## Sepsis Management (Emergency Dept) [5035]

namics Monitoring
<u> </u>
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.
10 mL, intravenous, every 12 hours scheduled
10 mL, intravenous, PRN, line care
s Line**
Routine, Every hour For 999 Occurrences Measure: CVP
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.
Routine, Daily Current FIO2 or Room Air: Place Sp02 monitor (near infrared spectroscopy)
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.
Routine, Daily Current FIO2 or Room Air: Monitor every 1 hour for 3 hours, or more frequently as indicated by clinical condition and assessment findings, then re-evaluate frequency of pulse oximetry assessment. Current FIO2 or Room Air: Place SpO2 monitor (near infrared spectroscopy).
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.
Routine, Daily Current FIO2 or Room Air: Place Sp02 monitor (near infrared spectroscopy)
Routine, Daily Notify provider if weight is over 5 pounds from initial dry weight
rated Routine, Until discontinued, Starting S Specify: Other activity (specify)

[X] Patient education	Routine, Prior to discharge Patient/Family: Both Education for: Other (specify)
	Specify: Sepsis Education
[] Insert and maintain Foley	
[] Insert Foley catheter	Routine, Once
	Type: Temperature Sensing
	Size:
	Urinometer needed:
[] Foley Catheter Care	Routine, Until discontinued, Starting S Orders: Maintain
Nursing - HMCL	
[X] Vital signs - T/P/R/BP	Routine, Every hour For 3 Hours
[M] Vital Signs - 1/F/IVDF	
	Monitor every 1 hour for 3 hours, or more frequently as
	indicated by clinical condition and assessment findings, then
Da 5 /	re-evaluate frequency of vitals assessment.
[X] Pulse oximetry	Routine, Daily
	Current FIO2 or Room Air:
	Place Sp02 monitor (near infrared spectroscopy)
[X] Telemetry	"And" Linked Panel
[X] Telemetry monitoring	Routine, Continuous
	Order: Place in Centralized Telemetry Monitor: EKG Monitoring Only
	(Telemetry Box)
	Reason for telemetry:
	Can be off of Telemetry for tests and baths? Yes
[X] Telemetry Additional Setup Information	Routine, Continuous
[71] Totomony Manhonal Cotap Illiania	High Heart Rate (BPM): 120
	Low Heart Rate(BPM): 50
	High PVC's (per minute): 10
	High SBP(mmHg): 175
	Low SBP(mmHg): 100
	High DBP(mmHg): 95
	Low DBP(mmHg): 40
	Low Mean BP: 60
	High Mean BP: 120
<u>                                     </u>	Low SPO2(%): 94
[] Insert and maintain Foley	
[] Insert Foley catheter	Routine, Once
	Type: Temperature Sensing
	Size:
	Urinometer needed:
[] Foley Catheter Care	Routine, Until discontinued, Starting S
	Orders: Maintain
Notify	
Notify Provider/Sepsis Team:	Routine, Until discontinued, Starting S, -for MAP LESS than
[] Notily Provider/Sepsis realli.	65 or GREATER than 80
	00 OF GREATER HIGH OU
	-for heart rate LESS than 60 or GREATER than 120
	for uring output LESS than 20 ml /hour
	-for urine output LESS than 30 mL/hour
	<ul> <li>immediately for any acute changes in patient condition (mental status, vital signs)</li> </ul>
Initial Management of Suspected Se	psis
Blood Cultures	
[X] Blood culture x 2	"And" Linked Panel

[X] Blood Culture (Aerobic & Anaerobic)	Once, Blo	
	x2, with ea	FAT before antibiotics given. Blood cultures should be ordered ach set drawn from a different peripheral site. If unable to draw from a peripheral site, one set may be drawn from a central line;
		should NEVER be used.
[X] Blood Culture (Aerobic & Anaerobic)	x2, with ea	rod  FAT before antibiotics given. Blood cultures should be ordered ach set drawn from a different peripheral site. If unable to draw from a peripheral site, one set may be drawn from a central line; should NEVER be used.
Lactic Acid - STAT and repeat 2 times every 3 h	ours	
[X] Lactic acid level, SEPSIS - Now and repeat 2x hours	every 3	Now and repeat 2x every 3 hours For 3 Occurrences STAT - SPECIMEN MUST BE DELIVERED IMMEDIATELY TO THE LABORATORY. Repeat lactic acid in 3 hours.
Lactic Acid - STAT and repeat 2 times every 3 h	ours	
[X] Lactic acid level, SEPSIS - Now and repeat 2x hours	every 3	Now and repeat 2x every 3 hours For 3 Occurrences STAT - SPECIMEN MUST BE DELIVERED IMMEDIATELY TO THE LABORATORY. Repeat lactic acid in 3 hours.
Lactic Acid - STAT and repeat 2 times every 3 he **unselect if already collected**	ours	
[X] Lactic acid, I-Stat - Now and repeat 2x every 3	hours	Now and repeat 2x every 3 hours For 3 Occurrences
		STAT. Repeat lactic acid in 3 hours.
organ dysfunction) (Single Response)	sion, lactic a	STAT. Repeat lactic acid in 3 hours.  cid greater than 2.0, or any one sign or symptom of acute
organ dysfunction) (Single Response)	sion, lactic a	STAT. Repeat lactic acid in 3 hours.  cid greater than 2.0, or any one sign or symptom of acute  I weight as long as the provider indicates that the patient is
organ dysfunction) (Single Response)  The target fluid bolus volume can be calculated to	sion, lactic a using the idea the actual wei	STAT. Repeat lactic acid in 3 hours.  cid greater than 2.0, or any one sign or symptom of acute  I weight as long as the provider indicates that the patient is
organ dysfunction) (Single Response)  The target fluid bolus volume can be calculated to obese. If the provider does not indicate obesity, the provider does not indicate obesity.	sion, lactic a using the idea the actual wei	STAT. Repeat lactic acid in 3 hours.  cid greater than 2.0, or any one sign or symptom of acute  I weight as long as the provider indicates that the patient is
organ dysfunction) (Single Response)  The target fluid bolus volume can be calculated to obese. If the provider does not indicate obesity, the syour patient obese? (BMI GREATER than 30)	sion, lactic a using the idea the actual weight	STAT. Repeat lactic acid in 3 hours.  Icid greater than 2.0, or any one sign or symptom of acute  I weight as long as the provider indicates that the patient is ght will be used to calculate the target volume.
organ dysfunction) (Single Response) The target fluid bolus volume can be calculated to obese. If the provider does not indicate obesity, to the syour patient obese? (BMI GREATER than 30)  () Yes (Single Response) (Selection Required)	sion, lactic a using the idea the actual weight	STAT. Repeat lactic acid in 3 hours.  Icid greater than 2.0, or any one sign or symptom of acute  I weight as long as the provider indicates that the patient is ght will be used to calculate the target volume.
The target fluid bolus volume can be calculated to obese. If the provider does not indicate obesity, to list your patient obese? (BMI GREATER than 30)  () Yes (Single Response) (Selection Required)  Given your response of "Yes", you have the optomatical of the context of the	sion, lactic a using the idea the actual weight o) tion to dose IV	STAT. Repeat lactic acid in 3 hours.  Icid greater than 2.0, or any one sign or symptom of acute  I weight as long as the provider indicates that the patient is ght will be used to calculate the target volume.
The target fluid bolus volume can be calculated u obese. If the provider does not indicate obesity, to ls your patient obese? (BMI GREATER than 30)  (1) Yes (Single Response) (Selection Required) Given your response of "Yes", you have the optomatical of the content of the con	sion, lactic a using the idea the actual weight tion to dose IV V) (Single	STAT. Repeat lactic acid in 3 hours.  Icid greater than 2.0, or any one sign or symptom of acute  I weight as long as the provider indicates that the patient is ght will be used to calculate the target volume.
The target fluid bolus volume can be calculated to obese. If the provider does not indicate obesity, to ls your patient obese? (BMI GREATER than 30)  Yes (Single Response) (Selection Required) Given your response of "Yes", you have the optomatical of the context of the contex	sion, lactic a using the idea the actual weight tion to dose IV V) (Single Il Signs - For Minutes x 4	STAT. Repeat lactic acid in 3 hours.  Icid greater than 2.0, or any one sign or symptom of acute  I weight as long as the provider indicates that the patient is ght will be used to calculate the target volume.  If fluids using Ideal Body Weight (IBW).  "And" Linked Panel  Jkg, intravenous, once, For 1 Doses
The target fluid bolus volume can be calculated to obese. If the provider does not indicate obesity, the syour patient obese? (BMI GREATER than 30 Given your response) (Selection Required)  Given your response of "Yes", you have the opter of the syour patient obese using Ideal Body Weight (IBV Response)  () Calculate dose using Ideal Body Weight (IBV Response)  () lactated ringers IV bolus and infusion + Vita Obese Patients (Single Response)  () lactated ringers IV bolus + Vitals Every 15 Hours - For Obese Patients	sion, lactic a using the idea the actual weight (i) tion to dose IV V) (Single Il Signs - For Minutes x 4	STAT. Repeat lactic acid in 3 hours.  Icid greater than 2.0, or any one sign or symptom of acute  I weight as long as the provider indicates that the patient is ght will be used to calculate the target volume.  If fluids using Ideal Body Weight (IBW).  "And" Linked Panel  Lykg, intravenous, once, For 1 Doses sess patient after IV fluid bolus given.
The target fluid bolus volume can be calculated to obese. If the provider does not indicate obesity, the syour patient obese? (BMI GREATER than 30 Given your response) (Selection Required)  Given your response of "Yes", you have the opter of the syour patient obese using Ideal Body Weight (IBV Response)  () Calculate dose using Ideal Body Weight (IBV Response)  () lactated ringers IV bolus and infusion + Vita Obese Patients (Single Response)  () lactated ringers IV bolus + Vitals Every 15 Hours - For Obese Patients	sion, lactic a using the idea the actual weight  tion to dose IV  V) (Single  Il Signs - For  Minutes x 4  30 mL Reass If targ mmHg	STAT. Repeat lactic acid in 3 hours.  Icid greater than 2.0, or any one sign or symptom of acute  I weight as long as the provider indicates that the patient is ght will be used to calculate the target volume.  If Iluids using Ideal Body Weight (IBW).  "And" Linked Panel  I/kg, intravenous, once, For 1 Doses seess patient after IV fluid bolus given. et not met (MAP 65 to 70 mmHg or SBP GREATER than 90 g), notify ordering provider prior to administration of second
The target fluid bolus volume can be calculated to obese. If the provider does not indicate obesity, the syour patient obese? (BMI GREATER than 30 Given your response) (Selection Required)  Given your response of "Yes", you have the opter of the syour patient obese using Ideal Body Weight (IBV Response)  () Calculate dose using Ideal Body Weight (IBV Response)  () lactated ringers IV bolus and infusion + Vita Obese Patients (Single Response)  () lactated ringers IV bolus + Vitals Every 15 Hours - For Obese Patients	sion, lactic a using the idea the actual weight  tion to dose IV  V) (Single al Signs - For  Minutes x 4  30 mL Reass If targ mmHg bolus.	STAT. Repeat lactic acid in 3 hours.  Icid greater than 2.0, or any one sign or symptom of acute  I weight as long as the provider indicates that the patient is ght will be used to calculate the target volume.  If fluids using Ideal Body Weight (IBW).  "And" Linked Panel  I/kg, intravenous, once, For 1 Doses sess patient after IV fluid bolus given. et not met (MAP 65 to 70 mmHg or SBP GREATER than 90 g), notify ordering provider prior to administration of second
The target fluid bolus volume can be calculated to obese. If the provider does not indicate obesity, the syour patient obese? (BMI GREATER than 30)  () Yes (Single Response) (Selection Required) Given your response of "Yes", you have the optomatical obese values of the syour	sion, lactic ausing the idea the actual weight the actual weight to the actual weight to the actual weight to dose IV.  V) (Single  Il Signs - For  Minutes x 4  30 mL  Reass If targoremmHg bolus. Doses Notify	STAT. Repeat lactic acid in 3 hours.  Icid greater than 2.0, or any one sign or symptom of acute  I weight as long as the provider indicates that the patient is ght will be used to calculate the target volume.  I fluids using Ideal Body Weight (IBW).  "And" Linked Panel  Likg, intravenous, once, For 1 Doses sess patient after IV fluid bolus given. et not met (MAP 65 to 70 mmHg or SBP GREATER than 90 g), notify ordering provider prior to administration of second as start immediately. provider immediately upon completion of fluid bolus
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The target fluid bolus volume can be calculated to obese. If the provider does not indicate obesity, to ls your patient obese? (BMI GREATER than 30)  (1) Yes (Single Response) (Selection Required) Given your response of "Yes", you have the optotic of the provider dose using Ideal Body Weight (IBV Response)  (2) Calculate dose using Ideal Body Weight (IBV Response)  (3) Iactated ringers IV bolus and infusion + Vita Obese Patients (Single Response)  (4) Iactated ringers IV bolus + Vitals Every 15 Hours - For Obese Patients	sion, lactic a using the idea the actual weight  (i)  tion to dose IV  (ii)  (iii)  (iiii)  (iii)  (	STAT. Repeat lactic acid in 3 hours.  Icid greater than 2.0, or any one sign or symptom of acute  I weight as long as the provider indicates that the patient is ght will be used to calculate the target volume.  If fluids using Ideal Body Weight (IBW).  "And" Linked Panel  I/kg, intravenous, once, For 1 Doses sees patient after IV fluid bolus given. et not met (MAP 65 to 70 mmHg or SBP GREATER than 90 g), notify ordering provider prior to administration of second a start immediately. provider immediately upon completion of fluid bolus histration.  Ider Response: YES, I choose to use the Ideal Body Weight

[] lactated ringer's infusion	126 mL/hr, intravenous, continuous
	Reassess patient after 1 L of IV fluid given.
	If target not met (MAP 65 to 70 mmHg or SBP GREATER than 90
	mmHg), notify ordering provider prior to administration of additional
	fluids.
	Doses start immediately.
	Notify provider immediately upon completion of administration of 1 L of fluid.
() sodium chloride 0.9% bolus + Vital Signs OR infu	
For Obese Patients (Single Response)	Manufac v.      Analii I introd Donal
<ul><li>() sodium chloride 0.9% bolus + Vitals Every 15 M</li><li>4 Hours - For Obese Patients</li></ul>	
[] sodium chloride 0.9 % bolus	30 mL/kg, intravenous, once, For 1 Doses
	Reassess patient after IV fluid bolus given.
	If target not met (MAP 65 to 70 mmHg or SBP GREATER than 90
	mmHg), notify ordering provider prior to administration of second
	bolus.
	Doses start immediately.  Notify provider immediately upon completion of fluid bolus
	administration.
	Provider Response: YES, I choose to use the Ideal Body Weight
	(IBW), BMI GREATER than 30
[] Sepsis vital signs - T/P/R/BP	STAT, Every 15 min For 4 Hours
() sodium chloride 0.9% infusion - For Obese Pati	ents "And" Linked Panel
[] sodium chloride 0.9% infusion	126 mL/hr, intravenous, continuous
	Reassess patient after 1 L of IV fluid given.
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	mmHg), notify ordering provider prior to administration of additional
	fluids.
	Doses start immediately.
	Notify provider immediately upon completion of administration of 1 L of fluid.
() Do NOT calculate dose using Ideal Body Weight (	
(Single Response)	
( ) lactated ringers IV bolus + Vital Signs OR infusio (Single Response)	n
() lactated ringers IV bolus + Vitals Every 15 Minu Hours	tes x 4 "And" Linked Panel
[] lactated ringers bolus	30 mL/kg, intravenous, once, For 1 Doses
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For Obese Patients (Single Response)	
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[] sodium chloride 0.9 % bolus	30 mL/kg, intravenous, once, For 1 Doses
	Reassess patient after IV fluid bolus given.
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	mmHg), notify ordering provider prior to administration of second
	bolus.
	Doses start immediately.
	Notify provider immediately upon completion of fluid bolus
	administration.
[] Sepsis vital signs - T/P/R/BP	STAT, Every 15 min For 4 Hours
() sodium chloride 0.9% infusion - For Obese Pa	atients "And" Linked Panel
[] sodium chloride 0.9% infusion	126 mL/hr, intravenous, continuous
[1]	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
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	fluids.
	Doses start immediately.
	Notify provider immediately upon completion of administration of 1 L
	of fluid.
() Patient does not have initial hypotension, sever	re sensis.
nor septic shock at this time. No additional cry	· · · · ·
fluid resuscitation bolus indicated at this time (\$	
	Single
Response)	
() Patient does not have initial hypotension,	Routine, Once
severe sepsis, nor septic shock at this time.	
No additional crystalloid IV fluid	
resuscitation bolus indicated at this time	
() Patient does not have initial hypotension, severe	Sensis
nor septic shock at this time. No additional crys	
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fluid resuscitation bolus indicated at this time (Si	ingie
Response)	
() Patient does not have initial hypotension,	Routine, Once
severe sepsis, nor septic shock at this time.	
No additional crystalloid IV fluid	
resuscitation bolus indicated at this time	
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() lactated ringers IV bolus + Vital Signs OR infusion	on
(Single Response)	
() lactated ringers IV bolus + Vitals Every 15 Minu	utes x 4 "And" Linked Panel
Hours	
[] lactated ringers bolus	30 mL/kg, intravenous, once, For 1 Doses
[1 lactated in gold bolds	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
[] Sepsis vital signs - T/P/R/BP	Notify provider immediately upon completion of fluid bolus administration.
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() lactated ringers IV infusion	Notify provider immediately upon completion of fluid bolus administration.  STAT, Every 15 min For 4 Hours  "And" Linked Panel
	Notify provider immediately upon completion of fluid bolus administration.  STAT, Every 15 min For 4 Hours  "And" Linked Panel  126 mL/hr, intravenous, continuous
() lactated ringers IV infusion	Notify provider immediately upon completion of fluid bolus administration.  STAT, Every 15 min For 4 Hours  "And" Linked Panel  126 mL/hr, intravenous, continuous Reassess patient after 1 L of IV fluid given.
() lactated ringers IV infusion	Notify provider immediately upon completion of fluid bolus administration.  STAT, Every 15 min For 4 Hours  "And" Linked Panel  126 mL/hr, intravenous, continuous Reassess patient after 1 L of IV fluid given.  If target not met (MAP 65 to 70 mmHg or SBP GREATER than 90
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lactated ringers IV infusion     lactated ringer's infusion	Notify provider immediately upon completion of fluid bolus administration.  STAT, Every 15 min For 4 Hours  "And" Linked Panel  126 mL/hr, intravenous, continuous Reassess patient after 1 L of IV fluid given. If target not met (MAP 65 to 70 mmHg or SBP GREATER than 90 mmHg), notify ordering provider prior to administration of additional fluids.  Doses start immediately.  Notify provider immediately upon completion of administration of 1 L of fluid.
( ) lactated ringers IV infusion     [ ] lactated ringer's infusion     ( ) sodium chloride 0.9% bolus + Vital Signs OR info	Notify provider immediately upon completion of fluid bolus administration.  STAT, Every 15 min For 4 Hours  "And" Linked Panel  126 mL/hr, intravenous, continuous Reassess patient after 1 L of IV fluid given. If target not met (MAP 65 to 70 mmHg or SBP GREATER than 90 mmHg), notify ordering provider prior to administration of additional fluids.  Doses start immediately.  Notify provider immediately upon completion of administration of 1 L of fluid.
() lactated ringers IV infusion  [] lactated ringer's infusion  () sodium chloride 0.9% bolus + Vital Signs OR info (Single Response)	Notify provider immediately upon completion of fluid bolus administration.  STAT, Every 15 min For 4 Hours  "And" Linked Panel  126 mL/hr, intravenous, continuous Reassess patient after 1 L of IV fluid given. If target not met (MAP 65 to 70 mmHg or SBP GREATER than 90 mmHg), notify ordering provider prior to administration of additional fluids.  Doses start immediately. Notify provider immediately upon completion of administration of 1 L of fluid.  usion
( ) lactated ringers IV infusion     [ ] lactated ringer's infusion     ( ) sodium chloride 0.9% bolus + Vital Signs OR info	Notify provider immediately upon completion of fluid bolus administration.  STAT, Every 15 min For 4 Hours  "And" Linked Panel  126 mL/hr, intravenous, continuous Reassess patient after 1 L of IV fluid given. If target not met (MAP 65 to 70 mmHg or SBP GREATER than 90 mmHg), notify ordering provider prior to administration of additional fluids.  Doses start immediately. Notify provider immediately upon completion of administration of 1 L of fluid.  usion

