIN) IV + Pharmacy Consult to Dose	

[ ] 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
[ ] Pharmacy consult to manage vancomycin	STAT, Until discontinued, Starting S Indication:
[ ] Adjunct Antibiotics - gentamicin 5 mg/kg IV +/- metroNIDAZOLE 500 mg IV	
[ ] gentamicin (GARAMYCIN) IVPB	5 mg/kg, intravenous, for 30 Minutes, every 24 hours Reason for Therapy: Bacterial Infection Suspected Indication: Sepsis
[ ] metroNIDAZOLE (FLAGYL) IV	500 mg, intravenous, every 8 hours Reason for Therapy: Bacterial Infection Suspected Indication: Sepsis
() meropenem (MERREM) 500 mg IV + vancomycin 15 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
[ ] vancomycin (VANCOCIN) IV + Pharmacy Consult to Dose	
[ ] 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
[ ] Pharmacy consult to manage vancomycin	STAT, Until discontinued, Starting S Indication:
[ ] Adjunct Antibiotics - gentamicin 5 mg/kg IV +/- metroNIDAZOLE 500 mg IV	



[ ] gentamicin (GARAMYCIN) IVPB	5 mg/kg, intravenous, for 30 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
[ ] metroNIDAZOLE (FLAGYL) IV	500 mg, intravenous, every 8 hours Reason for Therapy: Bacterial Infection Suspected Indication: Sepsis
() meropenem (MERREM) 500 mg intraMUSCULAR + vancomycin 15 mg/kg IV	
[ ] meropenem (MERREM) IM	500 mg, 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
[ ] vancomycin (VANCOCIN) IV + Pharmacy Consult to Dose	
[ ] 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
[ ] Pharmacy consult to manage vancomycin	STAT, Until discontinued, Starting S Indication:
[ ] Adjunct Antibiotics - gentamicin 5 mg/kg IV +/- metroNIDAZOLE 500 mg IV	
[ ] gentamicin (GARAMYCIN) IVPB	5 mg/kg, intravenous, for 30 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

[ ] metronIDAZOLE (FLAGYL) IV	500 mg, intravenous, every 8 hours Classification: Narrow Spectrum Antibiotic
<p>When multiple antimicrobial agents are ordered, you may administer these immediately at the SAME TIME via different IV sites. Do not wait for the first antibiotic to infuse. If agents are Y-site compatible, they may be administered per Y-site protocols. IF the ordered agents are NOT Y site compatible, then administer the Broad-spectrum antibiotic first. Refer to available Y site compatibility information and determination of broad-spectrum antibiotic selection chart.</p> <p>Reason for Therapy: Bacterial Infection Suspected Indication: Sepsis</p>	
<p>( ) Yes (Single Response) (i.e. Type 1 immediate hypersensitivity reaction - anaphylaxis, bronchospasm, angioedema, urticaria)</p>	
<p>( ) aztreonam (AZACTAM) 2 g IV + vancomycin 15 mg/kg IV</p>	
[ ] aztreonam (AZACTAM) IV	2 g, intravenous, every 8 hours Classification: Narrow Spectrum Antibiotic
<p>When multiple antimicrobial agents are ordered, you may administer these immediately at the SAME TIME via different IV sites. Do not wait for the first antibiotic to infuse. If agents are Y-site compatible, they may be administered per Y-site protocols. IF the ordered agents are NOT Y site compatible, then administer the Broad-spectrum antibiotic first. Refer to available Y site compatibility information and determination of broad-spectrum antibiotic selection chart.</p> <p>Reason for Therapy: Bacterial Infection Suspected Indication: Sepsis</p>	
<p>[ ] vancomycin (VANCOCIN) IV + Pharmacy Consult to Dose</p>	
[ ] vancomycin (VANCOCIN)	15 mg/kg, intravenous, every 12 hours Classification: Narrow Spectrum Antibiotic
<p>When multiple antimicrobial agents are ordered, you may administer these immediately at the SAME TIME via different IV sites. Do not wait for the first antibiotic to infuse. If agents are Y-site compatible, they may be administered per Y-site protocols. IF the ordered agents are NOT Y site compatible, then administer the Broad-spectrum antibiotic first. Refer to available Y site compatibility information and determination of broad-spectrum antibiotic selection chart.</p> <p>Reason for Therapy: Bacterial Infection Suspected Indication: Sepsis</p>	
<p>[ ] Pharmacy consult to manage vancomycin STAT, Until discontinued, Starting S Indication:</p>	
<p>[ ] Adjunct Antibiotics - gentamicin 5 mg/kg IV +/- metronIDAZOLE 500 mg IV</p>	

[ ] gentamicin (GARAMYCIN) IVPB	5 mg/kg, intravenous, for 30 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
[ ] 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) 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 Indication: Sepsis IM Route Selection: I have opted to select the IM route because IV access could not be established
[ ] vancomycin (VANCOGIN) IV + Pharmacy Consult to Dose	
[ ] vancomycin (VANCOGIN)	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
[ ] Pharmacy consult to manage vancomycin	STAT, Until discontinued, Starting S Indication:
[ ] Adjunct Antibiotics - gentamicin 5 mg/kg IV +/- metroNIDAZOLE 500 mg IV	

gentamicin (GARAMYCIN) IVPB

5 mg/kg, intravenous, for 30 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

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

Urinary Tract Infection (Single Response)

Does your patient have a SEVERE penicillin allergy?

No (Single Response)

cefTRIAxone (ROCEPHIN) IV

cefTRIAxone (ROCEPHIN) IV

**"Followed by" Linked Panel**

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

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

cefTRIAxone (ROCEPHIN) IV

1 g, intravenous, for 30 Minutes, every 24 hours, Starting H+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

<p>( ) cefTRIAxone (ROCEPHIN) intraMUSCULAR</p>	<p>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          Indication: Sepsis          IM Route Selection: I have opted to select the IM route because IV access could not be established</p>
<p>( ) ceFEPime (MAXIPIME) IV</p>	<p>2 g, intravenous, every 8 hours          Classification: Broad Spectrum Antibiotic</p> <p>When multiple antimicrobial agents are ordered, you may administer these immediately at the SAME TIME via different IV sites. Do not wait for the first antibiotic to infuse. If agents are Y-site compatible, they may be administered per Y-site protocols. IF the ordered agents are NOT Y site compatible, then administer the Broad-spectrum antibiotic first. Refer to available Y site compatibility information and determination of broad-spectrum antibiotic selection chart.          Reason for Therapy: Bacterial Infection Suspected          Indication: Sepsis</p>
<p>( ) ceFEPime (MAXIPIME) intraMUSCULAR</p>	<p>2 g, intramuscular, every 8 hours          Intramuscular route selected because no IV access available.          Administer dose by deep IM into large muscle mass (e.g. gluteal muscles or lateral part of the thigh).          Reason for Therapy: Bacterial Infection Suspected          Indication: Sepsis          IM Route Selection: I have opted to select the IM route because IV access could not be established</p>
<p>( ) piperacillin-tazobactam (ZOSYN) IV</p>	<p>4.5 g, intravenous, for .5 Hours, every 6 hours          Classification: Broad Spectrum Antibiotic</p> <p>When multiple antimicrobial agents are ordered, you may administer these immediately at the SAME TIME via different IV sites. Do not wait for the first antibiotic to infuse. If agents are Y-site compatible, they may be administered per Y-site protocols. IF the ordered agents are NOT Y site compatible, then administer the Broad-spectrum antibiotic first. Refer to available Y site compatibility information and determination of broad-spectrum antibiotic selection chart.          Reason for Therapy: Bacterial Infection Suspected          Indication: Sepsis</p>
<p>( ) meropenem (MERREM) IV</p>	<p>500 mg, intravenous, every 6 hours          Classification: Broad Spectrum Antibiotic</p> <p>When multiple antimicrobial agents are ordered, you may administer these immediately at the SAME TIME via different IV sites. Do not wait for the first antibiotic to infuse. If agents are Y-site compatible, they may be administered per Y-site protocols. IF the ordered agents are NOT Y site compatible, then administer the Broad-spectrum antibiotic first. Refer to available Y site compatibility information and determination of broad-spectrum antibiotic selection chart.          Reason for Therapy: Bacterial Infection Suspected          Indication: Sepsis</p>

<input type="checkbox"/> meropenem (MERREM) intraMUSCULAR	500 mg, 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
<input type="checkbox"/> No (Single Response)	
<input type="checkbox"/> cefTRIAxone (ROCEPHIN) IV	<b>"Followed by" Linked Panel</b> 2 g, intravenous, for 30 Minutes, once, For 1 Doses Classification: Broad Spectrum Antibiotic
<input type="checkbox"/> cefTRIAxone (ROCEPHIN) 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
<input type="checkbox"/> cefTRIAxone (ROCEPHIN) IV	1 g, intravenous, for 30 Minutes, every 24 hours, Starting H+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
<input type="checkbox"/> cefTRIAxone (ROCEPHIN) intraMUSCULAR	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 Indication: Sepsis
<input type="checkbox"/> 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

<input type="checkbox"/> 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 Indication: Sepsis IM Route Selection: I have opted to select the IM route because IV access could not be established
<input type="checkbox"/> piperacillin-tazobactam (ZOSYN) 4.5 g IV	<b>"Followed by" Linked Panel</b>
<input type="checkbox"/> piperacillin-tazobactam (ZOSYN) 4.5 g IV Once	4.5 g, intravenous, for .5 Hours, once, For 1 Doses Classification: Broad Spectrum Antibiotic  When multiple antimicrobial agents are ordered, you may administer these immediately at the SAME TIME via different IV sites. Do not wait for the first antibiotic to infuse. If agents are Y-site compatible, they may be administered per Y-site protocols. IF the ordered agents are NOT Y site compatible, then administer the Broad-spectrum antibiotic first. Refer to available Y site compatibility information and determination of broad-spectrum antibiotic selection chart. Reason for Therapy: Bacterial Infection Suspected Indication: Sepsis
<input type="checkbox"/> piperacillin-tazobactam (ZOSYN) 4.5 g IV every 8 hours	4.5 g, intravenous, for 4 Hours, every 8 hours, Starting H+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
<input type="checkbox"/> 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
<input type="checkbox"/> meropenem (MERREM) intraMUSCULAR	500 mg, 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

Yes (Single Response)

aztreonam (AZACTAM) 2 g IV or intraMUSCULAR (Single Response)

aztreonam (AZACTAM) 2 g IVPB

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

aztreonam (AZACTAM) 2g 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).

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

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

vancomycin (VANCOCIN) 15 mg/kg IV + Pharmacy Consult to Dose

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

Pharmacy consult to manage vancomycin

STAT, Until discontinued, Starting S  
Indication:

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

Does your patient have a SEVERE penicillin allergy?

No (Single Response)

piperacillin-tazobactam (ZOSYN) 3.375 g IV + vancomycin 15 mg/kg IV -NOT HMW HMWB



<input type="checkbox"/> 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
<input type="checkbox"/> vancomycin (VANCOCIN) IV + Pharmacy Consult to Dose	
<input type="checkbox"/> 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
<input type="checkbox"/> Pharmacy consult to manage vancomycin	STAT, Until discontinued, Starting S Indication:
<input type="checkbox"/> 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
<input type="checkbox"/> piperacillin-tazobactam (ZOSYN) 3.375 g IV + vancomycin 15 mg/kg IV - HMW HMWB Only	
<input type="checkbox"/> piperacillin-tazobactam (ZOSYN) 3.375 g IV	<b>"Followed by" Linked Panel</b>
<input type="checkbox"/> piperacillin-tazobactam (ZOSYN) 3.375 g IV Once	3.375 g, intravenous, for .5 Hours, once, For 1 Doses Classification: Broad Spectrum Antibiotic  When multiple antimicrobial agents are ordered, you may administer these immediately at the SAME TIME via different IV sites. Do not wait for the first antibiotic to infuse. If agents are Y-site compatible, they may be administered per Y-site protocols. IF the ordered agents are NOT Y site compatible, then administer the Broad-spectrum antibiotic first. Refer to available Y site compatibility information and determination of broad-spectrum antibiotic selection chart. Reason for Therapy: Bacterial Infection Suspected Indication: Sepsis