[] sodium chloride 0.9 % bolus	30 mL/kg, intravenous, once, For 1 Doses Reassess patient after IV fluid bolus given.
	If target not met (MAP 65 to 70 mmHg or SBP GREATER than 90
	mmHg), notify ordering provider prior to administration of second bolus.
	Doses start immediately.
	Notify provider immediately upon completion of fluid bolus
	administration.
[] Sepsis vital signs - T/P/R/BP	STAT, Every 15 min For 4 Hours
() sodium chloride 0.9% infusion	"And" Linked Panel
[] sodium chloride 0.9% infusion	126 mL/hr, intravenous, continuous
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	If target not met (MAP 65 to 70 mmHg or SBP GREATER than 90
	mmHg), notify ordering provider prior to administration of additional
	fluids.
	Doses start immediately.
	Notify provider immediately upon completion of administration of 1 L of
	fluid.
() Patient does not have initial hypotension, se	
nor septic shock at this time. No additiona	
fluid resuscitation bolus indicated at this time	
Response)	le (Olligie
	Pouting Ones
() Patient does not have initial hypotension,	Routine, Once
severe sepsis, nor septic shock at this time	e.
No additional crystalloid IV fluid	
reconsitetion below indicated at this times	
resuscitation bolus indicated at this time	
ntibiotics	
ntibiotics  ** if not already started within the last 24 hours	
ntibiotics	
ntibiotics  ** if not already started within the last 24 hours Please Select the appropriate indication(s) for a	antibiotic use below:
** if not already started within the last 24 hours Please Select the appropriate indication(s) for a  Community-Acquired Pneumonia (Single Res	ponse)
ntibiotics  ** if not already started within the last 24 hours Please Select the appropriate indication(s) for a	ponse)
** if not already started within the last 24 hours Please Select the appropriate indication(s) for a  Community-Acquired Pneumonia (Single Response your patient have a SEVERE penicillin a	ponse)
** if not already started within the last 24 hours Please Select the appropriate indication(s) for a  Community-Acquired Pneumonia (Single Response your patient have a SEVERE penicillin a	ponse) antibiotic use below: ponse)
** if not already started within the last 24 hours Please Select the appropriate indication(s) for a  Community-Acquired Pneumonia (Single Response your patient have a SEVERE penicillin a  () No (Single Response) () cefTRIAXone (ROCEPHIN) 1 g IV + azithr	ponse) antibiotic use below: ponse)
** if not already started within the last 24 hours Please Select the appropriate indication(s) for a  Community-Acquired Pneumonia (Single Response your patient have a SEVERE penicillin a  () No (Single Response)  () cefTRIAXone (ROCEPHIN) 1 g IV + azithr (ZITHROMAX) 500 mg IV	ponse) Illergy? Tomycin "And" Linked Panel
** if not already started within the last 24 hours Please Select the appropriate indication(s) for a  Community-Acquired Pneumonia (Single Response your patient have a SEVERE penicillin a  () No (Single Response) () cefTRIAXone (ROCEPHIN) 1 g IV + azithr	ponse) fillergy?  Tomycin "And" Linked Panel  1 g, intravenous, for 30 Minutes, once, For 1 Doses
** if not already started within the last 24 hours Please Select the appropriate indication(s) for a  Community-Acquired Pneumonia (Single Response your patient have a SEVERE penicillin a  () No (Single Response)  () cefTRIAXone (ROCEPHIN) 1 g IV + azithr (ZITHROMAX) 500 mg IV	ponse) Illergy? Tomycin "And" Linked Panel
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** if not already started within the last 24 hours Please Select the appropriate indication(s) for a  Community-Acquired Pneumonia (Single Response your patient have a SEVERE penicillin a  () No (Single Response) () cefTRIAXone (ROCEPHIN) 1 g IV + azithr (ZITHROMAX) 500 mg IV	antibiotic use below:  ponse)  allergy?  Tomycin "And" Linked Panel  1 g, intravenous, for 30 Minutes, once, For 1 Doses Classification: Broad Spectrum Antibiotic  When multiple antimicrobial agents are ordered, you may administer
** if not already started within the last 24 hours Please Select the appropriate indication(s) for a  Community-Acquired Pneumonia (Single Response your patient have a SEVERE penicillin a  () No (Single Response) () cefTRIAXone (ROCEPHIN) 1 g IV + azithr (ZITHROMAX) 500 mg IV	antibiotic use below:  ponse)  allergy?  Tomycin "And" Linked Panel  1 g, intravenous, for 30 Minutes, once, For 1 Doses Classification: Broad Spectrum Antibiotic  When multiple antimicrobial agents are ordered, you may administer these immediately at the SAME TIME via different IV sites. Do not
** if not already started within the last 24 hours Please Select the appropriate indication(s) for a  Community-Acquired Pneumonia (Single Response your patient have a SEVERE penicillin a  () No (Single Response) () cefTRIAXone (ROCEPHIN) 1 g IV + azithr (ZITHROMAX) 500 mg IV	antibiotic use below:  ponse) fomycin "And" Linked Panel  1 g, intravenous, for 30 Minutes, once, For 1 Doses Classification: Broad Spectrum Antibiotic  When multiple antimicrobial agents are ordered, you may administer these immediately at the SAME TIME via different IV sites. Do not wait for the first antibiotic to infuse. If agents are Y-site compatible,
** if not already started within the last 24 hours Please Select the appropriate indication(s) for a  Community-Acquired Pneumonia (Single Response your patient have a SEVERE penicillin a  () No (Single Response)  () cefTRIAXone (ROCEPHIN) 1 g IV + azithr (ZITHROMAX) 500 mg IV	ponse) fomycin  "And" Linked Panel  1 g, intravenous, for 30 Minutes, once, For 1 Doses Classification: Broad Spectrum Antibiotic  When multiple antimicrobial agents are ordered, you may administer these immediately at the SAME TIME via different IV sites. Do not wait for the first antibiotic to infuse. If agents are Y-site compatible, they may be administered per Y-site protocols. IF the ordered agents
** if not already started within the last 24 hours Please Select the appropriate indication(s) for a  Community-Acquired Pneumonia (Single Response your patient have a SEVERE penicillin a  () No (Single Response)  () cefTRIAXone (ROCEPHIN) 1 g IV + azithr (ZITHROMAX) 500 mg IV	antibiotic use below:  ponse) fillergy?  Tomycin "And" Linked Panel  1 g, intravenous, for 30 Minutes, once, For 1 Doses Classification: Broad Spectrum Antibiotic  When multiple antimicrobial agents are ordered, you may administer these immediately at the SAME TIME via different IV sites. Do not wait for the first antibiotic to infuse. If agents are Y-site compatible, they may be administered per Y-site protocols. IF the ordered agents are NOT Y site compatible, then administer the Broad-spectrum
** if not already started within the last 24 hours Please Select the appropriate indication(s) for a  Community-Acquired Pneumonia (Single Response your patient have a SEVERE penicillin a  () No (Single Response)  () cefTRIAXone (ROCEPHIN) 1 g IV + azithr (ZITHROMAX) 500 mg IV	antibiotic use below:  ponse) fillergy?  Tomycin "And" Linked Panel  1 g, intravenous, for 30 Minutes, once, For 1 Doses Classification: Broad Spectrum Antibiotic  When multiple antimicrobial agents are ordered, you may administer these immediately at the SAME TIME via different IV sites. Do not wait for the first antibiotic to infuse. If agents are Y-site compatible, they may be administered per Y-site protocols. IF the ordered agents are NOT Y site compatible, then administer the Broad-spectrum antibiotic first. Refer to available Y site compatibility information and
** if not already started within the last 24 hours Please Select the appropriate indication(s) for a  Community-Acquired Pneumonia (Single Response your patient have a SEVERE penicillin a  () No (Single Response)  () cefTRIAXone (ROCEPHIN) 1 g IV + azithr (ZITHROMAX) 500 mg IV	antibiotic use below:  ponse)  Illergy?  Tomycin "And" Linked Panel  1 g, intravenous, for 30 Minutes, once, For 1 Doses Classification: Broad Spectrum Antibiotic  When multiple antimicrobial agents are ordered, you may administer these immediately at the SAME TIME via different IV sites. Do not wait for the first antibiotic to infuse. If agents are Y-site compatible, they may be administered per Y-site protocols. IF the ordered agents are NOT Y site compatible, then administer the Broad-spectrum antibiotic first. Refer to available Y site compatibility information and determination of broad-spectrum antibiotic selection chart.
** if not already started within the last 24 hours Please Select the appropriate indication(s) for a  Community-Acquired Pneumonia (Single Response your patient have a SEVERE penicillin a  () No (Single Response)  () cefTRIAXone (ROCEPHIN) 1 g IV + azithr (ZITHROMAX) 500 mg IV	ponse) Illergy?  Tomycin "And" Linked Panel  1 g, intravenous, for 30 Minutes, once, For 1 Doses Classification: Broad Spectrum Antibiotic  When multiple antimicrobial agents are ordered, you may administer these immediately at the SAME TIME via different IV sites. Do not wait for the first antibiotic to infuse. If agents are Y-site compatible, they may be administered per Y-site protocols. IF the ordered agents are NOT Y site compatible, then administer the Broad-spectrum antibiotic first. Refer to available Y site compatibility information and determination of broad-spectrum antibiotic selection chart. Reason for Therapy: Bacterial Infection Suspected
** if not already started within the last 24 hours Please Select the appropriate indication(s) for a  Community-Acquired Pneumonia (Single Response your patient have a SEVERE penicillin a  () No (Single Response)  () cefTRIAXone (ROCEPHIN) 1 g IV + azithr (ZITHROMAX) 500 mg IV	Intibiotic use below:  ponse)  Illergy?  Tomycin "And" Linked Panel  1 g, intravenous, for 30 Minutes, once, For 1 Doses Classification: Broad Spectrum Antibiotic  When multiple antimicrobial agents are ordered, you may administer these immediately at the SAME TIME via different IV sites. Do not wait for the first antibiotic to infuse. If agents are Y-site compatible, they may be administered per Y-site protocols. IF the ordered agents are NOT Y site compatible, then administer the Broad-spectrum antibiotic first. Refer to available Y site compatibility information and determination of broad-spectrum antibiotic selection chart. Reason for Therapy: Bacterial Infection Suspected Indication: Sepsis
** if not already started within the last 24 hours Please Select the appropriate indication(s) for a  Community-Acquired Pneumonia (Single Response your patient have a SEVERE penicillin a  () No (Single Response)  () cefTRIAXone (ROCEPHIN) 1 g IV + azithr (ZITHROMAX) 500 mg IV	Intibiotic use below:  ponse)  Illergy?  Tomycin "And" Linked Panel  1 g, intravenous, for 30 Minutes, once, For 1 Doses Classification: Broad Spectrum Antibiotic  When multiple antimicrobial agents are ordered, you may administer these immediately at the SAME TIME via different IV sites. Do not wait for the first antibiotic to infuse. If agents are Y-site compatible, they may be administered per Y-site protocols. IF the ordered agents are NOT Y site compatible, then administer the Broad-spectrum antibiotic first. Refer to available Y site compatibility information and determination of broad-spectrum antibiotic selection chart. Reason for Therapy: Bacterial Infection Suspected Indication: Sepsis Recommendation: Sepsis: Recommended duration is dependent upon
** if not already started within the last 24 hours Please Select the appropriate indication(s) for a  Community-Acquired Pneumonia (Single Response your patient have a SEVERE penicillin a  () No (Single Response)  () cefTRIAXone (ROCEPHIN) 1 g IV + azithr (ZITHROMAX) 500 mg IV	Intibiotic use below:  ponse)  Illergy?  Tomycin "And" Linked Panel  1 g, intravenous, for 30 Minutes, once, For 1 Doses Classification: Broad Spectrum Antibiotic  When multiple antimicrobial agents are ordered, you may administer these immediately at the SAME TIME via different IV sites. Do not wait for the first antibiotic to infuse. If agents are Y-site compatible, they may be administered per Y-site protocols. IF the ordered agents are NOT Y site compatible, then administer the Broad-spectrum antibiotic first. Refer to available Y site compatibility information and determination of broad-spectrum antibiotic selection chart. Reason for Therapy: Bacterial Infection Suspected Indication: Sepsis

[] azithromycin (ZITHROMAX) IV	500 mg, intravenous, for 60 Minutes, once, For 1 Doses Classification: Narrow Spectrum Antibiotic
	When multiple antimicrobial agents are ordered, you may administer
	these immediately at the SAME TIME via different IV sites. Do not wait
	for the first antibiotic to infuse. If agents are Y-site compatible, they may
	be administered per Y-site protocols. IF the ordered agents are NOT Y
	site compatible, then administer the Broad-spectrum antibiotic first.
	Refer to available Y site compatibility information and determination of
	broad-spectrum antibiotic selection chart.
	Reason for Therapy: Bacterial Infection Suspected
	Indication: Sepsis
	Recommendation: Sepsis: Recommended duration is dependent upon patient's clinical response and source identification
) cefTRIAXone (ROCEPHIN) 1 g IV + levofloxacin (LEVAQUIN) 750 mg IV	
[] cefTRIAXone (ROCEPHIN) IV	1 g, intravenous, for 30 Minutes, once, For 1 Doses
• • • • • • • • • • • • • • • • • • • •	Classification: Broad Spectrum Antibiotic
	When multiple antimicrobial agents are ordered, you may administer
	these immediately at the SAME TIME via different IV sites. Do not
	wait for the first antibiotic to infuse. If agents are Y-site compatible,
	they may be administered per Y-site protocols. IF the ordered agents
	are NOT Y site compatible, then administer the Broad-spectrum
	antibiotic first. Refer to available Y site compatibility information and
	determination of broad-spectrum antibiotic selection chart.
	Reason for Therapy: Bacterial Infection Suspected
	Indication: Sepsis Recommendation: Sepsis: Recommended duration is dependent upon
	patient's clinical response and source identification
[] levofloxacin (LEVAQUIN) IV	750 mg, intravenous, once, For 1 Doses
.,	Classification: Narrow Spectrum Antibiotic
	When multiple antimicrobial agents are ordered, you may administer
	these immediately at the SAME TIME via different IV sites. Do not
	wait for the first antibiotic to infuse. If agents are Y-site compatible,
	they may be administered per Y-site protocols. IF the ordered agents
	are NOT Y site compatible, then administer the Broad-spectrum
	antibiotic first. Refer to available Y site compatibility information and determination of broad-spectrum antibiotic selection chart.
	Reason for Therapy: Bacterial Infection Suspected
	Indication: Sepsis
	Recommendation: Sepsis: Recommended duration is dependent upon
	patient's clinical response and source identification
) cefTRIAXone (ROCEPHIN) 1 g intraMUSCULAR azithromycin (ZITHROMAX) 500 mg IV	R + "And" Linked Panel
[] cefTRIAXone (ROCEPHIN) IM	1 g, intramuscular, once, For 1 Doses
	Intramuscular route selected because no IV access available.
	Administer dose by deep IM into large muscle mass (e.g. gluteal
	muscles or lateral part of the thigh).
	IM Route Selection: I have opted to select the IM route because IV
	access could not be established
	Reason for Therapy: Bacterial Infection Suspected
	Indication: Sepsis Recommendation: Sepsis: Recommended duration is dependent upon
	patient's clinical response and source identification
	Famous coposito and obtained identification