[ ] piperacillin-tazobactam (ZOSYN) 3.375 g IV every 8 hours	3.375 g, intravenous, for 4 Hours, every 8 hours, Starting H+8 Hours Classification: Broad Spectrum Antibiotic
<p>When multiple antimicrobial agents are ordered, you may administer these immediately at the SAME TIME via different IV sites. Do not wait for the first antibiotic to infuse. If agents are Y-site compatible, they may be administered per Y-site protocols. IF the ordered agents are NOT Y site compatible, then administer the Broad-spectrum antibiotic first. Refer to available Y site compatibility information and determination of broad-spectrum antibiotic selection chart. Reason for Therapy: Bacterial Infection Suspected Indication: Sepsis</p>	
[ ] vancomycin (VANCOCIN) IV + Pharmacy Consult to Dose	
[ ] vancomycin (VANCOCIN)	15 mg/kg, intravenous, every 12 hours Classification: Narrow Spectrum Antibiotic
<p>When multiple antimicrobial agents are ordered, you may administer these immediately at the SAME TIME via different IV sites. Do not wait for the first antibiotic to infuse. If agents are Y-site compatible, they may be administered per Y-site protocols. IF the ordered agents are NOT Y site compatible, then administer the Broad-spectrum antibiotic first. Refer to available Y site compatibility information and determination of broad-spectrum antibiotic selection chart. Reason for Therapy: Bacterial Infection Suspected Indication: Sepsis</p>	
[ ] Pharmacy consult to manage vancomycin	STAT, Until discontinued, Starting S Indication:
[ ] Optional Adjunct: clindamycin (CLEOCIN) 900 mg IV	900 mg, intravenous, for 30 Minutes, every 8 hours Classification: Narrow Spectrum Antibiotic
<p>When multiple antimicrobial agents are ordered, you may administer these immediately at the SAME TIME via different IV sites. Do not wait for the first antibiotic to infuse. If agents are Y-site compatible, they may be administered per Y-site protocols. IF the ordered agents are NOT Y site compatible, then administer the Broad-spectrum antibiotic first. Refer to available Y site compatibility information and determination of broad-spectrum antibiotic selection chart. Reason for Therapy: Bacterial Infection Suspected Indication: Sepsis</p>	
<p>( ) If Pseudomonas Suspected - piperacillin-tazobactam (ZOSYN) 4.5 g IV + vancomycin 15 mg/kg IV - HMW HMWB Only</p>	
[ ] piperacillin-tazobactam (ZOSYN) 4.5 g IV + vancomycin 15 mg/kg IV - HMW HMWB Only	
[ ] piperacillin-tazobactam (ZOSYN) 4.5 g IV	<b>"Followed by" Linked Panel</b>

[ ] 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
[ ] 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
[ ] vancomycin (VANCOCIN) IV + Pharmacy Consult to Dose	
[ ] 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
[ ] Pharmacy consult to manage vancomycin	STAT, Until discontinued, Starting S Indication:
[ ] 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

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

If Pseudomonas Suspected - piperacillin-tazobactam (ZOSYN) 4.5 g IV + vancomycin 15 mg/kg IV

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

vancomycin (VANCOCIN) IV + Pharmacy Consult to Dose

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

Pharmacy consult to manage vancomycin

STAT, Until discontinued, Starting S  
Indication:

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

Yes (Single Response)

aztreonam (AZACTAM) 2 g IV + vancomycin 15 mg/kg IV + clindamycin (CLEOCIN) 900 mg IV

<input type="checkbox"/> aztreonam (AZACTAM) IV	<p>2 g, intravenous, every 8 hours  Classification: Broad Spectrum Antibiotic</p> <p>When multiple antimicrobial agents are ordered, you may administer these immediately at the SAME TIME via different IV sites. Do not wait for the first antibiotic to infuse. If agents are Y-site compatible, they may be administered per Y-site protocols. IF the ordered agents are NOT Y site compatible, then administer the Broad-spectrum antibiotic first. Refer to available Y site compatibility information and determination of broad-spectrum antibiotic selection chart.  Reason for Therapy: Bacterial Infection Suspected  Indication: Sepsis</p>
<input type="checkbox"/> vancomycin (VANCOCIN) IV + Pharmacy Consult to Dose	
<input type="checkbox"/> vancomycin (VANCOCIN) IV	<p>15 mg/kg, intravenous, every 12 hours  Classification: Narrow Spectrum Antibiotic</p> <p>When multiple antimicrobial agents are ordered, you may administer these immediately at the SAME TIME via different IV sites. Do not wait for the first antibiotic to infuse. If agents are Y-site compatible, they may be administered per Y-site protocols. IF the ordered agents are NOT Y site compatible, then administer the Broad-spectrum antibiotic first. Refer to available Y site compatibility information and determination of broad-spectrum antibiotic selection chart.  Reason for Therapy: Bacterial Infection Suspected  Indication: Sepsis</p>
<input type="checkbox"/> Pharmacy consult to manage vancomycin	<p>STAT, Until discontinued, Starting S  Indication:</p>
<input type="checkbox"/> clindamycin (CLEOCIN) IV	<p>900 mg, intravenous, for 30 Minutes, every 8 hours  Classification: Narrow Spectrum Antibiotic</p> <p>When multiple antimicrobial agents are ordered, you may administer these immediately at the SAME TIME via different IV sites. Do not wait for the first antibiotic to infuse. If agents are Y-site compatible, they may be administered per Y-site protocols. IF the ordered agents are NOT Y site compatible, then administer the Broad-spectrum antibiotic first. Refer to available Y site compatibility information and determination of broad-spectrum antibiotic selection chart.  Reason for Therapy: Bacterial Infection Suspected  Indication: Sepsis</p>
<input type="checkbox"/> aztreonam (AZACTAM) 2 g IV + vancomycin 15 mg/kg IV + metroNIDAZOLE (FLAGYL) 500 mg IV	
<input type="checkbox"/> aztreonam (AZACTAM) IV	<p>2 g, intravenous, every 8 hours  Classification: Broad Spectrum Antibiotic</p> <p>When multiple antimicrobial agents are ordered, you may administer these immediately at the SAME TIME via different IV sites. Do not wait for the first antibiotic to infuse. If agents are Y-site compatible, they may be administered per Y-site protocols. IF the ordered agents are NOT Y site compatible, then administer the Broad-spectrum antibiotic first. Refer to available Y site compatibility information and determination of broad-spectrum antibiotic selection chart.  Reason for Therapy: Bacterial Infection Suspected  Indication: Sepsis</p>
<input type="checkbox"/> vancomycin (VANCOCIN) IV + Pharmacy Consult to Dose	

[ ] vancomycin (VANCOCIN) IV	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
[ ] Pharmacy consult to manage vancomycin	STAT, Until discontinued, Starting S Indication:
[ ] 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 + vancomycin 15 mg/kg IV + clindamycin (CLEOCIN) 900 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
[ ] vancomycin (VANCOCIN) IV + Pharmacy Consult to Dose	
[ ] 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
[ ] Pharmacy consult to manage vancomycin	STAT, Until discontinued, Starting S Indication:

[ ] clindamycin (CLEOCIN) IV	900 mg, intravenous, for 30 Minutes, every 8 hours Classification: Narrow Spectrum Antibiotic
() aztreonam (AZACTAM) 2 g intraMUSCULAR + vancomycin 15 mg/kg IV + metronIDAZOLE (FLAGYL) 500 mg 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
[ ] 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).  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 Consult to Dose	15 mg/kg, intravenous, every 12 hours Classification: Narrow Spectrum Antibiotic
[ ] vancomycin (VANCOCIN)	When multiple antimicrobial agents are ordered, you may administer these immediately at the SAME TIME via different IV sites. Do not wait for the first antibiotic to infuse. If agents are Y-site compatible, they may be administered per Y-site protocols. IF the ordered agents are NOT Y site compatible, then administer the Broad-spectrum antibiotic 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 manage vancomycin	STAT, Until discontinued, Starting S Indication:

<input type="checkbox"/> 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	
<input type="checkbox"/> Sepsis of Unknown Source or IV Catheter-Related Infection (Single Response)	
Does your patient have a SEVERE penicillin allergy?	
<input type="checkbox"/> No (Single Response)	
<input type="checkbox"/> ceFEPime 2 g IV + vancomycin 15 mg/kg IV	
<input type="checkbox"/> 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	
<input type="checkbox"/> vancomycin (VANCOCIN) IV + Pharmacy Consult to Dose	
<input type="checkbox"/> 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	
<input type="checkbox"/> Pharmacy consult to manage vancomycin	STAT, Until discontinued, Starting S Indication:
<input type="checkbox"/> ceFEPime 2 g intraMUSCULAR + vancomycin 15 mg/kg IV	
<input type="checkbox"/> 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 Indication: Sepsis IM Route Selection: I have opted to select the IM route because IV access could not be established



<input type="checkbox"/> vancomycin (VANCOCIN) IV + Pharmacy Consult to Dose	15 mg/kg, intravenous, every 12 hours Classification: Narrow Spectrum Antibiotic
<input type="checkbox"/> vancomycin (VANCOCIN)	When multiple antimicrobial agents are ordered, you may administer these immediately at the SAME TIME via different IV sites. Do not wait for the first antibiotic to infuse. If agents are Y-site compatible, they may be administered per Y-site protocols. IF the ordered agents are NOT Y site compatible, then administer the Broad-spectrum antibiotic first. Refer to available Y site compatibility information and determination of broad-spectrum antibiotic selection chart. Reason for Therapy: Bacterial Infection Suspected Indication: Sepsis
<input type="checkbox"/> Pharmacy consult to manage vancomycin	STAT, Until discontinued, Starting S Indication:
<input type="checkbox"/> piperacillin-tazobactam (ZOSYN) 3.375 g IV + vancomycin 15 mg/kg IV - NOT HMW HMWB	
<input type="checkbox"/> 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
<input type="checkbox"/> vancomycin (VANCOCIN) IV + Pharmacy Consult to Dose	
<input type="checkbox"/> vancomycin (VANCOCIN) IV	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
<input type="checkbox"/> Pharmacy consult to manage vancomycin	STAT, Until discontinued, Starting S Indication:
<input type="checkbox"/> piperacillin-tazobactam (ZOSYN) 3.375 g IV + vancomycin 15 mg/kg IV - HMW HMWB Only	
<input type="checkbox"/> piperacillin-tazobactam (ZOSYN) 3.375 g IV	<b>"Followed by" Linked Panel</b>

[ ] piperacillin-tazobactam (ZOSYN) 3.375 g IV Once	3.375 g, intravenous, for .5 Hours, once, For 1 Doses Classification: Broad Spectrum Antibiotic
[ ] piperacillin-tazobactam (ZOSYN) 3.375 g IV every 8 hours	When multiple antimicrobial agents are ordered, you may administer these immediately at the SAME TIME via different IV sites. Do not wait for the first antibiotic to infuse. If agents are Y-site compatible, they may be administered per Y-site protocols. IF the ordered agents are NOT Y site compatible, then administer the Broad-spectrum antibiotic first. Refer to available Y site compatibility information and determination of broad-spectrum antibiotic selection chart. Reason for Therapy: Bacterial Infection Suspected Indication: Sepsis 3.375 g, intravenous, for 4 Hours, every 8 hours, Starting H+8 Hours Classification: Broad Spectrum Antibiotic
[ ] vancomycin (VANCOCIN) IV + Pharmacy Consult to Dose	When multiple antimicrobial agents are ordered, you may administer these immediately at the SAME TIME via different IV sites. Do not wait for the first antibiotic to infuse. If agents are Y-site compatible, they may be administered per Y-site protocols. IF the ordered agents are NOT Y site compatible, then administer the Broad-spectrum antibiotic 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
[ ] Pharmacy consult to manage vancomycin	When multiple antimicrobial agents are ordered, you may administer these immediately at the SAME TIME via different IV sites. Do not wait for the first antibiotic to infuse. If agents are Y-site compatible, they may be administered per Y-site protocols. IF the ordered agents are NOT Y site compatible, then administer the Broad-spectrum antibiotic first. Refer to available Y site compatibility information and determination of broad-spectrum antibiotic selection chart. Reason for Therapy: Bacterial Infection Suspected Indication: Sepsis STAT, Until discontinued, Starting S Indication:
() If Pseudomonas Suspected - piperacillin-tazobactam (ZOSYN) 4.5 g IV + vancomycin 15 mg/kg IV - NOT HMW	4.5 g, intravenous, for .5 Hours, every 6 hours Classification: Broad Spectrum Antibiotic
[ ] piperacillin-tazobactam (ZOSYN) 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