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

	[] azithromycin (ZITHROMAX) IV	500 mg, intravenous, for 60 Minutes, once, For 1 Doses Classification: Narrow Spectrum Antibiotic
		When multiple antimicrobial agents are ordered, you may administer these immediately at the SAME TIME via different IV sites. Do not wait for the first antibiotic to infuse. If agents are Y-site compatible, they may be administered per Y-site protocols. IF the ordered agents are NOT Y site compatible, then administer the Broad-spectrum antibiotic first. Refer to available Y site compatibility information and determination of broad-spectrum antibiotic selection chart. Reason for Therapy: Bacterial Infection Suspected Indication: Sepsis Recommended duration is dependent upon patient's clinical response and source identification
	() aztreonam (AZACTAM) 2 g intraMUSCULAR +	"And" Linked Panel
	azithromycin (ZITHROMAX) 500 mg IV	
	[] aztreonam (AZACTAM) IM	2 g, intramuscular, once, For 1 Doses Intramuscular route selected because no IV access available. Administer dose by deep IM into large muscle mass (e.g. gluteal muscles or lateral part of the thigh). Reason for Therapy: Bacterial Infection Suspected Indication: Sepsis IM Route Selection: I have opted to select the IM route because IV access could not be established
	[] azithromycin (ZITHROMAX) IV	500 mg, intravenous, for 60 Minutes, once, For 1 Doses Classification: Narrow Spectrum Antibiotic
		When multiple antimicrobial agents are ordered, you may administer these immediately at the SAME TIME via different IV sites. Do not wait for the first antibiotic to infuse. If agents are Y-site compatible, they may be administered per Y-site protocols. IF the ordered agents are NOT Y site compatible, then administer the Broad-spectrum antibiotic first. Refer to available Y site compatibility information and determination of broad-spectrum antibiotic selection chart. Reason for Therapy: Bacterial Infection Suspected IM Route Selection: I have opted to select the IM route because IV access could not be established Indication: Sepsis Recommended duration is dependent upon patient's clinical response and source identification
[]	Nosocomial Pneumonia OR Community-Acquired Pneumonia with Multi Drug-Resistant Risk (Single Response)	
	immunosuppressed, on home infusion therapy or ho	nycin may be associated with an increased incidence of acute kidney
-	( ) No SEVERE Penicillin OR Vancomycin Allergy	, · · · · · · · · · · · · · · · · · · ·
	Response)	
	Use meropenem (MERREM) if history of infection piperacillin/tazobactam or cefepime.	with ESBL-producing organism or recent prolonged treatment with
	() ceFEPime 2 g IV + vancomycin 15 mg/kg IV	

[] ceFEPime (MAXIPIME) IV	2 g, intravenous, once, For 1 Doses Classification: Broad Spectrum Antibiotic
	When multiple antimicrobial agents are ordered, you may administer these immediately at the SAME TIME via different IV sites. Do not wait for the first antibiotic to infuse. If agents are V site compatible, they may
	for the first antibiotic to infuse. If agents are Y-site compatible, they may be administered per Y-site protocols. IF the ordered agents are NOT Y site compatible, then administer the Broad-spectrum antibiotic first. Refer to available Y site compatibility information and determination of
	broad-spectrum antibiotic selection chart. Reason for Therapy: Bacterial Infection Suspected
	Indication: Sepsis Recommendation: Sepsis: Recommended duration is dependent upon patient's clinical response and source identification
<ul><li>[] vancomycin (VANCOCIN) IV + Pharmacy Cor Dose (Selection Required)</li></ul>	nsult to
[] vancomycin (VANCOCIN)	15 mg/kg, intravenous, once, For 1 Doses Classification: Narrow Spectrum Antibiotic
	When multiple antimicrobial agents are ordered, you may administer these immediately at the SAME TIME via different IV sites. Do not wait for the first antibiotic to infuse. If agents are Y-site compatible,
	they may be administered per Y-site protocols. IF the ordered agents are NOT Y site compatible, then administer the Broad-spectrum antibiotic first. Refer to available Y site compatibility information and
	determination of broad-spectrum antibiotic selection chart. Reason for Therapy: Bacterial Infection Suspected
	Indication: Sepsis Recommendation: Sepsis: Recommended duration is dependent upon patient's clinical response and source identification
[] Pharmacy consult to manage vancomycin	STAT, Once For 1 Occurrences Reason for Therapy: Bacterial Infection Suspected Indication: Sepsis
	Recommendation: Sepsis: Recommended duration is dependent upon patient's clinical response and source identification Duration of Therapy (Days): 1
[] Adjunct Antibiotics - amikacin (AMIKIN) 15 mg levofloxacin 750 mg IV (Single Response)	
() amikacin (AMIKIN) IV	15 mg/kg, intravenous, for 30 Minutes, once, For 1 Doses Classification: Narrow Spectrum Antibiotic
	When multiple antimicrobial agents are ordered, you may administer these immediately at the SAME TIME via different IV sites. Do not
	wait for the first antibiotic to infuse. If agents are Y-site compatible, they may be administered per Y-site protocols. IF the ordered agents are NOT Y site compatible, then administer the Broad-spectrum antibiotic first. Refer to available Y site compatibility information and determination of broad-spectrum antibiotic selection chart.
	Reason for Therapy: Bacterial Infection Suspected Indication: Sepsis
( ) levofloxacin (LEVAQUIN) IV	750 mg, intravenous, once, For 1 Doses Classification: Narrow Spectrum Antibiotic
	When multiple antimicrobial agents are ordered, you may administer these immediately at the SAME TIME via different IV sites. Do not wait for the first antibiotic to infuse. If agents are Y-site compatible, they may be administered per Y-site protocols. IF the ordered agents are NOT Y site compatible, then administer the Broad-spectrum antibiotic first. Refer to available Y site compatibility information and determination of broad-spectrum antibiotic selection chart. Reason for Therapy: Bacterial Infection Suspected Indication: Sepsis
	Recommendation: Sepsis: Recommended duration is dependent upon patient's clinical response and source identification

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

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

[] piperacillin-tazobactam (ZOSYN) 4.5 g IV	4.5 g, intravenous, for 4 Hours, once, Starting H+6 Hours, For 1
every 8 hours	Doses
	Classification: Broad Spectrum Antibiotic
	When multiple antimicrobial agents are ordered, you may administer these immediately at the SAME TIME via different IV sites. Do not wait for the first antibiotic to infuse. If agents are Y-site compatible, they may be administered per Y-site protocols. IF the ordered agents
	are NOT Y site compatible, then administer the Broad-spectrum antibiotic first. Refer to available Y site compatibility information and determination of broad-spectrum antibiotic selection chart.
	Reason for Therapy: Bacterial Infection Suspected
	Indication: Sepsis
	Recommendation: Sepsis: Recommended duration is dependent upon patient's clinical response and source identification
[] vancomycin (VANCOCIN) IV + Pharmacy Cons Dose (Selection Required)	· · · ·
[] vancomycin (VANCOCIN)	15 mg/kg, intravenous, once, For 1 Doses
, , ,	Classification: Narrow Spectrum Antibiotic
	When multiple antimicrobial agents are ordered, you may administer these immediately at the SAME TIME via different IV sites. Do not
	wait for the first antibiotic to infuse. If agents are Y-site compatible,
	they may be administered per Y-site protocols. IF the ordered agents
	are NOT Y site compatible, then administer the Broad-spectrum antibiotic first. Refer to available Y site compatibility information and
	determination of broad-spectrum antibiotic selection chart.
	Reason for Therapy: Bacterial Infection Suspected
	Indication: Sepsis Recommendation: Sepsis: Recommended duration is dependent
	upon patient's clinical response and source identification
[] Pharmacy consult to manage vancomycin	STAT, Once For 1 Occurrences
	Reason for Therapy: Bacterial Infection Suspected Indication: Sepsis
	Recommendation: Sepsis: Recommended duration is dependent
	upon patient's clinical response and source identification Duration of Therapy (Days): 1
[] Adjunct Antibiotics - amikacin (AMIKIN) 15 mg/l levofloxacin 750 mg IV (Single Response)	
( ) amikacin (AMIKIN) IV	15 mg/kg, intravenous, for 30 Minutes, once, For 1 Doses
	Classification: Narrow Spectrum Antibiotic
	When multiple antimicrobial agents are ordered, you may administer
	these immediately at the SAME TIME via different IV sites. Do not
	wait for the first antibiotic to infuse. If agents are Y-site compatible, they may be administered per Y-site protocols. IF the ordered agents
	are NOT Y site compatible, then administer the Broad-spectrum
	antibiotic first. Refer to available Y site compatibility information and
	determination of broad-spectrum antibiotic selection chart.  Reason for Therapy: Bacterial Infection Suspected
	Indication: Sepsis
( ) levofloxacin (LEVAQUIN) IV	750 mg, intravenous, once, For 1 Doses Classification: Narrow Spectrum Antibiotic
	When multiple antimicrobial agents are ordered, you may administer
	these immediately at the SAME TIME via different IV sites. Do not
	wait for the first antibiotic to infuse. If agents are Y-site compatible, they may be administered per Y-site protocols. IF the ordered agents
	are NOT Y site compatible, then administer the Broad-spectrum
	antibiotic first. Refer to available Y site compatibility information and
	determination of broad-spectrum antibiotic selection chart.  Per Med Staff Policy, R.Ph. will automatically switch IV to equivalent
	PO dose when above approved criteria are satisfied:
	Reason for Therapy:

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

() amikacin (AMIKIN) IV	15 mg/kg, intravenous, for 30 Minutes, once, For 1 Doses Classification: Narrow Spectrum Antibiotic
	When multiple antimicrobial agents are ordered, you may administer these immediately at the SAME TIME via different IV sites. Do not wait for the first antibiotic to infuse. If agents are Y-site compatible,
	they may be administered per Y-site protocols. IF the ordered agents are NOT Y site compatible, then administer the Broad-spectrum
	antibiotic first. Refer to available Y site compatibility information and
	determination of broad-spectrum antibiotic selection chart.
	Reason for Therapy: Bacterial Infection Suspected Indication: Sepsis
( ) levofloxacin (LEVAQUIN) IV	750 mg, intravenous, once, For 1 Doses
	Classification: Narrow Spectrum Antibiotic
	When multiple antimicrobial agents are ordered, you may administer these immediately at the SAME TIME via different IV sites. Do not
	wait for the first antibiotic to infuse. If agents are Y-site compatible,
	they may be administered per Y-site protocols. IF the ordered agents
	are NOT Y site compatible, then administer the Broad-spectrum
	antibiotic first. Refer to available Y site compatibility information and determination of broad-spectrum antibiotic selection chart.
	Reason for Therapy: Bacterial Infection Suspected
	Indication: Sepsis
	Recommendation: Sepsis: Recommended duration is dependent upon patient's clinical response and source identification
[] Optional IV Antibiotic Addition - tobramycin (T mg/kg IV	
[] tobramycin (TOBREX) IV	7 mg/kg, intravenous, for 60 Minutes, once, For 1 Doses
, , ,	Pharmacy Consult to dose based on renal function
	Classification: Narrow Spectrum Antibiotic
	When multiple antimicrobial agents are ordered, you may administer these immediately at the SAME TIME via different IV sites. Do not
	wait for the first antibiotic to infuse. If agents are Y-site compatible, they may be administered per Y-site protocols. IF the ordered agents are NOT Y site compatible, then administer the Broad-spectrum
	antibiotic first. Refer to available Y site compatibility information and
	determination of broad-spectrum antibiotic selection chart.
	Reason for Therapy: Bacterial Infection Suspected Indication: Sepsis
[] Pharmacy consult to dose tobramycin	Routine, Once For 1 Occurrences
	Which aminoglycoside do you need help dosing? tobramycin
	Indication: Sepsis - Nosocomial Pneumonia OR Community-Acquired Pneumonia with Multi Drug-Resistant Risk
( ) ceFEPime 2 g intraMUSCULAR + vancomycin IV	•
[] cefepime (MAXIPIME) IM	2 g, intramuscular, once, For 1 Doses
	Intramuscular route selected because no IV access available.
	Administer dose by deep IM into large muscle mass (e.g. gluteal
	muscles or lateral part of the thigh). Reason for Therapy: Bacterial Infection Suspected
	Indication: Sepsis
	Recommendation: Sepsis: Recommended duration is dependent upon
	patient's clinical response and source identification
	IM Route Selection: I have opted to select the IM route because IV access could not be established
[] vancomycin (VANCOCIN) IV + Pharmacy Cor Dose (Selection Required)	

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

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

() levofloxacin (LEVAQUIN) IV	750 mg, intravenous, once, For 1 Doses Classification: Narrow Spectrum Antibiotic
	When multiple antimicrobial agents are ordered, you may administer these immediately at the SAME TIME via different IV sites. Do not wait for the first antibiotic to infuse. If agents are Y-site compatible, they may be administered per Y-site protocols. IF the ordered agents are NOT Y site compatible, then administer the Broad-spectrum antibiotic first. Refer to available Y site compatibility information and determination of broad-spectrum antibiotic selection chart. Reason for Therapy: Bacterial Infection Suspected Indication: Sepsis
	Recommendation: Sepsis: Recommended duration is dependent
[] Optional IV Antibiotic Addition - tobramycin	upon patient's clinical response and source identification (TOBREX) 7
mg/kg IV	. (
[] tobramycin (TOBREX) IV	7 mg/kg, intravenous, for 60 Minutes, once, For 1 Doses Pharmacy Consult to dose based on renal function
	Classification: Narrow Spectrum Antibiotic
	When multiple antimicrobial agents are ordered, you may administer these immediately at the SAME TIME via different IV sites. Do not wait for the first antibiotic to infuse. If agents are Y-site compatible, they may be administered per Y-site protocols. IF the ordered agents are NOT Y site compatible, then administer the Broad-spectrum antibiotic first. Refer to available Y site compatibility information and determination of broad-spectrum antibiotic selection chart. Reason for Therapy: Bacterial Infection Suspected Indication: Sepsis
[] Pharmacy consult to dose tobramycin	Routine, Once For 1 Occurrences Which aminoglycoside do you need help dosing? tobramycin Indication: Sepsis - Nosocomial Pneumonia OR Community-Acquired Pneumonia with Multi Drug-Resistant Risk
) SEVERE Penicillin Allergy (Single Response)	-
(i.e. Type 1 immediate hypersensitivity react	ion - anaphylaxis, bronchospasm, angioedema, urticaria)
( ) aztreonam (AZACTAM) 2 g IV + vancomycir IV	า 15 mg/kg
[] aztreonam (AZACTAM) IV	2 g, intravenous, once, For 1 Doses
F 3	Oleanifications, Dunnal On activing Autility
	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.

[] vancomycin (VANCOCIN)	15 mg/kg, intravenous, once, For 1 Doses Classification: Narrow Spectrum Antibiotic
	When multiple antimicrobial agents are ordered, you may administe these immediately at the SAME TIME via different IV sites. Do not wait for the first antibiotic to infuse. If agents are Y-site compatible, they may be administered per Y-site protocols. IF the ordered agent are NOT Y site compatible, then administer the Broad-spectrum antibiotic first. Refer to available Y site compatibility information and
	determination of broad-spectrum antibiotic selection chart. Reason for Therapy: Bacterial Infection Suspected Indication: Sepsis
	Recommendation: Sepsis: Recommended duration is dependent upon patient's clinical response and source identification
[] Pharmacy consult to manage vancomycin	STAT, Once For 1 Occurrences Reason for Therapy: Bacterial Infection Suspected Indication: Sepsis
	Recommendation: Sepsis: Recommended duration is dependent upon patient's clinical response and source identification Duration of Therapy (Days): 1
Adjunct Antibiotics - amikacin (AMIKIN) 15 mg/k	
levofloxacin 750 mg IV (Single Response) ( ) amikacin (AMIKIN) IV	15 mg/kg, intravenous, for 30 Minutes, once, For 1 Doses Classification: Narrow Spectrum Antibiotic
	When multiple antimicrobial agents are ordered, you may administe these immediately at the SAME TIME via different IV sites. Do not wait for the first antibiotic to infuse. If agents are Y-site compatible, they may be administered per Y-site protocols. IF the ordered agen
	are NOT Y site compatible, then administer the Broad-spectrum antibiotic first. Refer to available Y site compatibility information and determination of broad-spectrum antibiotic selection chart.
	Reason for Therapy: Bacterial Infection Suspected Indication: Sepsis
( ) levofloxacin (LEVAQUIN) IV	750 mg, intravenous, once, For 1 Doses Classification: Narrow Spectrum Antibiotic
	When multiple antimicrobial agents are ordered, you may administe these immediately at the SAME TIME via different IV sites. Do not wait for the first antibiotic to infuse. If agents are Y-site compatible,
	they may be administered per Y-site protocols. IF the ordered agen are NOT Y site compatible, then administer the Broad-spectrum antibiotic first. Refer to available Y site compatibility information and determination of broad apparatum antibiotic polarity plants.
	determination of broad-spectrum antibiotic selection chart. Reason for Therapy: Bacterial Infection Suspected Indication: Sepsis
	Recommendation: Sepsis: Recommended duration is dependent upon patient's clinical response and source identification
] Suspected Anaerobe Coverage: metroNIDAZOL (FLAGYL) 500 mg IV	<u>.                                    </u>
[] metroNIDAZOLE (FLAGYL) IV	500 mg, intravenous, once, For 1 Doses Classification: Narrow Spectrum Antibiotic
	When multiple antimicrobial agents are ordered, you may administe these immediately at the SAME TIME via different IV sites. Do not wait for the first antibiotic to infuse. If agents are Y-site compatible, they may be administered per Y-site protocols. IF the ordered agent
	are NOT Y site compatible, then administer the Broad-spectrum antibiotic first. Refer to available Y site compatibility information and determination of broad-spectrum antibiotic selection chart.
	Reason for Therapy: Bacterial Infection Suspected