[ ] vancomycin (VANCOCIN) IV + Pharmacy Consult to Dose	<p>15 mg/kg, intravenous, every 12 hours  Classification: Narrow Spectrum Antibiotic</p> <p>When multiple antimicrobial agents are ordered, you may administer these immediately at the SAME TIME via different IV sites. Do not wait for the first antibiotic to infuse. If agents are Y-site compatible, they may be administered per Y-site protocols. IF the ordered agents are NOT Y site compatible, then administer the Broad-spectrum antibiotic first. Refer to available Y site compatibility information and determination of broad-spectrum antibiotic selection chart.  Reason for Therapy: Bacterial Infection Suspected  Indication: Sepsis</p>
[ ] vancomycin (VANCOCIN)	<p>STAT, Until discontinued, Starting S  Indication:</p>
[ ] Pharmacy consult to manage vancomycin	<p>STAT, Until discontinued, Starting S  Indication:</p>
() If Pseudomonas Suspected - piperacillin-tazobactam (ZOSYN) 4.5 g IV + vancomycin 15 mg/kg IV - HMW HMWB Only	<p><b>"Followed by" Linked Panel</b></p>
[ ] piperacillin-tazobactam (ZOSYN) 4.5 g IV	<p>4.5 g, intravenous, for .5 Hours, once, For 1 Doses  Classification: Broad Spectrum Antibiotic</p>
[ ] piperacillin-tazobactam (ZOSYN) 4.5 g IV Once	<p>When multiple antimicrobial agents are ordered, you may administer these immediately at the SAME TIME via different IV sites. Do not wait for the first antibiotic to infuse. If agents are Y-site compatible, they may be administered per Y-site protocols. IF the ordered agents are NOT Y site compatible, then administer the Broad-spectrum antibiotic first. Refer to available Y site compatibility information and determination of broad-spectrum antibiotic selection chart.  Reason for Therapy: Bacterial Infection Suspected  Indication: Sepsis</p>
[ ] piperacillin-tazobactam (ZOSYN) 4.5 g IV every 8 hours	<p>4.5 g, intravenous, for 4 Hours, every 8 hours, Starting H+8 Hours  Classification: Broad Spectrum Antibiotic</p>
	<p>When multiple antimicrobial agents are ordered, you may administer these immediately at the SAME TIME via different IV sites. Do not wait for the first antibiotic to infuse. If agents are Y-site compatible, they may be administered per Y-site protocols. IF the ordered agents are NOT Y site compatible, then administer the Broad-spectrum antibiotic first. Refer to available Y site compatibility information and determination of broad-spectrum antibiotic selection chart.  Reason for Therapy: Bacterial Infection Suspected  Indication: Sepsis</p>
[ ] vancomycin (VANCOCIN) IV + Pharmacy Consult to Dose	

<input type="checkbox"/> 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
<input type="checkbox"/> Pharmacy consult to manage vancomycin	STAT, Until discontinued, Starting S Indication:
() Yes (Single Response) (i.e. Type 1 immediate hypersensitivity reaction - anaphylaxis, bronchospasm, angioedema, urticaria)	
() aztreonam (AZACTAM) 2 g IV + vancomycin 15 mg/kg IV	
<input type="checkbox"/> 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
<input type="checkbox"/> vancomycin (VANCOCIN) IV + Pharmacy Consult to Dose	
<input type="checkbox"/> 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
<input type="checkbox"/> Pharmacy consult to manage vancomycin	STAT, Until discontinued, Starting S Indication:
() aztreonam (AZACTAM) 2 g intraMUSCULAR + vancomycin 15 mg/kg IV	
<input type="checkbox"/> aztreonam (AZACTAM) IM	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

vancomycin (VANCOCIN) IV + Pharmacy Consult to Dose

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

Pharmacy consult to manage vancomycin

STAT, Until discontinued, Starting S  
Indication:

Intra-Abdominal Infections (Single Response)

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

Does your patient have a SEVERE penicillin allergy?

No

ceFEPime IV + metroNIDAZOLE (FLAGYL) OR piperacillin-tazobactam (ZOSYN) IV OR meropenem (MERREM) IV - NOT HMW HMWB (Single Response)