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

[] metroNIDAZOLE (FLAGYL) IV 500 mg, intravenous, once, For 1 Doses Classification: Narrow Spectrum Antibiotic When multiple antimicrobial agents are ordered, you may administer these immediately at the SAME TIME via different IV sites. Do not wait for the first antibiotic to infuse. If agents are Y-site compatible, they may be administered per Y-site protocols. IF the ordered agents are NOT Y site compatible, then administer the Broad-spectrum antibiotic first. Refer to available Y site compatibility information and determination of broad-spectrum antibiotic selection chart. Reason for Therapy: Bacterial Infection Suspected Indication: Sepsis SEVERE Vancomycin Allergy (Single Response) Use meropenem (MERREM) if history of infection with ESBL-producing organism or recent prolonged treatment with piperacillin/tazobactam or cefepime. () ceFEPime 2 g IV + linezolid (ZYVOX) 600 mg IVPB [] ceFEPime (MAXIPIME) IV 2 g, intravenous, once, For 1 Doses Classification: Broad Spectrum Antibiotic When multiple antimicrobial agents are ordered, you may administer these immediately at the SAME TIME via different IV sites. Do not wait for the first antibiotic to infuse. If agents are Y-site compatible, they may be administered per Y-site protocols. IF the ordered agents are NOT Y site compatible, then administer the Broad-spectrum antibiotic first. Refer to available Y site compatibility information and determination of broad-spectrum antibiotic selection chart. Reason for Therapy: Bacterial Infection Suspected Indication: Sepsis Recommendation: Sepsis: Recommended duration is dependent upon patient's clinical response and source identification [] linezolid in dextrose 5% (ZYVOX) 600 600 mg, intravenous, for 60 Minutes, once, For 1 Doses mg/300 mL IVPB Classification: Narrow Spectrum Antibiotic When multiple antimicrobial agents are ordered, you may administer these immediately at the SAME TIME via different IV sites. Do not wait for the first antibiotic to infuse. If agents are Y-site compatible, they may be administered per Y-site protocols. IF the ordered agents are NOT Y site compatible, then administer the Broad-spectrum antibiotic first. Refer to available Y site compatibility information and determination of broad-spectrum antibiotic selection chart. Reason for Therapy: Bacterial Infection Suspected Indication: Sepsis Recommendation: Sepsis: Recommended duration is dependent upon patient's clinical response and source identification Adjunct Antibiotics - amikacin (AMIKIN) 15 mg/kg IV +/levofloxacin 750 mg IV (Single Response) () amikacin (AMIKIN) IV 15 mg/kg, intravenous, for 30 Minutes, once, For 1 Doses Classification: Narrow Spectrum Antibiotic When multiple antimicrobial agents are ordered, you may administer these immediately at the SAME TIME via different IV sites. Do not wait for the first antibiotic to infuse. If agents are Y-site compatible, they may be administered per Y-site protocols. IF the ordered agents are NOT Y site compatible, then administer the Broad-spectrum antibiotic first. Refer to available Y site compatibility information and determination of broad-spectrum antibiotic selection chart. Reason for Therapy: Bacterial Infection Suspected

Indication: Sepsis

() levofloxacin (LEVAQUIN) IV	750 mg, intravenous, once, For 1 Doses Classification: Narrow Spectrum Antibiotic
	When multiple antimicrobial agents are ordered, you may administer these immediately at the SAME TIME via different IV sites. Do not wait for the first antibiotic to infuse. If agents are Y-site compatible, they may be administered per Y-site protocols. IF the ordered agents are NOT Y site compatible, then administer the Broad-spectrum antibiotic first. Refer to available Y site compatibility information and determination of broad-spectrum antibiotic selection chart. Reason for Therapy: Bacterial Infection Suspected Indication: Sepsis  Recommendation: Sepsis: Recommended duration is dependent upon patient's clinical response and source identification
[] Optional IV Antibiotic Addition - tobramycin ( mg/kg IV	
[] tobramycin (TOBREX) IV	7 mg/kg, intravenous, for 60 Minutes, once, For 1 Doses Pharmacy Consult to dose based on renal function
	Classification: Narrow Spectrum Antibiotic
	When multiple antimicrobial agents are ordered, you may administer these immediately at the SAME TIME via different IV sites. Do not wait for the first antibiotic to infuse. If agents are Y-site compatible, they may be administered per Y-site protocols. IF the ordered agents are NOT Y site compatible, then administer the Broad-spectrum antibiotic first. Refer to available Y site compatibility information and determination of broad-spectrum antibiotic selection chart. Reason for Therapy: Bacterial Infection Suspected Indication: Sepsis
[] Pharmacy consult to dose tobramycin	Routine, Once For 1 Occurrences Which aminoglycoside do you need help dosing? tobramycin Indication: Sepsis - Nosocomial Pneumonia OR Community-Acquired Pneumonia with Multi Drug-Resistant Risk
( ) ceFEPime 2 g intraMUSCULAR + linezolid (Z mg IVPB	•
[] cefepime (MAXIPIME) IM	2 g, intramuscular, once, For 1 Doses Intramuscular route selected because no IV access available. Administer dose by deep IM into large muscle mass (e.g. gluteal muscles or lateral part of the thigh). Reason for Therapy: Bacterial Infection Suspected Indication: Sepsis Recommendation: Sepsis: Recommended duration is dependent upon patient's clinical response and source identification IM Route Selection: I have opted to select the IM route because IV access could not be established
[] linezolid in dextrose 5% (ZYVOX) IVPB	600 mg, intravenous, for 60 Minutes, once, For 1 Doses Classification: Narrow Spectrum Antibiotic
Adjunct Antibiotics - amikacin (AMIKIN) 15 m	When multiple antimicrobial agents are ordered, you may administer these immediately at the SAME TIME via different IV sites. Do not wait for the first antibiotic to infuse. If agents are Y-site compatible, they may be administered per Y-site protocols. IF the ordered agents are NOT Y site compatible, then administer the Broad-spectrum antibiotic first. Refer to available Y site compatibility information and determination of broad-spectrum antibiotic selection chart. Reason for Therapy: Bacterial Infection Suspected Indication: Sepsis Recommended duration is dependent upon patient's clinical response and source identification
levofloxacin 750 mg IV (Single Response)	'9''\9 ' ' ' '

() amikacin (AMIKIN) IV	15 mg/kg, intravenous, for 30 Minutes, once, For 1 Doses Classification: Narrow Spectrum Antibiotic
	When multiple antimicrobial agents are ordered, you may administer these immediately at the SAME TIME via different IV sites. Do not wait for the first antibiotic to infuse. If agents are Y-site compatible, they may be administered per Y-site protocols. IF the ordered agents
	are NOT Y site compatible, then administer the Broad-spectrum antibiotic first. Refer to available Y site compatibility information and
	determination of broad-spectrum antibiotic selection chart. Reason for Therapy: Bacterial Infection Suspected
	Indication: Sepsis
() levofloxacin (LEVAQUIN) IV	750 mg, intravenous, once, For 1 Doses Classification: Narrow Spectrum Antibiotic
	When multiple antimicrobial agents are ordered, you may administer these immediately at the SAME TIME via different IV sites. Do not
	wait for the first antibiotic to infuse. If agents are Y-site compatible,
	they may be administered per Y-site protocols. IF the ordered agents
	are NOT Y site compatible, then administer the Broad-spectrum antibiotic first. Refer to available Y site compatibility information and
	determination of broad-spectrum antibiotic selection chart.
	Reason for Therapy: Bacterial Infection Suspected Indication: Sepsis
	Recommendation: Sepsis: Recommended duration is dependent
	upon patient's clinical response and source identification
<ul><li>Optional IV Antibiotic Addition - tobramycin ( mg/kg IV</li></ul>	·
[] tobramycin (TOBREX) IV	7 mg/kg, intravenous, for 60 Minutes, once, For 1 Doses Pharmacy Consult to dose based on renal function
	Classification: Narrow Spectrum Antibiotic
	When multiple antimicrobial agents are ordered, you may administer these immediately at the SAME TIME via different IV sites. Do not
	wait for the first antibiotic to infuse. If agents are Y-site compatible, they may be administered per Y-site protocols. IF the ordered agents
	are NOT Y site compatible, then administer the Broad-spectrum antibiotic first. Refer to available Y site compatibility information and
	determination of broad-spectrum antibiotic selection chart.
	Reason for Therapy: Bacterial Infection Suspected
[] Pharmacy consult to dose tobramycin	Indication: Sepsis Routine, Once For 1 Occurrences
[1 - Hammady content to dood toolarryon.	Which aminoglycoside do you need help dosing? tobramycin
	Indication: Sepsis - Nosocomial Pneumonia OR Community-Acquired Pneumonia with Multi Drug-Resistant Risk
() piperacillin-tazobactam (ZOSYN) 4.5 g IV + lii (ZYVOX) 600 mg IVPB (NOT HMW)	
[] piperacillin-tazobactam (ZOSYN) IV	4.5 g, intravenous, once, For 1 Doses
	Classification: Broad Spectrum Antibiotic
	When multiple antimicrobial agents are ordered, you may administer these immediately at the SAME TIME via different IV sites. Do not wait
	for the first antibiotic to infuse. If agents are Y-site compatible, they may
	be administered per Y-site protocols. IF the ordered agents are NOT Y
	site compatible, then administer the Broad-spectrum antibiotic first.  Refer to available Y site compatibility information and determination of broad-spectrum antibiotic selection chart.
	Reason for Therapy: Bacterial Infection Suspected
	Indication: Sepsis
	Recommendation: Sepsis: Recommended duration is dependent upon patient's clinical response and source identification
	pana. No omnosi reopenso una ocurso identification

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

[] piperacillin-tazobactam (ZOSYNI) EI IV	4.5 g, intravenous, for 4 Hours, once, For 1 Doses Classification: Broad Spectrum Antibiotic
	When multiple antimicrobial agents are ordered, you may administer these immediately at the SAME TIME via different IV sites. Do not wait for the first antibiotic to infuse. If agents are Y-site compatible, they ma be administered per Y-site protocols. IF the ordered agents are NOT Y site compatible, then administer the Broad-spectrum antibiotic first. Refer to available Y site compatibility information and determination of
	broad-spectrum antibiotic selection chart. Reason for Therapy: Bacterial Infection Suspected Indication: Sepsis
	Recommendation: Sepsis: Recommended duration is dependent upon patient's clinical response and source identification
[] linezolid in dextrose 5% (ZYVOX) IVPB	600 mg, intravenous, for 60 Minutes, once, For 1 Doses Classification: Narrow Spectrum Antibiotic
	When multiple antimicrobial agents are ordered, you may administer these immediately at the SAME TIME via different IV sites. Do not wait for the first antibiotic to infuse. If agents are Y-site compatible, they may be administered per Y-site protocols. IF the ordered agents are NOT Y site compatible, then administer the Broad-spectrum antibiotic first. Refer to available Y site compatibility information and determination of broad-spectrum antibiotic selection chart.
	Reason for Therapy: Bacterial Infection Suspected
	Indication: Sepsis Recommendation: Sepsis: Recommended duration is dependent upor
I 1 Adicinat Antibiotica annihopin (ANNIZINI) 45 ma	patient's clinical response and source identification
<ul> <li>Adjunct Antibiotics - amikacin (AMIKIN) 15 m levofloxacin 750 mg IV (Single Response)</li> </ul>	g/kg IV +/-
() amikacin (AMIKIN) IV	15 mg/kg, intravenous, for 30 Minutes, once, For 1 Doses Classification: Narrow Spectrum Antibiotic
	When multiple antimicrobial agents are ordered, you may administer these immediately at the SAME TIME via different IV sites. Do not wait for the first antibiotic to infuse. If agents are Y-site compatible, they may be administered per Y-site protocols. IF the ordered agents are NOT Y site compatible, then administer the Broad-spectrum antibiotic first. Refer to available Y site compatibility information and determination of broad-spectrum antibiotic selection chart. Reason for Therapy: Bacterial Infection Suspected Indication: Sepsis
() levofloxacin (LEVAQUIN) IV	750 mg, intravenous, once, For 1 Doses Classification: Narrow Spectrum Antibiotic
	When multiple antimicrobial agents are ordered, you may administer these immediately at the SAME TIME via different IV sites. Do not wait for the first antibiotic to infuse. If agents are Y-site compatible, they may be administered per Y-site protocols. IF the ordered agents are NOT Y site compatible, then administer the Broad-spectrum antibiotic first. Refer to available Y site compatibility information and determination of broad-spectrum antibiotic selection chart. Reason for Therapy: Bacterial Infection Suspected Indication: Sepsis Recommended duration is dependent
	upon patient's clinical response and source identification

[] tobramycin (TOBREX) IV	7 mg/kg, intravenous, for 60 Minutes, once, For 1 Doses Pharmacy Consult to dose based on renal function
	Classification: Narrow Spectrum Antibiotic
	When multiple antimicrobial agents are ordered, you may administer these immediately at the SAME TIME via different IV sites. Do not wait for the first antibiotic to infuse. If agents are Y-site compatible, they may be administered per Y-site protocols. IF the ordered agents are NOT Y site compatible, then administer the Broad-spectrum antibiotic first. Refer to available Y site compatibility information and determination of broad-spectrum antibiotic selection chart. Reason for Therapy: Bacterial Infection Suspected Indication: Sepsis
[] Pharmacy consult to dose tobramycin	Routine, Once For 1 Occurrences Which aminoglycoside do you need help dosing? tobramycin Indication: Sepsis - Nosocomial Pneumonia
) meropenem (MERREM) 500 mg IV + linezolio 600 mg IV	d (ZYVOX)
[] meropenem (MERREM) IV	500 mg, intravenous, once, For 1 Doses Classification: Broad Spectrum Antibiotic
	When multiple antimicrobial agents are ordered, you may administer these immediately at the SAME TIME via different IV sites. Do not wait for the first antibiotic to infuse. If agents are Y-site compatible, they may be administered per Y-site protocols. IF the ordered agents are NOT Y site compatible, then administer the Broad-spectrum antibiotic first. Refer to available Y site compatibility information and determination of broad-spectrum antibiotic selection chart. Reason for Therapy: Bacterial Infection Suspected Indication: Sepsis Recommended duration is dependent upon
[] linezolid in dextrose 5% (ZYVOX) IVPB	patient's clinical response and source identification 600 mg, intravenous, for 60 Minutes, once, For 1 Doses
	Classification: Narrow Spectrum Antibiotic  When multiple antimicrobial agents are ordered, you may administer these immediately at the SAME TIME via different IV sites. Do not wait for the first antibiotic to infuse. If agents are Y-site compatible, they may be administered per Y-site protocols. IF the ordered agents are NOT Y site compatible, then administer the Broad-spectrum antibiotic first. Refer to available Y site compatibility information and determination of broad-spectrum antibiotic selection chart.  Reason for Therapy: Bacterial Infection Suspected Indication: Sepsis  Recommendation: Sepsis: Recommended duration is dependent upon patient's clinical response and source identification
[] Adjunct Antibiotics - amikacin (AMIKIN) 15 n levofloxacin 750 mg IV (Single Response)	
() amikacin (AMIKIN) IV	15 mg/kg, intravenous, for 30 Minutes, once, For 1 Doses Classification: Narrow Spectrum Antibiotic  When multiple antimicrobial agents are ordered, you may administer these immediately at the SAME TIME via different IV sites. Do not wait for the first antibiotic to infuse. If agents are Y-site compatible, they may be administered per Y-site protocols. IF the ordered agents are NOT Y site compatible, then administer the Broad-spectrum antibiotic first. Refer to available Y site compatibility information and determination of broad-spectrum antibiotic selection chart. Reason for Therapy: Bacterial Infection Suspected Indication: Sepsis

( ) levofloxacin (LEVAQUIN) IV	750 mg, intravenous, once, For 1 Doses Classification: Narrow Spectrum Antibiotic
	When multiple antimicrobial agents are ordered, you may administer these immediately at the SAME TIME via different IV sites. Do not wait for the first antibiotic to infuse. If agents are Y-site compatible, they may be administered per Y-site protocols. IF the ordered agents are NOT Y site compatible, then administer the Broad-spectrum
	antibiotic first. Refer to available Y site compatibility information and determination of broad-spectrum antibiotic selection chart. Reason for Therapy: Bacterial Infection Suspected
	Indication: Sepsis Recommendation: Sepsis: Recommended duration is dependent upon patient's clinical response and source identification
[] Optional IV Antibiotic Addition - tobramycin (mg/kg IV	
[] tobramycin (TOBREX) IV	7 mg/kg, intravenous, for 60 Minutes, once, For 1 Doses Pharmacy Consult to dose based on renal function
	Classification: Narrow Spectrum Antibiotic
	When multiple antimicrobial agents are ordered, you may administer these immediately at the SAME TIME via different IV sites. Do not wait for the first antibiotic to infuse. If agents are Y-site compatible, they may be administered per Y-site protocols. IF the ordered agents
	are NOT Y site compatible, then administer the Broad-spectrum antibiotic first. Refer to available Y site compatibility information and determination of broad-spectrum antibiotic selection chart. Reason for Therapy: Bacterial Infection Suspected Indication: Sepsis
[] Pharmacy consult to dose tobramycin	Routine, Once For 1 Occurrences Which aminoglycoside do you need help dosing? tobramycin Indication: Sepsis - Nosocomial Pneumonia
) SEVERE Penicillin AND Vancomycin Allergy (S Response)	Single
, ,	n - anaphylaxis, bronchospasm, angioedema, urticaria)
( ) aztreonam (AZACTAM) 2 g IV + linezolid (ZY mg IVPB	VOX) 600
[] aztreonam (AZACTAM) IV	2 g, intravenous, once, For 1 Doses Classification: Broad Spectrum Antibiotic
	When multiple antimicrobial agents are ordered, you may administer these immediately at the SAME TIME via different IV sites. Do not wait for the first antibiotic to infuse. If agents are Y-site compatible, they may be administered per Y-site protocols. IF the ordered agents are NOT Y site compatible, then administer the Broad-spectrum antibiotic first. Refer to available Y site compatibility information and determination of broad-spectrum antibiotic selection chart. Reason for Therapy: Bacterial Infection Suspected Indication: Sepsis