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

**"And" Linked Panel**

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

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

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

**"And" Linked Panel**

[ ] ceFEPime (MAXIPIME) IM	<p>2 g, intramuscular, every 8 hours          Intramuscular route selected because no IV access available.          Administer dose by deep IM into large muscle mass (e.g. gluteal muscles or lateral part of the thigh).          Reason for Therapy: Bacterial Infection Suspected          Indication: Sepsis          IM Route Selection: I have opted to select the IM route because IV access could not be established</p>
[ ] metroNIDAZOLE (FLAGYL) IV	<p>500 mg, intravenous, every 8 hours          Classification: Narrow Spectrum Antibiotic</p> <p>When multiple antimicrobial agents are ordered, you may administer these immediately at the SAME TIME via different IV sites. Do not wait for the first antibiotic to infuse. If agents are Y-site compatible, they may be administered per Y-site protocols. IF the ordered agents are NOT Y site compatible, then administer the Broad-spectrum antibiotic first. Refer to available Y site compatibility information and determination of broad-spectrum antibiotic selection chart.          Reason for Therapy: Bacterial Infection Suspected          Indication: Sepsis</p>
( ) piperacillin-tazobactam (ZOSYN) 3.375 g IV	<p>3.375 g, intravenous, for .5 Hours, every 6 hours          Classification: Broad Spectrum Antibiotic</p> <p>When multiple antimicrobial agents are ordered, you may administer these immediately at the SAME TIME via different IV sites. Do not wait for the first antibiotic to infuse. If agents are Y-site compatible, they may be administered per Y-site protocols. IF the ordered agents are NOT Y site compatible, then administer the Broad-spectrum antibiotic first. Refer to available Y site compatibility information and determination of broad-spectrum antibiotic selection chart.          Reason for Therapy: Bacterial Infection Suspected          Indication: Sepsis</p>
( ) If Pseudomonas Suspected - piperacillin-tazobactam (ZOSYN) 4.5 g IV	<p>4.5 g, intravenous, for .5 Hours, every 6 hours          Classification: Broad Spectrum Antibiotic</p> <p>When multiple antimicrobial agents are ordered, you may administer these immediately at the SAME TIME via different IV sites. Do not wait for the first antibiotic to infuse. If agents are Y-site compatible, they may be administered per Y-site protocols. IF the ordered agents are NOT Y site compatible, then administer the Broad-spectrum antibiotic first. Refer to available Y site compatibility information and determination of broad-spectrum antibiotic selection chart.          Reason for Therapy: Bacterial Infection Suspected          Indication: Sepsis</p>
( ) meropenem (MERREM) 500 mg IV	

[ ] meropenem (MERREM) IV	500 mg, intravenous, every 6 hours Classification: Broad Spectrum Antibiotic
<p>When multiple antimicrobial agents are ordered, you may administer these immediately at the SAME TIME via different IV sites. Do not wait for the first antibiotic to infuse. If agents are Y-site compatible, they may be administered per Y-site protocols. IF the ordered agents are NOT Y site compatible, then administer the Broad-spectrum antibiotic first. Refer to available Y site compatibility information and determination of broad-spectrum antibiotic selection chart.</p> <p>Reason for Therapy: Bacterial Infection Suspected Indication: Sepsis</p>	
() meropenem (MERREM) 500 mg intraMUSCULAR	
[ ] meropenem (MERREM) IM	<p>500 mg, intramuscular, every 6 hours Intramuscular route selected because no IV access available.</p> <p>Administer dose by deep IM into large muscle mass (e.g. gluteal muscles or lateral part of the thigh).</p> <p>Reason for Therapy: Bacterial Infection Suspected Indication: Sepsis IM Route Selection: I have opted to select the IM route because IV access could not be established</p>
[ ] ceFEPime IV + metroNIDAZOLE (FLAGYL) OR piperacillin-tazobactam (ZOSYN) IV OR meropenem (MERREM) IV - HMW HMWB Only (Single Response)	
() ceFEPime (MAXIPIME) 2 g IV + metroNIDAZOLE (FLAGYL) 500 mg IV	<b>"And" Linked Panel</b>
[ ] ceFEPime (MAXIPIME) IV	<p>2 g, intravenous, every 8 hours Classification: Broad Spectrum Antibiotic</p> <p>When multiple antimicrobial agents are ordered, you may administer these immediately at the SAME TIME via different IV sites. Do not wait for the first antibiotic to infuse. If agents are Y-site compatible, they may be administered per Y-site protocols. IF the ordered agents are NOT Y site compatible, then administer the Broad-spectrum antibiotic first. Refer to available Y site compatibility information and determination of broad-spectrum antibiotic selection chart.</p> <p>Reason for Therapy: Bacterial Infection Suspected Indication: Sepsis</p>
[ ] metroNIDAZOLE (FLAGYL) IV	<p>500 mg, intravenous, every 8 hours Classification: Narrow Spectrum Antibiotic</p>
<p>When multiple antimicrobial agents are ordered, you may administer these immediately at the SAME TIME via different IV sites. Do not wait for the first antibiotic to infuse. If agents are Y-site compatible, they may be administered per Y-site protocols. IF the ordered agents are NOT Y site compatible, then administer the Broad-spectrum antibiotic first. Refer to available Y site compatibility information and determination of broad-spectrum antibiotic selection chart.</p> <p>Reason for Therapy: Bacterial Infection Suspected Indication: Sepsis</p>	
() ceFEPime (MAXIPIME) 2 g intraMUSCULAR + metroNIDAZOLE (FLAGYL) 500 mg IV	
<b>"And" Linked Panel</b>	

<input type="checkbox"/> 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 Indication: Sepsis IM Route Selection: I have opted to select the IM route because IV access could not be established
<input type="checkbox"/> metroNIDAZOLE (FLAGYL) IV	500 mg, intravenous, 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
<input type="checkbox"/> piperacillin-tazobactam (ZOSYN) 3.375 g IV	<b>"Followed by" Linked Panel</b>
<input type="checkbox"/> piperacillin-tazobactam (ZOSYN) 3.375 g IV Once	3.375 g, intravenous, for .5 Hours, once, For 1 Doses Classification: Broad Spectrum Antibiotic  When multiple antimicrobial agents are ordered, you may administer these immediately at the SAME TIME via different IV sites. Do not wait for the first antibiotic to infuse. If agents are Y-site compatible, they may be administered per Y-site protocols. IF the ordered agents are NOT Y site compatible, then administer the Broad-spectrum antibiotic first. Refer to available Y site compatibility information and determination of broad-spectrum antibiotic selection chart. Reason for Therapy: Bacterial Infection Suspected Indication: Sepsis
<input type="checkbox"/> piperacillin-tazobactam (ZOSYN) 3.375 g IV every 8 hours	3.375 g, intravenous, for 4 Hours, every 8 hours, Starting H+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
<input type="checkbox"/> If Pseudomonas Suspected - piperacillin-tazobactam (ZOSYN) 4.5 g IV	<b>"Followed by" Linked Panel</b>