[] linezolid in dextrose 5% (ZYVOX) IVPB	600 mg, intravenous, for 60 Minutes, once, For 1 Doses Classification: Narrow Spectrum Antibiotic
	When multiple antimicrobial agents are ordered, you may administer these immediately at the SAME TIME via different IV sites. Do not wait for the first antibiotic to infuse. If agents are Y-site compatible, they may be administered per Y-site protocols. IF the ordered agents are NOT Y site compatible, then administer the Broad-spectrum antibiotic first. Refer to available Y site compatibility information and determination of broad-spectrum antibiotic selection chart. Reason for Therapy: Bacterial Infection Suspected Indication: Sepsis Recommended duration is dependent upon patient's clinical response and source identification
[] Adjunct Antibiotics - amikacin (AMIKIN) 15 m	
levofloxacin 750 mg IV (Single Response) () amikacin (AMIKIN) IV	15 mg/kg, intravenous, for 30 Minutes, once, For 1 Doses
,	Classification: Narrow Spectrum Antibiotic
	When multiple antimicrobial agents are ordered, you may administer these immediately at the SAME TIME via different IV sites. Do not wait for the first antibiotic to infuse. If agents are Y-site compatible, they may be administered per Y-site protocols. IF the ordered agents are NOT Y site compatible, then administer the Broad-spectrum antibiotic first. Refer to available Y site compatibility information and determination of broad-spectrum antibiotic selection chart. Reason for Therapy: Bacterial Infection Suspected Indication: Sepsis
() levofloxacin (LEVAQUIN) IV	750 mg, intravenous, once, For 1 Doses Classification: Narrow Spectrum Antibiotic
	When multiple antimicrobial agents are ordered, you may administer these immediately at the SAME TIME via different IV sites. Do not wait for the first antibiotic to infuse. If agents are Y-site compatible, they may be administered per Y-site protocols. IF the ordered agents are NOT Y site compatible, then administer the Broad-spectrum antibiotic first. Refer to available Y site compatibility information and determination of broad-spectrum antibiotic selection chart. Reason for Therapy: Bacterial Infection Suspected Indication: Sepsis Recommendation: Sepsis: Recommended duration is dependent upon patient's clinical response and source identification
[] Suspected Anaerobe Coverage: metroNIDAZ (FLAGYL) 500 mg IV	COLE
[] metroNIDAZOLE (FLAGYL) IV	500 mg, intravenous, once, For 1 Doses Classification: Narrow Spectrum Antibiotic
	When multiple antimicrobial agents are ordered, you may administer these immediately at the SAME TIME via different IV sites. Do not wait for the first antibiotic to infuse. If agents are Y-site compatible, they may be administered per Y-site protocols. IF the ordered agents are NOT Y site compatible, then administer the Broad-spectrum antibiotic first. Refer to available Y site compatibility information and determination of broad-spectrum antibiotic selection chart. Reason for Therapy: Bacterial Infection Suspected Indication: Sepsis

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

No (Single Response)	
) cefTRIAXone (ROCEPHIN) 1 g IV	
[] cefTRIAxone (ROCEPHIN) IV	1 g, intravenous, for 30 Minutes, once, For 1 Doses Classification: Broad Spectrum Antibiotic
	When multiple antimicrobial agents are ordered, you may administer these immediately at the SAME TIME via different IV sites. Do not wait for the first antibiotic to infuse. If agents are Y-site compatible, they may be administered per Y-site protocols. IF the ordered agen are NOT Y site compatible, then administer the Broad-spectrum antibiotic first. Refer to available Y site compatibility information and determination of broad-spectrum antibiotic selection chart. Reason for Therapy: Bacterial Infection Suspected Indication: Sepsis
	Recommendation: Sepsis: Recommended duration is dependent upon
	patient's clinical response and source identification
[] Optional IV Antibiotic Addition - tobramycin mg/kg IV	(TOBREX) 7
[] tobramycin (TOBREX) IV	7 mg/kg, intravenous, for 60 Minutes, once, For 1 Doses Pharmacy Consult to dose based on renal function
	Classification: Narrow Spectrum Antibiotic
	When multiple antimicrobial agents are ordered, you may administed these immediately at the SAME TIME via different IV sites. Do not wait for the first antibiotic to infuse. If agents are Y-site compatible, they may be administered per Y-site protocols. IF the ordered agent are NOT Y site compatible, then administer the Broad-spectrum antibiotic first. Refer to available Y site compatibility information and determination of broad-spectrum antibiotic selection chart. Reason for Therapy: Bacterial Infection Suspected Indication: Sepsis
[] Pharmacy consult to dose tobramycin	Routine, Until discontinued, Starting S Which aminoglycoside do you need help dosing? tobramycin Indication:
) cefTRIAXone (ROCEPHIN) 1 g intraMUSCUI	
[] cefTRIAXone (ROCEPHIN) 1 g intraMUSCULAR	1 g, intramuscular, once, For 1 Doses Intramuscular route selected because no IV access available. Administer dose by deep IM into large muscle mass (e.g. gluteal muscles or lateral part of the thigh). Reason for Therapy: Bacterial Infection Suspected Indication: Sepsis Recommendation: Sepsis: Recommended duration is dependent upon
	patient's clinical response and source identification IM Route Selection: I have opted to select the IM route because IV access could not be established

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

<ul><li>Optional IV Antibiotic Addition - tobramycin mg/kg IV</li></ul>	(IODREA) /
[] tobramycin (TOBREX) IV	7 mg/kg, intravenous, for 60 Minutes, once, For 1 Doses Pharmacy Consult to dose based on renal function
	Classification: Narrow Spectrum Antibiotic
	When multiple antimicrobial agents are ordered, you may administer these immediately at the SAME TIME via different IV sites. Do not wait for the first antibiotic to infuse. If agents are Y-site compatible, they may be administered per Y-site protocols. IF the ordered agents are NOT Y site compatible, then administer the Broad-spectrum antibiotic first. Refer to available Y site compatibility information and determination of broad-spectrum antibiotic selection chart. Reason for Therapy: Bacterial Infection Suspected Indication: Sepsis
[] Pharmacy consult to dose tobramycin	Routine, Once For 1 Occurrences Which aminoglycoside do you need help dosing? tobramycin Indication: Sepsis - Urinary Tract Infection
) piperacillin-tazobactam (ZOSYN) 4.5 g IV (NO	<u>'</u>
[] piperacillin-tazobactam (ZOSYN) IV	4.5 g, intravenous, once, For 1 Doses Classification: Broad Spectrum Antibiotic
[1. Optional IV Antibiotics Addition to bramusin.	When multiple antimicrobial agents are ordered, you may administer these immediately at the SAME TIME via different IV sites. Do not wait for the first antibiotic to infuse. If agents are Y-site compatible, they may be administered per Y-site protocols. IF the ordered agents are NOT Y site compatible, then administer the Broad-spectrum antibiotic first. Refer to available Y site compatibility information and determination of broad-spectrum antibiotic selection chart. Reason for Therapy: Bacterial Infection Suspected Indication: Sepsis Recommended duration is dependent upor patient's clinical response and source identification
[] Optional IV Antibiotic Addition - tobramycin mg/kg IV	
[] tobramycin (TOBREX) IV	7 mg/kg, intravenous, for 60 Minutes, once, For 1 Doses Pharmacy Consult to dose based on renal function
	Classification: Narrow Spectrum Antibiotic
	When multiple antimicrobial agents are ordered, you may administer these immediately at the SAME TIME via different IV sites. Do not wait for the first antibiotic to infuse. If agents are Y-site compatible, they may be administered per Y-site protocols. IF the ordered agents are NOT Y site compatible, then administer the Broad-spectrum antibiotic first. Refer to available Y site compatibility information and determination of broad-spectrum antibiotic selection chart. Reason for Therapy: Bacterial Infection Suspected Indication: Sepsis
[] Pharmacy consult to dose tobramycin  () piperacillin-tazobactam (ZOSYN) EI 4.5 g IV	Routine, Once For 1 Occurrences Which aminoglycoside do you need help dosing? tobramycin Indication:

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

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

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

[] tobramycin (TOBREX) 7 mg/kg IVPB	7 mg/kg, intravenous, for 60 Minutes, once, For 1 Doses Pharmacy Consult to dose based on renal function Reason for Therapy: Bacterial Infection Suspected
[] Pharmacy consult to dose tobramycin	Indication: Sepsis STAT, Once For 1 Occurrences Which aminoglycoside do you need help dosing? tobramycin Indication: Sepsis - Urinary Tract Infection
() aztreonam (AZACTAM) intraMUSCULAR	
[] aztreonam (AZACTAM) intraMUSCULAR	2 g, intramuscular, once, For 1 Doses Administer dose by deep IM into large muscle mass (e.g. gluteal muscles or lateral part of the thigh). Reason for Therapy: Bacterial Infection Suspected Indication: Sepsis IM Route Selection: I have opted to select the IM route because IV access could not be established
<ul><li>[] Optional IV Antibiotic Addition - tobramycin (T mg/kg IV + Pharmacy Consult to Dose</li></ul>	OBREX) 7
[] tobramycin (TOBREX) 7 mg/kg IVPB	7 mg/kg, intravenous, for 60 Minutes, once, For 1 Doses Pharmacy Consult to dose based on renal function Reason for Therapy: Bacterial Infection Suspected Indication: Sepsis
[] Pharmacy consult to dose tobramycin	STAT, Once For 1 Occurrences Which aminoglycoside do you need help dosing? tobramycin Indication: Sepsis - Urinary Tract Infection
Skin and Soft Tissue Infection - Uncomplicated Ce	•
(Single Response)  Does your patient have a SEVERE vancomycin all	ergy?
( ) No (Single Response)	
( ) cefTRIAxone (ROCEPHIN) 1 g IV + vancomyc mg/kg	in IV 20
[] cefTRIAxone (ROCEPHIN) IV	1 g, intravenous, for 30 Minutes, once, For 1 Doses Classification: Broad Spectrum Antibiotic
	When multiple antimicrobial agents are ordered, you may administer these immediately at the SAME TIME via different IV sites. Do not wait for the first antibiotic to infuse. If agents are Y-site compatible, they may be administered per Y-site protocols. IF the ordered agents are NOT Y site compatible, then administer the Broad-spectrum antibiotic first. Refer to available Y site compatibility information and determination of broad-spectrum antibiotic selection chart. Reason for Therapy: Bacterial Infection Suspected Indication: Sepsis Recommendation: Sepsis: Recommended duration is dependent upon patient's clinical response and source identification
<ul><li>[] vancomycin (VANCOCIN) IV + Pharmacy Co Dose (Selection Required)</li></ul>	nsult to
[] vancomycin (VANCOCIN)	20 mg/kg, intravenous, once, For 1 Doses Classification: Narrow Spectrum Antibiotic  When multiple antimicrobial agents are ordered, you may administer these immediately at the SAME TIME via different IV sites. Do not wait for the first antibiotic to infuse. If agents are Y-site compatible, they may be administered per Y-site protocols. IF the ordered agents are NOT Y site compatible, then administer the Broad-spectrum antibiotic first. Refer to available Y site compatibility information and determination of broad-spectrum antibiotic selection chart. Reason for Therapy: Bacterial Infection Suspected Indication: Sepsis  Recommendation: Sepsis: Recommended duration is dependent upon patient's clinical response and source identification

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

[] linezolid in dextrose 5% (ZYVOX) IVPB	600 mg, intravenous, for 60 Minutes, once, For 1 Doses Classification: Narrow Spectrum Antibiotic
	When multiple antimicrobial agents are ordered, you may administer these immediately at the SAME TIME via different IV sites. Do not wait for the first antibiotic to infuse. If agents are Y-site compatible, they may be administered per Y-site protocols. IF the ordered agents are NOT Y site compatible, then administer the Broad-spectrum antibiotic first. Refer to available Y site compatibility information and determination of broad-spectrum antibiotic selection chart. Reason for Therapy: Bacterial Infection Suspected Indication: Sepsis Recommended duration is dependent upon patient's clinical response and source identification
<ul><li>( ) cefTRIAXone (ROCEPHIN) 1 g intraMUSCUL linezolid (ZYVOX) 600 mg IV</li></ul>	_AR +
[] cefTRIAXone (ROCEPHIN) IM	1 g, intramuscular, once, For 1 Doses Intramuscular route selected because no IV access available. Administer dose by deep IM into large muscle mass (e.g. gluteal muscles or lateral part of the thigh). Reason for Therapy: Bacterial Infection Suspected Indication: Sepsis Recommendation: Sepsis: Recommended duration is dependent upon patient's clinical response and source identification IM Route Selection: I have opted to select the IM route because IV access could not be established
[] linezolid in dextrose 5% (ZYVOX) IVPB	600 mg, intravenous, for 60 Minutes, once, For 1 Doses Classification: Narrow Spectrum Antibiotic
	When multiple antimicrobial agents are ordered, you may administer these immediately at the SAME TIME via different IV sites. Do not wait for the first antibiotic to infuse. If agents are Y-site compatible, they may be administered per Y-site protocols. IF the ordered agents are NOT Y site compatible, then administer the Broad-spectrum antibiotic first. Refer to available Y site compatibility information and determination of broad-spectrum antibiotic selection chart. Reason for Therapy: Bacterial Infection Suspected Indication: Sepsis
Skin and Soft Tissue Infection - Complicated (nec fasciitis, gangrene, diabetic foot) (Single Respons	
Does your patient have a SEVERE penicillin AND	
() No SEVERE Penicillin OR Vancomycin Allergy	
<ul><li>[] piperacillin-tazobactam (ZOSYN) 4.5 g IV + v 15 mg/kg IV (NOT HMW)</li></ul>	ancomycin
[] piperacillin-tazobactam (ZOSYN) IV	3.375 g, intravenous, for .5 Hours, once, For 1 Doses Classification: Broad Spectrum Antibiotic
	When multiple antimicrobial agents are ordered, you may administer these immediately at the SAME TIME via different IV sites. Do not wait for the first antibiotic to infuse. If agents are Y-site compatible, they may be administered per Y-site protocols. IF the ordered agents are NOT Y site compatible, then administer the Broad-spectrum antibiotic first. Refer to available Y site compatibility information and determination of broad-spectrum antibiotic selection chart. Reason for Therapy: Bacterial Infection Suspected Indication: Sepsis Recommended duration is dependent upon patient's clinical response and source identification
<ul><li>[] vancomycin (VANCOCIN) IV + Pharmacy C Dose (Selection Required)</li></ul>	onsuit to

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

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

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

[] Pharmacy consult to dose tobramycin	Routine, Until discontinued, Starting S Which aminoglycoside do you need help dosing? tobramycin
	Indication: Sepsis - Complicated Skin and Soft Tissue Infection
<ul><li>[] vancomycin (VANCOCIN) IV + Pharmacy Cons Dose (Selection Required)</li></ul>	cult to
[] vancomycin (VANCOCIN)	15 mg/kg, intravenous, every 12 hours
,	Classification: Narrow Spectrum Antibiotic
	When multiple antimicrobial agents are ordered, you may administer
	these immediately at the SAME TIME via different IV sites. Do not
	wait for the first antibiotic to infuse. If agents are Y-site compatible,
	they may be administered per Y-site protocols. IF the ordered agents
	are NOT Y site compatible, then administer the Broad-spectrum
	antibiotic first. Refer to available Y site compatibility information and
	determination of broad-spectrum antibiotic selection chart.
	Reason for Therapy: Bacterial Infection Suspected
	Indication: Sepsis
	Recommendation: Sepsis: Recommended duration is dependent upon patient's clinical response and source identification
[] Pharmacy consult to manage vancomycin	STAT, Until discontinued, Starting S
	Reason for Therapy: Bacterial Infection Suspected
	Duration of Therapy (Days):
	Indication: Sepsis - Complicated Skin and Soft Tissue Infection
	Indication: Sepsis Recommendation: Sepsis: Recommended duration is dependent
	upon patient's clinical response and source identification
[] metroNIDAZOLE (FLAGYL) IV	500 mg, intravenous, once, For 1 Doses
· · · · · · · · · · · · · · · · · · ·	Classification: Narrow Spectrum Antibiotic
	When multiple antimicrobial agents are ordered, you may administer
	these immediately at the SAME TIME via different IV sites. Do not
	wait for the first antibiotic to infuse. If agents are Y-site compatible,
	they may be administered per Y-site protocols. IF the ordered agents
	are NOT Y site compatible, then administer the Broad-spectrum
	antibiotic first. Refer to available Y site compatibility information and
	determination of broad-spectrum antibiotic selection chart.
	Reason for Therapy: Bacterial Infection Suspected Indication: Sepsis
() aztreonam (AZACTAM) 2 g intraMUSCULAR +	maication. Sepsis
tobramycin (TOBREX) 7 mg/kg IV + vancomycin	15
mg/kg ÍV + clindamycin (CLEOCIN) 600 mg ÍV	
[] aztreonam (AZACTAM) intraMUSCULAR	2 g, intramuscular, once, For 1 Doses
	(Administer dose by deep IM into large muscle mass (e.g. gluteal
	muscles or lateral part of the thigh).
	Reason for Therapy: Bacterial Infection Suspected
	Indication: Sepsis
	IM Route Selection: I have opted to select the IM route because IV access could not be established
[] tobramycin (TOBREX) 7 mg/kg IV	access could not be established
[] tobramycin (TOBREX) IV	7 mg/kg, intravenous, for 60 Minutes, every 24 hours
[] (03.4) (1.03.4)	Pharmacy Consult to dose based on renal function
	Classification: Narrow Spectrum Antibiotic
	When multiple antimicrobial agents are ordered, you may administer
	these immediately at the SAME TIME via different IV sites. Do not
	wait for the first antibiotic to infuse. If agents are Y-site compatible,
	they may be administered per Y-site protocols. IF the ordered agents
	are NOT Y site compatible, then administer the Broad-spectrum
	antibiotic first. Refer to available Y site compatibility information and
	determination of broad-spectrum antibiotic selection chart.  Reason for Therapy: Bacterial Infection Suspected
	Indication: Sepsis

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

STAT, Until discontinued, Starting S Which aminoglycoside do you need help dosing? tobramycin Indication: Sepsis - Complicated Skin and Soft Tissue Infection
nsult to
15 mg/kg, intravenous, every 12 hours Classification: Broad Spectrum Antibiotic
When multiple antimicrobial agents are ordered, you may administer these immediately at the SAME TIME via different IV sites. Do not wait for the first antibiotic to infuse. If agents are Y-site compatible, they may be administered per Y-site protocols. IF the ordered agents are NOT Y site compatible, then administer the Broad-spectrum antibiotic first. Refer to available Y site compatibility information and determination of broad-spectrum antibiotic selection chart. Reason for Therapy: Bacterial Infection Suspected Indication: Sepsis Recommendation: Sepsis: Recommended duration is dependent
upon patient's clinical response and source identification
STAT, Until discontinued, Starting S Reason for Therapy: Bacterial Infection Suspected Duration of Therapy (Days): Indication: Sepsis
Recommendation: Sepsis: Recommended duration is dependent
upon patient's clinical response and source identification
500 mg, intravenous, once, For 1 Doses Classification: Narrow Spectrum Antibiotic
When multiple antimicrobial agents are ordered, you may administer these immediately at the SAME TIME via different IV sites. Do not wait for the first antibiotic to infuse. If agents are Y-site compatible, they may be administered per Y-site protocols. IF the ordered agents are NOT Y site compatible, then administer the Broad-spectrum antibiotic first. Refer to available Y site compatibility information and determination of broad-spectrum antibiotic selection chart. Reason for Therapy: Bacterial Infection Suspected Indication: Sepsis
zolid
220110
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.