<input type="checkbox"/> piperacillin-tazobactam (ZOSYN) 4.5 g IV Once	4.5 g, intravenous, for .5 Hours, once, For 1 Doses Classification: Broad Spectrum Antibiotic
When multiple antimicrobial agents are ordered, you may administer these immediately at the SAME TIME via different IV sites. Do not wait for the first antibiotic to infuse. If agents are Y-site compatible, they may be administered per Y-site protocols. IF the ordered agents are NOT Y site compatible, then administer the Broad-spectrum antibiotic first. Refer to available Y site compatibility information and determination of broad-spectrum antibiotic selection chart. Reason for Therapy: Bacterial Infection Suspected Indication: Sepsis	
<input type="checkbox"/> piperacillin-tazobactam (ZOSYN) 4.5 g IV every 8 hours	4.5 g, intravenous, for 4 Hours, every 8 hours, Starting H+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	
<input type="checkbox"/> meropenem (MERREM) 500 mg IV	500 mg, intravenous, every 6 hours Classification: Broad Spectrum Antibiotic
<input type="checkbox"/> meropenem (MERREM) 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
<input type="checkbox"/> meropenem (MERREM) 500 mg intraMUSCULAR	0.5 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
<input type="checkbox"/> IF health-care associated, ADD - vancomycin (VANCOCIN) IV	

<input type="checkbox"/> 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
<input type="checkbox"/> Pharmacy consult to manage vancomycin	STAT, Until discontinued, Starting S Indication:
<input type="checkbox"/> IF high risk or severe, consider antifungal coverage - fluconazole (DIFLUCAN) 400 mg IV	
<input type="checkbox"/> fluconazole (DIFLUCAN) IV	400 mg, intravenous, for 60 Minutes, every 24 hours Reason for Therapy: Fungal Infection Suspected Indication: Other Specify: Sepsis
<input type="checkbox"/> Yes (Single Response)	
<input type="checkbox"/> aztreonam (AZACTAM) 2 g IV + metroNIDAZOLE (FLAGYL) 500 mg IV	
<input type="checkbox"/> 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
<input type="checkbox"/> 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
<input type="checkbox"/> OPTIONAL - vancomycin 15 mg/kg IV	

<input type="checkbox"/> vancomycin (VANCOCIN)	15 mg/kg, intravenous, every 12 hours Classification: Narrow Spectrum Antibiotic
<p>When multiple antimicrobial agents are ordered, you may administer these immediately at the SAME TIME via different IV sites. Do not wait for the first antibiotic to infuse. If agents are Y-site compatible, they may be administered per Y-site protocols. IF the ordered agents are NOT Y site compatible, then administer the Broad-spectrum antibiotic first. Refer to available Y site compatibility information and determination of broad-spectrum antibiotic selection chart.</p> <p>Reason for Therapy: Bacterial Infection Suspected Indication: Sepsis</p>	
<input type="checkbox"/> Pharmacy consult to manage vancomycin	STAT, Until discontinued, Starting S Indication:
() aztreonam (AZACTAM) 2 g intraMUSCULAR + metroNIDAZOLE (FLAGYL) 500 mg IV	
<input type="checkbox"/> aztreonam (AZACTAM) IM	<p>2 g, intramuscular, every 8 hours Intramuscular route selected because no IV access available.</p> <p>Administer dose by deep IM into large muscle mass (e.g. gluteal muscles or lateral part of the thigh).</p> <p>Type of Therapy: New Anti-Infective Order Reason for Therapy: Bacterial Infection Suspected Indication: Sepsis IM Route Selection: I have opted to select the IM route because IV access could not be established</p>
<input type="checkbox"/> metroNIDAZOLE (FLAGYL) IV	<p>500 mg, intravenous, every 8 hours Classification: Narrow Spectrum Antibiotic</p>
<p>When multiple antimicrobial agents are ordered, you may administer these immediately at the SAME TIME via different IV sites. Do not wait for the first antibiotic to infuse. If agents are Y-site compatible, they may be administered per Y-site protocols. IF the ordered agents are NOT Y site compatible, then administer the Broad-spectrum antibiotic first. Refer to available Y site compatibility information and determination of broad-spectrum antibiotic selection chart.</p> <p>Type of Therapy: New Anti-Infective Order Reason for Therapy: Bacterial Infection Suspected Indication: Sepsis</p>	
<input type="checkbox"/> OPTIONAL - vancomycin 15 mg/kg IV	
<input type="checkbox"/> vancomycin (VANCOCIN)	15 mg/kg, intravenous, every 12 hours Classification: Narrow Spectrum Antibiotic
<p>When multiple antimicrobial agents are ordered, you may administer these immediately at the SAME TIME via different IV sites. Do not wait for the first antibiotic to infuse. If agents are Y-site compatible, they may be administered per Y-site protocols. IF the ordered agents are NOT Y site compatible, then administer the Broad-spectrum antibiotic first. Refer to available Y site compatibility information and determination of broad-spectrum antibiotic selection chart.</p> <p>Reason for Therapy: Bacterial Infection Suspected Indication: Sepsis</p>	
<input type="checkbox"/> Pharmacy consult to manage vancomycin	STAT, Until discontinued, Starting S Indication:
<input type="checkbox"/> Bacterial Meningitis - Community-Acquired and ImmunoCOMPETENT (Single Response)	

Does your patient have a SEVERE penicillin allergy?