600 mg, intravenous, for 60 Minutes, once, For 1 Doses Classification: Narrow Spectrum Antibiotic
When multiple antimicrobial agents are ordered, you may administer these immediately at the SAME TIME via different IV sites. Do not wait for the first antibiotic to infuse. If agents are Y-site compatible, they may be administered per Y-site protocols. IF the ordered agents are NOT Y site compatible, then administer the Broad-spectrum antibiotic first.
Refer to available Y site compatibility information and determination of broad-spectrum antibiotic selection chart. Reason for Therapy: Bacterial Infection Suspected
Indication: Sepsis Recommendation: Sepsis: Recommended duration is dependent upon patient's clinical response and source identification
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 linezolid
4.5 g, intravenous, for 4 Hours, once, For 1 Doses
Classification: Narrow Spectrum Antibiotic
When multiple antimicrobial agents are ordered, you may administer these immediately at the SAME TIME via different IV sites. Do not wait for the first antibiotic to infuse. If agents are Y-site compatible, they may be administered per Y-site protocols. IF the ordered agents are NOT Y site compatible, then administer the Broad-spectrum antibiotic first. Refer to available Y site compatibility information and determination of broad-spectrum antibiotic selection chart. Reason for Therapy: Bacterial Infection Suspected Indication: Sepsis
Recommendation: Sepsis: Recommended duration is dependent upon patient's clinical response and source identification
600 mg, intravenous, for 60 Minutes, once, For 1 Doses Classification: Narrow Spectrum Antibiotic
When multiple antimicrobial agents are ordered, you may administer these immediately at the SAME TIME via different IV sites. Do not wait for the first antibiotic to infuse. If agents are Y-site compatible, they may be administered per Y-site protocols. IF the ordered agents are NOT Y site compatible, then administer the Broad-spectrum antibiotic first.

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

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

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

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

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

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

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

[] vancomycin (VANCOCIN)	15 mg/kg, intravenous, once, For 1 Doses Classification: Narrow Spectrum Antibiotic
	When multiple antimicrobial agents are ordered, you may administer these immediately at the SAME TIME via different IV sites. Do not wait for the first antibiotic to infuse. If agents are Y-site compatible, they may be administered per Y-site protocols. IF the ordered agents
	are NOT Y site compatible, then administer the Broad-spectrum antibiotic first. Refer to available Y site compatibility information and determination of broad-spectrum antibiotic selection chart.  Reason for Therapy: Bacterial Infection Suspected
	Indication: Sepsis Indication: Sepsis
	Recommendation: Sepsis: Recommended duration is dependent upon patient's clinical response and source identification
[] Pharmacy consult to manage vancomycin	STAT, Once For 1 Occurrences Reason for Therapy: Bacterial Infection Suspected Duration of Therapy (Days): 1 Indication: Sepsis
	Recommendation: Sepsis: Recommended duration is dependent upon patient's clinical response and source identification
[] Adjunct Antibiotics - amikacin (AMIKIN) 15 mg/	
levofloxacin 750 mg IV (Single Response) () amikacin (AMIKIN) IV	15 mg/kg, intravenous, for 30 Minutes, once, For 1 Doses
() animacin (Awinany) iv	Classification: Narrow Spectrum Antibiotic
	When multiple antimicrobial agents are ordered, you may administer
	these immediately at the SAME TIME via different IV sites. Do not wait for the first antibiotic to infuse. If agents are Y-site compatible,
	they may be administered per Y-site protocols. IF the ordered agents are NOT Y site compatible, then administer the Broad-spectrum
	antibiotic first. Refer to available Y site compatibility information and
	determination of broad-spectrum antibiotic selection chart. Reason for Therapy: Bacterial Infection Suspected Indication: Sepsis
() levofloxacin (LEVAQUIN) IV	750 mg, intravenous, every 24 hours Classification: Narrow Spectrum Antibiotic
	When multiple antimicrobial agents are ordered, you may administer these immediately at the SAME TIME via different IV sites. Do not wait for the first antibiotic to infuse. If agents are Y-site compatible, they may be administered per Y-site protocols. IF the ordered agents
	are NOT Y site compatible, then administer the Broad-spectrum antibiotic first. Refer to available Y site compatibility information and
	determination of broad-spectrum antibiotic selection chart.  Per Med Staff Policy, R.Ph. will automatically switch IV to equivalent PO dose when above approved criteria are satisfied:
	Reason for Therapy:
<ul><li>[ ] Optional IV Antibiotic Addition - tobramycin (TC mg/kg IV</li></ul>	<u> </u>
[] tobramycin (TOBREX) IV	7 mg/kg, intravenous, for 60 Minutes, every 24 hours Pharmacy Consult to dose based on renal function
	Classification: Narrow Spectrum Antibiotic
	When multiple antimicrobial agents are ordered, you may administer these immediately at the SAME TIME via different IV sites. Do not wait for the first antibiotic to infuse. If agents are Y-site compatible, they may be administered per Y-site protocols. IF the ordered agents are NOT Y site compatible, then administer the Broad-spectrum antibiotic first. Refer to available Y site compatibility information and determination of broad-spectrum antibiotic selection chart. Reason for Therapy: Bacterial Infection Suspected Indication: Sepsis

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

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

muscles or lateral part of the thigh) Reason for Therapy: Bacterial Infection Suspected IM Route Selection: I have opted to select the IM route because IV access could not be established Indication: Sepsis Recommendation: Sepsis: Recommended duration is dependent in patient's clinical response and source identification    vancomycin (VANCOCIN) IV + Pharmacy Consult to Dose (Selection Required)   vancomycin (VANCOCIN)   V + Pharmacy Consult to Dose (Selection Required)   vancomycin (VANCOCIN)   15 mg/kg, intravenous, once, For 1 Doses Classification: Narrow Spectrum Antibiotic    When multiple antimicrobial agents are ordered, you may admining these immediately at the SAME TIME via different IV sites. Do not wait for the first antibiotic to infuse. If agents are Y-site compatible they may be administered per Y-site protocols. IF the ordered agen are NOT Y site compatible, then administer the Broad-spectrum antibiotic first. Refer to available Y site compatibility information adetermination of broad-spectrum antibiotic selection chart. Reason for Therapy: Bacterial Infection Suspected Indication: Sepsis: Recommendation: Sepsis: Recommended duration is dependent upon patient's clinical response and source identification    Pharmacy consult to manage vancomycin   STAT, Once For 1 Occurrences   Reason for Therapy: Bacterial Infection Suspected   Duration of Therapy: Bacterial Infection Suspected   Duration: Sepsis: Recommended duration is dependent upon patient's clinical response and source identification	[] meropenem (MERREM) intraMUSCULAR	0.5 g, intramuscular, once, For 1 Doses
Reason for Therapy: Bacterial Infection Suspected IM Route Selection: I have opted to select the IM route because IN access could not be established Indication: Sepsis Recommended duration is dependent to patient's clinical response and source identification  ] vancomycin (VANCOCIN) IV + Pharmacy Consult to Dose (Selection Required)  [] vancomycin (VANCOCIN)  15 mg/kg, intravenous, once, For 1 Doses Classification: Narrow Spectrum Antibiotic  When multiple antimicrobial agents are ordered, you may adminishes immediately at the SAME TIME via different IV sites. Do not wait for the first antibiotic to infuse. If agents are Y-site compatible they may be administered per Y-site protocols. IF the ordread agent are NoT Y site compatible, then administer the Broad-spectrum antibiotic first. Refer to available Y site compatiblity information and etermination of broad-spectrum antibiotic selection chart. Reason for Therapy: Bacterial Infection Suspected Indication: Sepsis Recommended duration is dependent upon patient's clinical response and source identification  [] Pharmacy consult to manage vancomycin  [] Pharmacy consult to manage vancomycin  [] Optional IV Antibiotic Addition - tobramycin (TOBREX) 7  mg/kg IV  [] Tobramycin (TOBREX) IV  7 mg/kg, intravenous, for 60 Minutes, once, For 1 Doses Pharmacy Consult to dose based on renal function  Classification: Narrow Spectrum Antibiotic  When multiple antimicrobial agents are ordered, you may administence the province of the properties of		Administer dose by deep IM into large muscle mass (e.g. gluteal
IM Route Selection: I have opted to select the IM route because IN access could not be established Indication: Sepsis Recommended duration is dependent to patient's clinical response and source identification  ] vancomycin (VANCOCIN) IV + Pharmacy Consult to Dose (Selection Required)  [] vancomycin (VANCOCIN)  15 mg/kg, intravenous, once, For 1 Doses Classification: Narrow Spectrum Antibiotic  When multiple antimicrobial agents are ordered, you may adminishes immediately at the SAME TIME via different IV sites. Do not wait for the first antibiotic briffuse. If agents are Y-site compatible they may be administered per Y-site protocols. If the ordered agent Pharmacy Consult to manage vancomycin  [] Optional IV Antibiotic Addition - tobramycin (TOBREX) 7  mg/kg IV  [] Tobramycin (TOBREX) IV  7 mg/kg, intravenous, for 60 Minutes, once, For 1 Doses Pharmacy Consult to dose based on renal function  Classification: Sepsis: Recommended duration is dependent upon patient's clinical response and source identification  Classification: Agents are ordered, you may adminish these immediately at the SAME TIME via different IV sites. Do not wait for the first antibiotic first. Refer to available the adminisher the Broad-spectrum antibiotic first. Refer to available the adminisher the Broad-spectrum antibiotic first. Refer to available the adminisher the Broad-spectrum antibiotic first. Refer to available the adminisher the Broad-spectrum antibiotic first. Refer to available the adminisher the Broad-spectrum antibiotic first. Refer to available the adminisher the Broad-spectrum antibiotic first. Refer to available the madminister the Broad-spectrum antibiotic first. Refer to available the decirion chart. Reason for Therapy: Bacterial Infection Suspected Indication: Sepsis of Unknown Source or IV Catheter-Related Infection.		
access could not be established indication: Sepsis Recommended duration is dependent to patient's clinical response and source identification.  ] vancomycin (VANCOCIN) IV + Pharmacy Consult to Dose (Selection Required)  [] vancomycin (VANCOCIN)  15 mg/kg, intravenous, once, For 1 Doses Classification: Narrow Spectrum Antibiotic  When multiple antimicrobial agents are ordered, you may adminithese immediately at the SAME TIME via different IV sites. Do not wait for the first antibiotic to infuse. If agents are Y-site compatible they may be administered per Y-site protocols. IF the ordered agare NOT Y site compatible then administer the Broad-spectrum antibiotic first. Refer to available Y site compatible information of determination of broad-spectrum antibiotic first. Refer to available Y site compatible information is dependent upon patients clinical response and source identification.  [] Pharmacy consult to manage vancomycin  [] Pharmacy consult to manage vancomycin  [] Optional IV Antibiotic Addition - tobramycin (TOBREX) 7  Tomp/kg IV  [] Tobramycin (TOBREX) IV  7 mg/kg, intravenous, for 60 Minutes, once, For 1 Doses Pharmacy Consult to dose based on renal function  Classification: Narrow Spectrum Antibiotic  When multiple antimicrobial agents are ordered, you may adminithese immediately at the SAME TIME via different IV sites. Do no wait for the first antibiotic to infuse. If agents are Y-site compatible they may be administered per Y-site protocols. IF the ordered agare NOT Y site compatible, then administer the Broad-spectrum antibiotic first. Refer to available Y site compatiblity information a determination of broad-spectrum antibiotic selection chart. Reason for Therapy: Bacterial Infection Suspected Indication: Sepsis  [] Pharmacy consult to dose tobramycin  Routine, Once For 1 Occurrences  Which aminoglycoside do you need help dosing? tobramycin Indication: Sepsis of Unknown Source or IV Catheter-Related Infection		
Indication: Sepsis Recommended duration is dependent patient's clinical response and source identification  ] vancomycin (VANCOCIN) IV + Pharmacy Consult to Dose (Selection Required)  [] vancomycin (VANCOCIN)  15 mg/kg, intravenous, once, For 1 Doses Classification: Narrow Spectrum Antibiotic  When multiple antimicrobial agents are ordered, you may adminitese immediately at the SAME TIME via different IV sites. Do now wait for the first antibiotic to infuse. If agents are y-site compatibility they may be administered per Y-site protocols. IF the ordered agen NOT Y site compatibility they may be administered per Y-site protocols. IF the ordered agen NOT Y site compatibile, then administer the Broad-spectrum antibiotic first. Refer to available Y site compatibility information a determination of broad-spectrum antibiotic species are NOT Y site compatibility information and etermination of the properties of the properti		·
Recommendation: Sepsis: Recommended duration is dependent to patient's clinical response and source identification  ] vancomycin (VANCOCIN) IV + Pharmacy Consult to Dose (Selection Required)  [] vancomycin (VANCOCIN)  15 mg/kg, intravenous, once, For 1 Doses Classification: Narrow Spectrum Antibiotic  When multiple antimicrobial agents are ordered, you may adminithese immediately at the SAME TIME via different IV sites. Do no wait for the first antibiotic to infuse. If agents are Y-site compatible they may be administered per Y-site protocols. IF the ordered agen NOT Y site compatible, then administer Borad-spectrum antibiotic first. Refer to available Y site compatible then administered because the Broad-spectrum antibiotic first. Refer to available Y site compatible via determination of broad-spectrum antibiotic selection chart. Reason for Therapy: Bacterial Infection Suspected Indication: Sepsis Recommendation: Sepsis: Recommended duration is dependent upon patient's clinical response and source identification  [] Pharmacy consult to manage vancomycin  [] Optional IV Antibiotic Addition - tobramycin (TOBREX) 7  mg/kg IV  [] Optional IV Antibiotic Addition - tobramycin (TOBREX) 7  mg/kg IV  [] Optional IV Antibiotic Addition - tobramycin (TOBREX) 7  mg/kg IV  [] Tobramycin (TOBREX) IV  7 mg/kg, intravenous, for 60 Minutes, once, For 1 Doses Pharmacy Consult to dose based on renal function  Classification: Narrow Spectrum Antibiotic  When multiple antimicrobial agents are ordered, you may adminithese immediately at the SAME TIME via different IV sites. Do no wait for the first antibiotic to infuse. If agents are V-site compatibility information adetermination of broad-spectrum antibiotic selection chart. Reason for Therapy: Bacterial Infection Suspected Indication: Sepsis  [] Pharmacy consult to dose tobramycin  Routine, Once For 1 Occurrences  Which aminoglycoside do you need help dosing? tobramycin Indication: Sepsis of Unknown Source or IV Catheter-Related Infection		
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SEVERE Penicillin Allergy (Single Response)		
(i.e. Type 1 immediate hypersensitivity reaction - anaphylaxis, bronchospasm, angioedema, urticaria)	SEVERE Penicillin Allergy (Single Response)	HIROGOTI
	(i.e. Type 1 immediate hypersensitivity reaction	- anaphylaxis, bronchospasm, angioedema, urticaria)
aztreonam (AZACTAM) 2 g IV + tobramycin (TOBREX) 7	aztreonam (AZACTAM) 2 a IV. Ltobromyoin (TO	ORREY) 7

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aztreonam (AZACTAM) 2 g intraMUSCULAR + tobramycin (TOBREX) 7 mg/kg IV + vancomycii	0.15

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

[] ceFEPime (MAXIPIME) IV	2 g, intravenous, once, For 1 Doses Classification: Broad Spectrum Antibiotic
	When multiple antimicrobial agents are ordered, you may administer these immediately at the SAME TIME via different IV sites. Do not wait for the first antibiotic to infuse. If agents are Y-site compatible, they may be administered per Y-site protocols. IF the ordered agents are NOT Y site compatible, then administer the Broad-spectrum antibiotic first. Refer to available Y site compatibility information and determination of broad-spectrum antibiotic selection chart. Reason for Therapy: Bacterial Infection Suspected Indication: Sepsis Recommendation: Sepsis: Recommended duration is dependent upon
	patient's clinical response and source identification
] linezolid in dextrose 5% (ZYVOX) IVPB	600 mg, intravenous, for 60 Minutes, once, For 1 Doses Classification: Narrow Spectrum Antibiotic
	When multiple antimicrobial agents are ordered, you may administer these immediately at the SAME TIME via different IV sites. Do not wait for the first antibiotic to infuse. If agents are Y-site compatible, they may be administered per Y-site protocols. IF the ordered agents are NOT Y site compatible, then administer the Broad-spectrum antibiotic first. Refer to available Y site compatibility information and determination of broad-spectrum antibiotic selection chart. Reason for Therapy: Bacterial Infection Suspected Indication: Sepsis Recommended duration is dependent upon
	patient's clinical response and source identification
<ul> <li>Optional IV Antibiotic Addition - tobramycin mg/kg IV</li> </ul>	(TOBREX) 7
[] tobramycin (TOBREX) IV	7 mg/kg, intravenous, for 60 Minutes, once, For 1 Doses Pharmacy Consult to dose based on renal function
	Classification: Narrow Spectrum Antibiotic
	When multiple antimicrobial agents are ordered, you may administer these immediately at the SAME TIME via different IV sites. Do not wait for the first antibiotic to infuse. If agents are Y-site compatible, they may be administered per Y-site protocols. IF the ordered agents are NOT Y site compatible, then administer the Broad-spectrum antibiotic first. Refer to available Y site compatibility information and determination of broad-spectrum antibiotic selection chart. Reason for Therapy: Bacterial Infection Suspected Indication: Sepsis
[] Pharmacy consult to dose tobramycin	Routine, Once For 1 Occurrences Which aminoglycoside do you need help dosing? tobramycin Indication: Sepsis of Unknown Source or IV Catheter-Related Infection
piperacillin-tazobactam (ZOSYN) 4.5 g IV + li (ZYVOX) 600 mg IV (NOT HMW)	nezolid
] piperacillin-tazobactam (ZOSYN) IV	4.5 g, intravenous, once, For 1 Doses Classification: Broad Spectrum Antibiotic
	When multiple antimicrobial agents are ordered, you may administer these immediately at the SAME TIME via different IV sites. Do not wait for the first antibiotic to infuse. If agents are Y-site compatible, they may be administered per Y-site protocols. IF the ordered agents are NOT Y site compatible, then administer the Broad-spectrum antibiotic first. Refer to available Y site compatibility information and determination of broad-spectrum antibiotic selection chart.

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

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

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

[] tobramycin (TOBREX) IV	7 mg/kg, intravenous, for 60 Minutes, once, For 1 Doses Pharmacy Consult to dose based on renal function
	Classification: Narrow Spectrum Antibiotic
	When multiple antimicrobial agents are ordered, you may administer these immediately at the SAME TIME via different IV sites. Do not wait for the first antibiotic to infuse. If agents are Y-site compatible, they may be administered per Y-site protocols. IF the ordered agents are NOT Y site compatible, then administer the Broad-spectrum antibiotic first. Refer to available Y site compatibility information and determination of broad-spectrum antibiotic selection chart. Reason for Therapy: Bacterial Infection Suspected Indication: Sepsis
[] Pharmacy consult to dose tobramycin	Routine, Once For 1 Occurrences Which aminoglycoside do you need help dosing? tobramycin Indication: Sepsis of Unknown Source or IV Catheter-Related Infection
) meropenem (MERREM) 500 mg intraMUSCULAI linezolid (ZYVOX) 600 mg IV	
[] meropenem (MERREM) intraMUSCULAR	0.5 g, intramuscular, once, For 1 Doses Administer dose by deep IM into large muscle mass (e.g. gluteal muscles or lateral part of the thigh) Reason for Therapy: Bacterial Infection Suspected IM Route Selection: I have opted to select the IM route because IV access could not be established Indication: Sepsis Recommendation: Sepsis: Recommended duration is dependent upon patient's clinical response and source identification
[] linezolid in dextrose 5% (ZYVOX) IVPB	600 mg, intravenous, for 60 Minutes, once, For 1 Doses Classification: Narrow Spectrum Antibiotic
	When multiple antimicrobial agents are ordered, you may administer these immediately at the SAME TIME via different IV sites. Do not wait for the first antibiotic to infuse. If agents are Y-site compatible, they may be administered per Y-site protocols. IF the ordered agents are NOT Y site compatible, then administer the Broad-spectrum antibiotic first. Refer to available Y site compatibility information and determination of broad-spectrum antibiotic selection chart. Reason for Therapy: Bacterial Infection Suspected Indication: Sepsis Recommended duration is dependent upon
[] Optional IV Antibiotic Addition - tobramycin (TO	patient's clinical response and source identification BREX) 7
mg/kg IV [ ] tobramycin (TOBREX) IV	7 mg/kg, intravenous, for 60 Minutes, once, For 1 Doses Pharmacy Consult to dose based on renal function
	Classification: Narrow Spectrum Antibiotic
	When multiple antimicrobial agents are ordered, you may administer these immediately at the SAME TIME via different IV sites. Do not wait for the first antibiotic to infuse. If agents are Y-site compatible, they may be administered per Y-site protocols. IF the ordered agents are NOT Y site compatible, then administer the Broad-spectrum antibiotic first. Refer to available Y site compatibility information and determination of broad-spectrum antibiotic selection chart. Reason for Therapy: Bacterial Infection Suspected Indication: Sepsis
[] Pharmacy consult to dose tobramycin	Routine, Once For 1 Occurrences Which aminoglycoside do you need help dosing? tobramycin Indication: Sepsis of Unknown Source or IV Catheter-Related Infection
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) SEVERE Penicillin AND Vancomycin Allergy (Single Response)	
<u> </u>	n - anaphylaxis, bronchospasm, angioedema, urticaria)
() aztreonam (AZACTAM) 2 g IV + tobramycin (	TOBREX) 7
mg/kg IV + linezolid (ZYVOX) 600 mg IV  [] aztreonam (AZACTAM) IV	2 g, intravenous, once, For 1 Doses
[] azuonam (/ az/ o // w/) iv	Classification: Broad Spectrum Antibiotic
	When multiple antimicrobial agents are ordered, you may administer these immediately at the SAME TIME via different IV sites. Do not wait for the first antibiotic to infuse. If agents are Y-site compatible, they may be administered per Y-site protocols. IF the ordered agents are NOT Y site compatible, then administer the Broad-spectrum antibiotic first. Refer to available Y site compatibility information and determination of broad-spectrum antibiotic selection chart. Reason for Therapy: Bacterial Infection Suspected Indication: Sepsis
[] tobramycin (TOBREX) 7 mg/kg IV	
[] tobramycin (TOBREX) IV	7 mg/kg, intravenous, for 60 Minutes, once, For 1 Doses Pharmacy Consult to dose based on renal function
	Classification: Narrow Spectrum Antibiotic
	When multiple antimicrobial agents are ordered, you may administer these immediately at the SAME TIME via different IV sites. Do not wait for the first antibiotic to infuse. If agents are Y-site compatible, they may be administered per Y-site protocols. IF the ordered agents are NOT Y site compatible, then administer the Broad-spectrum antibiotic first. Refer to available Y site compatibility information and determination of broad-spectrum antibiotic selection chart. Reason for Therapy: Bacterial Infection Suspected Indication: Sepsis
[] Pharmacy consult to dose tobramycin	Routine, Once For 1 Occurrences
	Which aminoglycoside do you need help dosing? tobramycin Indication: Sepsis of Unknown Source or IV Catheter-Related Infection
[] linezolid in dextrose 5% (ZYVOX) IVPB	600 mg, intravenous, for 60 Minutes, once, For 1 Doses Classification: Narrow Spectrum Antibiotic
	When multiple antimicrobial agents are ordered, you may administer these immediately at the SAME TIME via different IV sites. Do not wait for the first antibiotic to infuse. If agents are Y-site compatible, they may be administered per Y-site protocols. IF the ordered agents are NOT Y site compatible, then administer the Broad-spectrum antibiotic first. Refer to available Y site compatibility information and determination of broad-spectrum antibiotic selection chart. Reason for Therapy: Bacterial Infection Suspected Indication: Sepsis Reason for Therapy: Bacterial Infection Suspected
	Indication: Sepsis
	Recommendation: Sepsis: Recommended duration is dependent upon patient's clinical response and source identification
( ) aztreonam (AZACTAM) 2 g intraMUSCULAR tobramycin (TOBREX) 7 mg/kg IV + linezolid 600 mg IV	
[] aztreonam (AZACTAM) intraMUSCULAR	2 g, intramuscular, once, For 1 Doses Administer dose by deep IM into large muscle mass (e.g. gluteal muscles or lateral part of the thigh). Reason for Therapy: Bacterial Infection Suspected Indication: Sepsis IM Route Selection: I have opted to select the IM route because IV

[] tobramycin (TOBREX) 7 mg/kg IV	
[] tobramycin (TOBREX) IV	7 mg/kg, intravenous, for 60 Minutes, once, For 1 Doses Pharmacy Consult to dose based on renal function
	Classification: Narrow Spectrum Antibiotic
	When multiple antimicrobial agents are ordered, you may administer these immediately at the SAME TIME via different IV sites. Do not wait for the first antibiotic to infuse. If agents are Y-site compatible, they may be administered per Y-site protocols. IF the ordered agents are NOT Y site compatible, then administer the Broad-spectrum antibiotic first. Refer to available Y site compatibility information and determination of broad-spectrum antibiotic selection chart. Reason for Therapy: Bacterial Infection Suspected Indication: Sepsis
[] Pharmacy consult to dose tobramycin	Routine, Once For 1 Occurrences Which aminoglycoside do you need help dosing? tobramycin Indication: Sepsis of Unknown Source or IV Catheter-Related
	Infection
[] linezolid in dextrose 5% (ZYVOX) IVPB	600 mg, intravenous, for 60 Minutes, once, For 1 Doses Classification: Narrow Spectrum Antibiotic
	When multiple antimicrobial agents are ordered, you may administer these immediately at the SAME TIME via different IV sites. Do not wait for the first antibiotic to infuse. If agents are Y-site compatible, they may be administered per Y-site protocols. IF the ordered agents are NOT Y site compatible, then administer the Broad-spectrum antibiotic first. Refer to available Y site compatibility information and determination of broad-spectrum antibiotic selection chart. Reason for Therapy: Bacterial Infection Suspected Indication: Sepsis Recommended duration is dependent upon
	patient's clinical response and source identification
[] Intra-Abdominal Infections (Single Response)	
Use meropenem if history of infection with ESBL-p Sources: Complicated Intra-abdominal Infection G	producing organism or recent prolonged treatment with zosyn or cefepime. Suidelines. Clinical Infectious Diseases 2010; 50:133-64. ANTIBIOTIC 2016. Houston Methodist Hospital/Department of Laboratory
Does your patient have a SEVERE penicillin allerg	gy?
() No SEVERE Penicillin or Vancomycin Allergy	
[] ceFEPime + metroNIDAZOLE (FLAGYL) OR piperacillin-tazobactam (ZOSYN) IV OR mero	nenem
(MERREM) IV (Single Response) (Selection	
( ) ceFEPime 2 g IV + metroNIDAZOLE (FLAGY	
[] ceFEPime (MAXIPIME) IV	2 g, intravenous, once, For 1 Doses Classification: Broad Spectrum Antibiotic
	When multiple antimicrobial agents are ordered, you may administer these immediately at the SAME TIME via different IV sites. Do not wait for the first antibiotic to infuse. If agents are Y-site compatible, they may be administered per Y-site protocols. IF the ordered agents are NOT Y site compatible, then administer the Broad-spectrum antibiotic first. Refer to available Y site compatibility information and determination of broad-spectrum antibiotic selection chart. Reason for Therapy: Bacterial Infection Suspected Indication: Sepsis Recommended duration is dependent upon patient's clinical response and source identification

[] metronidazole (FLAGYL) IV	500 mg, intravenous, once, For 1 Doses Classification: Narrow Spectrum Antibiotic
	When multiple antimicrobial agents are ordered, you may administer these immediately at the SAME TIME via different IV sites. Do not wait for the first antibiotic to infuse. If agents are Y-site compatible, they may be administered per Y-site protocols. IF the ordered agent are NOT Y site compatible, then administer the Broad-spectrum antibiotic first. Refer to available Y site compatibility information and determination of broad-spectrum antibiotic selection chart. Reason for Therapy: Bacterial Infection Suspected
	Indication: Sepsis
( ) ceFEPime 2 g intraMUSCULAR + metroNID	DAZOLE
(FLAGYL) 500 mg IV [] cefepime (MAXIPIME) IM	2 g, intramuscular, once, For 1 Doses Intramuscular route selected because no IV access available. Administer dose by deep IM into large muscle mass (e.g. gluteal muscles or lateral part of the thigh). Reason for Therapy: Bacterial Infection Suspected IM Route Selection: I have opted to select the IM route because IV access could not be established
	Indication: Sepsis Recommendation: Sepsis: Recommended duration is dependent upon patient's clinical response and source identification
[] metronidazole (FLAGYL) IV	500 mg, intravenous, once, For 1 Doses Classification: Narrow Spectrum Antibiotic
	When multiple antimicrobial agents are ordered, you may administer these immediately at the SAME TIME via different IV sites. Do not wait for the first antibiotic to infuse. If agents are Y-site compatible, they may be administered per Y-site protocols. IF the ordered agents are NOT Y site compatible, then administer the Broad-spectrum antibiotic first. Refer to available Y site compatibility information and determination of broad-spectrum antibiotic selection chart. Reason for Therapy: Bacterial Infection Suspected Indication: Sepsis
( ) piperacillin-tazobactam (ZOSYN) 4.5 g IV	
[] piperacillin-tazobactam (ZOSYN) IV	4.5 g, intravenous, once, For 1 Doses Classification: Broad Spectrum Antibiotic
() If Pseudomonas Suspected - piperacillin-taz	When multiple antimicrobial agents are ordered, you may administer these immediately at the SAME TIME via different IV sites. Do not wait for the first antibiotic to infuse. If agents are Y-site compatible, they may be administered per Y-site protocols. IF the ordered agents are NOT Y site compatible, then administer the Broad-spectrum antibiotic first. Refer to available Y site compatibility information and determination of broad-spectrum antibiotic selection chart. Reason for Therapy: Bacterial Infection Suspected Indication: Sepsis  Recommendation: Sepsis: Recommended duration is dependent upon patient's clinical response and source identification  Tobactam  "Followed by" Linked Panel

[]	piperacillin-tazobactam (ZOSYN) 4.5 g IV Once	4.5 g, intravenous, for .5 Hours, once, For 1 Doses Classification: Broad Spectrum Antibiotic
		When multiple antimicrobial agents are ordered, you may administer these immediately at the SAME TIME via different IV sites. Do not wait for the first antibiotic to infuse. If agents are Y-site compatible, they may be administered per Y-site protocols. IF the ordered agents are NOT Y site compatible, then administer the Broad-spectrum antibiotic first. Refer to available Y site compatibility information and determination of broad-spectrum antibiotic selection chart. Reason for Therapy: Bacterial Infection Suspected Indication: Sepsis Recommended duration is dependent upon patient's clinical response and source identification
[]	piperacillin-tazobactam (ZOSYN) 4.5 g IV	4.5 g, intravenous, for 4 Hours, once, Starting H+6 Hours, For 1
	every 8 hours	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 Recommended duration is dependent upon patient's clinical response and source identification
() 1	meropenem (MERREM) 500 mg IV	
	meropenem (MERREM) IV	500 mg, intravenous, once, For 1 Doses Reason for Therapy: Bacterial Infection Suspected Indication: Sepsis Recommendation: Sepsis: Recommended duration is dependent upon patient's clinical response and source identification
	meropenem (MERREM) 500 mg intraMUSCUL	
[]	meropenem (MERREM) injection	0.5 g, intramuscular, once, For 1 Doses Intramuscular route selected because no IV access available. Administer dose by deep IM into large muscle mass (e.g. gluteal muscles or lateral part of the thigh). Reason for Therapy: Bacterial Infection Suspected IM Route Selection: I have opted to select the IM route because IV access could not be established Indication: Sepsis Recommendation: Sepsis: Recommended duration is dependent upon patient's clinical response and source identification
	health-care associated, ADD - vancomycin	
	/ANCOCIN) IV (Selection Required) vancomycin (VANCOCIN)	15 mg/kg, intravenous, once, For 1 Doses Classification: Narrow Spectrum Antibiotic
		When multiple antimicrobial agents are ordered, you may administer these immediately at the SAME TIME via different IV sites. Do not wait for the first antibiotic to infuse. If agents are Y-site compatible, they may be administered per Y-site protocols. IF the ordered agents are NOT Y site compatible, then administer the Broad-spectrum antibiotic first. Refer to available Y site compatibility information and determination of broad-spectrum antibiotic selection chart. Reason for Therapy: Bacterial Infection Suspected Indication: Sepsis Recommended duration is dependent upon patient's clinical response and source identification