No (Single Response)

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

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

cefTRIAxone (ROCEPHIN) IV

2 g, intravenous, for 30 Minutes, 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

vancomycin (VANCOCIN) IV + Pharmacy Consult to Dose

vancomycin (VANCOCIN) IV

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

Pharmacy consult to manage vancomycin

STAT, Until discontinued, Starting S  
Indication:

OPTIONAL Additional Therapies - dexamethasone (DECADRON) IV

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

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

cefTRIAxone (ROCEPHIN) IV

2 g, intravenous, for 30 Minutes, 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

vancomycin (VANCOCIN) IV + Pharmacy Consult to Dose

[ ] 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
[ ] Pharmacy consult to manage vancomycin	STAT, Until discontinued, Starting S Indication:
[ ] 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 - dexamethasone (DECADRON) IV	0.15 mg/kg, intravenous, once, For 1 Doses Administer 15-20 minutes before 1st dose of antibiotics.
() cefTRIAxone (ROCEPHIN) 2 g intraMUSCULAR + vancomycin 15 mg/kg IV - For Patients LESS than 50 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 Indication: Sepsis IM Route Selection: I have opted to select the IM route because IV access could not be established
[ ] vancomycin (VANCOCIN) IV + Pharmacy Consult to Dose	
[ ] 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
[ ] Pharmacy consult to manage vancomycin	STAT, Until discontinued, Starting S Indication:

[ ] OPTIONAL Additional Therapies - dexamethasone (DECADRON) IV	0.15 mg/kg, intravenous, once, For 1 Doses Administer 15-20 minutes before 1st dose of antibiotics.
() cefTRIAxone (ROCEPHIN) 2 g intraMUSCULAR + vancomycin 15 mg/kg IV + ampicillin 2 g intraMUSCULAR - For Patients GREATER than 50 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 Indication: Sepsis IM Route Selection: I have opted to select the IM route because IV access could not be established
[ ] vancomycin (VANCOCIN) IV + Pharmacy Consult to Dose	
[ ] 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
[ ] Pharmacy consult to manage vancomycin	STAT, Until discontinued, Starting S Indication:
[ ] 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 IM Route Selection: I have opted to select the IM route because IV access could not be established
[ ] OPTIONAL Additional Therapies - dexamethasone (DECADRON) IV	0.15 mg/kg, intravenous, once, For 1 Doses Administer 15-20 minutes before 1st dose of antibiotics.
() Yes (Single Response)	
Dexamethasone is recommended for treatment of proven or suspected pneumococcal meningitis due to S. pneumoniae	
() aztreonam (AZACTAM) 2 g IV + vancomycin 15 mg/kg IV	
[ ] aztreonam (AZACTAM) IV	2 g, intravenous, 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

<input type="checkbox"/>	vancomycin (VANCOGIN) IV + Pharmacy Consult to Dose	
<input type="checkbox"/>	vancomycin (VANCOGIN)	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
<input type="checkbox"/>	Pharmacy consult to manage vancomycin	STAT, Until discontinued, Starting S Indication:
<input type="checkbox"/>	OPTIONAL Additional Therapies - dexamethasone (DECADRON) IV	0.15 mg/kg, intravenous, once, For 1 Doses Administer 15-20 minutes before 1st dose of antibiotics.
<input type="checkbox"/>	aztreonam (AZACTAM) 2 g intraMUSCULAR + vancomycin 15 mg/kg IV	
<input type="checkbox"/>	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
<input type="checkbox"/>	vancomycin (VANCOGIN) IV + Pharmacy Consult to Dose	
<input type="checkbox"/>	vancomycin (VANCOGIN)	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
<input type="checkbox"/>	Pharmacy consult to manage vancomycin	STAT, Until discontinued, Starting S Indication:
<input type="checkbox"/>	OPTIONAL Additional Therapies - dexamethasone (DECADRON) IV	0.15 mg/kg, intravenous, once, For 1 Doses Administer 15-20 minutes before 1st dose of antibiotics.

## Additional Management of Sepsis

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

<input type="checkbox"/>	albumin human 5 % infusion	25 g, intravenous, once, For 1 Doses Administer 500 mL intravenous once for patients not responding to initial fluid resuscitation with crystalloids. Indication:
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### Vasopressor Therapy (if unresponsive to initial fluid bolus) (Single Response)

\*\* if unresponsive to initial fluid bolus \*\*

<input type="checkbox"/> norEPInephrine (LEVOPHED) 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.
<input type="checkbox"/> EPINEPHrine (ADRENALIN) infusion	2-30 mcg/min, intravenous, titrated Titrate by 2 micrograms per minute every 5 minutes for mean arterial pressure 65-70 mmHg. Call MD if mean arterial pressure is LESS than 65 mmHg and rate is 30 mcg/min.

### Inotropic Therapy

<input type="checkbox"/> 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.
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### Steroids

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

<input type="checkbox"/> hydrocortisone sodium succinate (Solu-CORTEF) injection	50 mg, intravenous, every 6 hours For patients with shock refractory to fluids and vasopressors.
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## Labs

### Laboratory - STAT

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

### Laboratory - Repeat

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

### Laboratory - Additional Microbiology Screens

<input type="checkbox"/> Aerobic culture	Once For 1 Occurrences
<input type="checkbox"/> Anaerobic culture	Once For 1 Occurrences
<input type="checkbox"/> Respiratory culture, quantitative	Once For 1 Occurrences, Mini bronchial alveolar lavage
<input type="checkbox"/> Respiratory pathogen panel	Once For 1 Occurrences
<input type="checkbox"/> Sputum culture	Once For 1 Occurrences, Sputum
<input type="checkbox"/> Urinalysis screen and microscopy, with reflex to culture	Once For 1 Occurrences Specimen Source: Urine Specimen Site:

### Laboratory - Additional Microbiology Screens

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

### Laboratory - Additional Microbiology Screens

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

## Imaging

### Chest X -Ray

<input type="checkbox"/>	Chest 1 Vw Portable	STAT, 1 time imaging For 1
<input type="checkbox"/>	Chest 2 Vw	STAT, 1 time imaging For 1

## Consults

### Antibiotics Pharmacy Consult

<input type="checkbox"/>	Pharmacy consult to manage dose adjustments for renal function	Routine, Until discontinued, Starting S Adjust dose for:
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### Consults

<input type="checkbox"/>	Consult to Sepsis Response Team	Does the patient display signs and symptoms suspicious of infection at this time? Yes Reason for Consult? Evaluate patient for sepsis and initiation of Sepsis Acute Care Initial Treatment Protocol
<input type="checkbox"/>	Consult Infectious Diseases	Reason for Consult? Consult with Infectious Disease to review and/or adjust current antibiotic selection if necessary. Initial treatment should already be initiated. Patient/Clinical information communicated? Patient/clinical information communicated?

### Consults

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