[] Pharmacy consult to manage vancomycin	STAT, Once For 1 Occurrences Reason for Therapy: Bacterial Infection Suspected Duration of Therapy (Days): 1 Indication: Sepsis Recommendation: Sepsis: Recommended duration is dependent upon patient's clinical response and source identification
[] IF high risk or severe, consider antifungal cover fluconazole (DIFLUCAN) 400 mg IV	
[] fluconazole (DIFLUCAN) IV	400 mg, intravenous, for 60 Minutes, once, For 1 Doses Reason for Therapy: Fungal Infection Suspected Indication:
() SEVERE Penicillin Allergy (Single Response)	
() aztreonam (AZACTAM) 2 g IV + metroNIDAZO (FLAGYL) 500 mg IV	LE
[] aztreonam (AZACTAM) IV	2 g, intravenous, once, For 1 Doses Classification: Broad Spectrum Antibiotic
	When multiple antimicrobial agents are ordered, you may administer these immediately at the SAME TIME via different IV sites. Do not wait for the first antibiotic to infuse. If agents are Y-site compatible, they may be administered per Y-site protocols. IF the ordered agents are NOT Y site compatible, then administer the Broad-spectrum antibiotic first. Refer to available Y site compatibility information and determination of broad-spectrum antibiotic selection chart. Reason for Therapy: Bacterial Infection Suspected Indication: Sepsis
[] metroNIDAZOLE (FLAGYL) IV	500 mg, intravenous, once, For 1 Doses Classification: Narrow Spectrum Antibiotic
	When multiple antimicrobial agents are ordered, you may administer these immediately at the SAME TIME via different IV sites. Do not wait for the first antibiotic to infuse. If agents are Y-site compatible, they may be administered per Y-site protocols. IF the ordered agents are NOT Y site compatible, then administer the Broad-spectrum antibiotic first. Refer to available Y site compatibility information and determination of broad-spectrum antibiotic selection chart. Reason for Therapy: Bacterial Infection Suspected Indication: Sepsis
<ul><li>[] IF health-care associated, ADD - vancomycin</li><li>IV (Selection Required)</li></ul>	n 15 mg/kg
[] vancomycin (VANCOCIN)	15 mg/kg, intravenous, once, For 1 Doses Classification: Narrow Spectrum Antibiotic
	When multiple antimicrobial agents are ordered, you may administer these immediately at the SAME TIME via different IV sites. Do not wait for the first antibiotic to infuse. If agents are Y-site compatible, they may be administered per Y-site protocols. IF the ordered agents are NOT Y site compatible, then administer the Broad-spectrum antibiotic first. Refer to available Y site compatibility information and determination of broad-spectrum antibiotic selection chart. Reason for Therapy: Bacterial Infection Suspected Indication: Sepsis Recommendation: Sepsis: Recommended duration is dependent upon patient's clinical response and source identification
[] Pharmacy consult to manage vancomycin	STAT, Once For 1 Occurrences Reason for Therapy: Bacterial Infection Suspected Duration of Therapy (Days): 1
	Indication: Sepsis Recommendation: Sepsis: Recommended duration is dependent upon patient's clinical response and source identification
[] IF high risk or severe, consider antifungal cover fluconazole (DIFLUCAN) IV or micafungin (MY IV (Single Response)	erage:

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

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

() ceFEPime 2 g IV + metroNIDAZOLE (FL/	AGYL) 500 mg
[] ceFEPime (MAXIPIME) IV	2 g, intravenous, once, For 1 Doses Classification: Broad Spectrum Antibiotic
	When multiple antimicrobial agents are ordered, you may administer these immediately at the SAME TIME via different IV sites. Do not wait for the first antibiotic to infuse. If agents are Y-site compatible, they may be administered per Y-site protocols. IF the ordered agents are NOT Y site compatible, then administer the Broad-spectrum antibiotic first. Refer to available Y site compatibility information and determination of broad-spectrum antibiotic selection chart. Reason for Therapy:
[] metronidazole (FLAGYL) IV	500 mg, intravenous, once, For 1 Doses Classification: Narrow Spectrum Antibiotic
	When multiple antimicrobial agents are ordered, you may administer these immediately at the SAME TIME via different IV sites. Do not wait for the first antibiotic to infuse. If agents are Y-site compatible, they may be administered per Y-site protocols. IF the ordered agents are NOT Y site compatible, then administer the Broad-spectrum antibiotic first. Refer to available Y site compatibility information and determination of broad-spectrum antibiotic selection chart. Reason for Therapy: Bacterial Infection Suspected Indication: Sepsis
<ul><li>( ) ceFEPime 2 g intraMUSCULAR + metroN (FLAGYL) 500 mg IV</li></ul>	NIDAZOLE
[] cefepime (MAXIPIME) IM	2 g, intramuscular, once, For 1 Doses Intramuscular route selected because no IV access available. Administer dose by deep IM into large muscle mass (e.g. gluteal muscles or lateral part of the thigh). Reason for Therapy: Bacterial Infection Suspected IM Route Selection: I have opted to select the IM route because IV access could not be established Indication: Sepsis Recommendation: Sepsis: Recommended duration is dependent
	upon patient's clinical response and source identification
[] metronidazole (FLAGYL) IV	500 mg, intravenous, once, For 1 Doses Classification: Narrow Spectrum Antibiotic
() ningrasillin torah actor (700VN) 4.5 g IV	When multiple antimicrobial agents are ordered, you may administer these immediately at the SAME TIME via different IV sites. Do not wait for the first antibiotic to infuse. If agents are Y-site compatible, they may be administered per Y-site protocols. IF the ordered agents are NOT Y site compatible, then administer the Broad-spectrum antibiotic first. Refer to available Y site compatibility information and determination of broad-spectrum antibiotic selection chart. Reason for Therapy: Bacterial Infection Suspected Indication: Sepsis
( ) piperacillin-tazobactam (ZOSYN) 4.5 g IV  [] piperacillin-tazobactam (ZOSYN) IV	4.5 g, intravenous, once, For 1 Doses Classification: Broad Spectrum Antibiotic
	When multiple antimicrobial agents are ordered, you may administer these immediately at the SAME TIME via different IV sites. Do not wait for the first antibiotic to infuse. If agents are Y-site compatible, they may be administered per Y-site protocols. IF the ordered agents are NOT Y site compatible, then administer the Broad-spectrum antibiotic first. Refer to available Y site compatibility information and determination of broad-spectrum antibiotic selection chart. Reason for Therapy: Bacterial Infection Suspected Indication: Sepsis Recommended duration is dependent

( ) If Pseudomonas Suspected - piperacillin-tazo (ZOSYN) 4.5 g IV	bactam "Followed by" Linked Panel
[] piperacillin-tazobactam (ZOSYN) 4.5 g IV Once	4.5 g, intravenous, for .5 Hours, once, For 1 Doses Classification: Broad Spectrum Antibiotic
	When multiple antimicrobial agents are ordered, you may administer these immediately at the SAME TIME via different IV sites. Do not wait for the first antibiotic to infuse. If agents are Y-site compatible, they may be administered per Y-site protocols. IF the ordered agents are NOT Y site compatible, then administer the Broad-spectrum antibiotic first. Refer to available Y site compatibility information and determination of broad-spectrum antibiotic selection chart. Reason for Therapy: Bacterial Infection Suspected Indication: Sepsis
	Recommendation: Sepsis: Recommended duration is dependent upon patient's clinical response and source identification
[] piperacillin-tazobactam (ZOSYN) 4.5 g IV every 8 hours	<ul><li>4.5 g, intravenous, for 4 Hours, once, Starting H+6 Hours, For 1 Doses</li><li>Classification: Broad Spectrum Antibiotic</li></ul>
	When multiple antimicrobial agents are ordered, you may administer these immediately at the SAME TIME via different IV sites. Do not wait for the first antibiotic to infuse. If agents are Y-site compatible, they may be administered per Y-site protocols. IF the ordered agents are NOT Y site compatible, then administer the Broad-spectrum antibiotic first. Refer to available Y site compatibility information and determination of broad-spectrum antibiotic selection chart. Reason for Therapy: Bacterial Infection Suspected
	Indication: Sepsis Recommendation: Sepsis: Recommended duration is dependent upon patient's clinical response and source identification
() meropenem (MERREM) 500 mg IV	apon patient a diffical reaponde and addition identification
[] meropenem (MERREM) IV	500 mg, intravenous, once, For 1 Doses Reason for Therapy: Bacterial Infection Suspected Indication: Sepsis Recommendation: Sepsis: Recommended duration is dependent upon patient's clinical response and source identification
() meropenem (MERREM) 500 mg intraMUSCU	
[] meropenem (MERREM) injection	0.5 g, intramuscular, once, For 1 Doses Intramuscular route selected because no IV access available. Administer dose by deep IM into large muscle mass (e.g. gluteal muscles or lateral part of the thigh). Reason for Therapy: Bacterial Infection Suspected IM Route Selection: I have opted to select the IM route because IV access could not be established Indication: Sepsis Recommendation: Sepsis: Recommended duration is dependent
[] IF health-care associated, ADD - linezolid in dextrose 5% (ZYVOX) IVPB	upon patient's clinical response and source identification 600 mg, intravenous, for 60 Minutes, once, For 1 Doses Classification: Narrow Spectrum Antibiotic
	When multiple antimicrobial agents are ordered, you may administer these immediately at the SAME TIME via different IV sites. Do not wait for the first antibiotic to infuse. If agents are Y-site compatible, they may be administered per Y-site protocols. IF the ordered agents are NOT Y site compatible, then administer the Broad-spectrum antibiotic first. Refet to available Y site compatibility information and determination of broad-spectrum antibiotic selection chart. Reason for Therapy: Bacterial Infection Suspected Indication: Sepsis Recommendation: Sepsis: Recommended duration is dependent upon patient's clinical response and source identification

[] fluconazole (DIFLUCAN) IV	400 mg, intravenous, for 60 Minutes, once, For 1 Doses Reason for Therapy: Fungal Infection Suspected Indication:
SEVERE Penicillin and Vancomycin Allergy (Si Response)	ngle
) aztreonam (AZACTAM) 2 g IV + metroNIDAZ( (FLAGYL) 500 mg IV	OLE
[] aztreonam (AZACTAM) IV	2 g, intravenous, once, For 1 Doses Classification: Broad Spectrum Antibiotic
	When multiple antimicrobial agents are ordered, you may administer these immediately at the SAME TIME via different IV sites. Do not wait for the first antibiotic to infuse. If agents are Y-site compatible, they may be administered per Y-site protocols. IF the ordered agents are NOT Y site compatible, then administer the Broad-spectrum antibiotic first. Refer to available Y site compatibility information and determination of broad-spectrum antibiotic selection chart. Type of Therapy: New Anti-Infective Order Reason for Therapy: Bacterial Infection Suspected Indication: Sepsis
[] metroNIDAZOLE (FLAGYL) IV	500 mg, intravenous, once, For 1 Doses Classification: Narrow Spectrum Antibiotic  When multiple antimicrobial agents are ordered, you may administer these immediately at the SAME TIME via different IV sites. Do not wait for the first antibiotic to infuse. If agents are Y-site compatible, they may be administered per Y-site protocols. IF the ordered agents are NOT Y site compatible, then administer the Broad-spectrum antibiotic first. Refer to available Y site compatibility information and determination of broad-spectrum antibiotic selection chart.  Type of Therapy: New Anti-Infective Order Reason for Therapy: Bacterial Infection Suspected
[] IF health-care associated, ADD - linezolid in dextrose 5% (ZYVOX) IVPB	Indication: Sepsis 600 mg, intravenous, for 60 Minutes, once, For 1 Doses Classification: Narrow Spectrum Antibiotic
	When multiple antimicrobial agents are ordered, you may administer these immediately at the SAME TIME via different IV sites. Do not wait for the first antibiotic to infuse. If agents are Y-site compatible, they may be administered per Y-site protocols. IF the ordered agents are NOT Y site compatible, then administer the Broad-spectrum antibiotic first. Refer to available Y site compatibility information and determination of broad-spectrum antibiotic selection chart. Reason for Therapy: Bacterial Infection Suspected Indication: Sepsis Recommendation: Sepsis: Recommended duration is dependent upon patient's clinical response and source identification
[] IF high risk or severe, consider antifungal co fluconazole (DIFLUCAN) IV or micafungin (N IV (Single Response)	verage:

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

[] IF healthcare-associated, ADD - linezolid in 600 mg, intravenous, for 60 Minutes, once, For 1 Doses dextrose 5% (ZYVOX) IVPB Classification: Narrow Spectrum Antibiotic When multiple antimicrobial agents are ordered, you may administer these immediately at the SAME TIME via different IV sites. Do not wait for the first antibiotic to infuse. If agents are Y-site compatible, they may be administered per Y-site protocols. IF the ordered agents are NOT Y site compatible, then administer the Broad-spectrum antibiotic first. Refer to available Y site compatibility information and determination of broad-spectrum antibiotic selection chart. Reason for Therapy: Bacterial Infection Suspected Indication: Sepsis [] IF high risk or severe, consider antifungal coverage: fluconazole (DIFLUCAN) IV or micafungin (MYCAMINE) IV (Single Response) Note: Use fluconazole (DIFLUCAN) only in patients with absolutely no risk factors for C. glabrata or resistance () fluconazole (DIFLUCAN) IV 800 mg, intravenous, for 60 Minutes, once, For 1 Doses Classification: Narrow Spectrum Antibiotic When multiple antimicrobial agents are ordered, you may administer these immediately at the SAME TIME via different IV sites. Do not wait for the first antibiotic to infuse. If agents are Y-site compatible, they may be administered per Y-site protocols. IF the ordered agents are NOT Y site compatible, then administer the Broad-spectrum antibiotic first. Refer to available Y site compatibility information and determination of broad-spectrum antibiotic selection chart. Reason for Therapy: Fungal Infection Suspected Indication: () micafungin (MYCAMINE) IVPB 100 mg, intravenous, once, For 1 Doses Classification: Narrow Spectrum Antibiotic (RESTRICTED) When multiple antimicrobial agents are ordered, you may administer these immediately at the SAME TIME via different IV sites. Do not wait for the first antibiotic to infuse. If agents are Y-site compatible, they may be administered per Y-site protocols. IF the ordered agents are NOT Y site compatible, then administer the Broad-spectrum antibiotic first. Refer to available Y site compatibility information and determination of broad-spectrum antibiotic selection chart. RESTRICTED to Infectious Diseases (ID), Solid Organ Transplant (SOT), Bone Marrow Transplant (BMT), and Hematology/Oncology (Heme/Onc) specialists. Are you an ID, SOT, BMT, or Heme/Onc specialist or ordering on behalf of one? Reason for Therapy: Other Specify: Sepsis Authorizing ID: Bacterial Meningitis - Community-Acquired and ImmunoCOMPETENT (Single Response) Does your patient have a SEVERE Penicillin and/or Vancomycin allergy? () No SEVERE Penicillin or Vancomycin Allergy (Single Response) Dexamethasone is recommended for treatment of proven or suspected pneumococcal meningitis due to S. pneumoniae () cefTRIAXone (ROCEPHIN) 2 g IV + vancomycin 15 mg/kg IV - For Patients LESS than 50 years old

[] cefTRIAxone (ROCEPHIN) IV	2 g, intravenous, for 30 Minutes, once, For 1 Doses Classification: Broad Spectrum Antibiotic
	When multiple antimicrobial agents are ordered, you may administer these immediately at the SAME TIME via different IV sites. Do not wait for the first antibiotic to infuse. If agents are Y-site compatible, they may be administered per Y-site protocols. IF the ordered agents are NOT Y site compatible, then administer the Broad-spectrum antibiotic first. Refer to available Y site compatibility information and determination of broad-spectrum antibiotic selection chart. Reason for Therapy: Bacterial Infection Suspected Indication: Sepsis Recommended duration is dependent upon patient's clinical response and source identification
[] vancomycin (VANCOCIN) IV + Pharmacy Cor	
Dose (Selection Required)	45
[] vancomycin (VANCOCIN)	15 mg/kg, intravenous, once, For 1 Doses Classification: Narrow Spectrum Antibiotic
	When multiple antimicrobial agents are ordered, you may administer these immediately at the SAME TIME via different IV sites. Do not wait for the first antibiotic to infuse. If agents are Y-site compatible, they may be administered per Y-site protocols. IF the ordered agents are NOT Y site compatible, then administer the Broad-spectrum antibiotic first. Refer to available Y site compatibility information and determination of broad-spectrum antibiotic selection chart. Reason for Therapy: Bacterial Infection Suspected Indication: Sepsis Recommendation: Sepsis: Recommended duration is dependent upon patient's clinical response and source identification
[] Pharmacy consult to manage vancomycin	STAT, Once For 1 Occurrences Reason for Therapy: Bacterial Infection Suspected Duration of Therapy (Days): 1 Indication: Sepsis Recommendation: Sepsis: Recommended duration is dependent upon patient's clinical response and source identification
[ ] OPTIONAL Additional Therapies - dexamethasone (DECADRON) IV	0.15 mg/kg, intravenous, once, For 1 Doses Administer 15-20 minutes before 1st dose of antibiotics.
() cefTRIAXone (ROCEPHIN) 2 g IV + vancomyc mg/kg IV + ampicillin 2 g IV - For Patients GRE than 50 years old	
[] cefTRIAxone (ROCEPHIN) IV	2 g, intravenous, for 30 Minutes, once, For 1 Doses Classification: Broad Spectrum Antibiotic
I vancomycin (VANCOCINI) IV + Phormony Cor	When multiple antimicrobial agents are ordered, you may administer these immediately at the SAME TIME via different IV sites. Do not wait for the first antibiotic to infuse. If agents are Y-site compatible, they may be administered per Y-site protocols. IF the ordered agents are NOT Y site compatible, then administer the Broad-spectrum antibiotic first. Refer to available Y site compatibility information and determination of broad-spectrum antibiotic selection chart. Reason for Therapy: Bacterial Infection Suspected Indication: Sepsis  Recommendation: Sepsis: Recommended duration is dependent upon patient's clinical response and source identification
<ul><li>[] vancomycin (VANCOCIN) IV + Pharmacy Cor Dose (Selection Required)</li></ul>	isult to

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

[] vancomycin (VANCOCIN)	15 mg/kg, intravenous, once, For 1 Doses Classification: Narrow Spectrum Antibiotic
	When multiple antimicrobial agents are ordered, you may administer these immediately at the SAME TIME via different IV sites. Do not wait for the first antibiotic to infuse. If agents are Y-site compatible, they may be administered per Y-site protocols. IF the ordered agents are NOT Y site compatible, then administer the Broad-spectrum antibiotic first. Refer to available Y site compatibility information and determination of broad-spectrum antibiotic selection chart. Reason for Therapy: Bacterial Infection Suspected Indication: Sepsis Recommendation: Sepsis: Recommended duration is dependent upon patient's clinical response and source identification
[] Pharmacy consult to manage vancomycin	STAT, Once For 1 Occurrences Reason for Therapy: Bacterial Infection Suspected Duration of Therapy (Days): 1 Indication: Sepsis Recommendation: Sepsis: Recommended duration is dependent upon patient's clinical response and source identification
[] OPTIONAL Additional Therapies -	0.15 mg/kg, intravenous, once, For 1 Doses
dexamethasone (DECADRON) IV	Administer 15-20 minutes before 1st dose of antibiotics.
[] OPTIONAL Additional Therapies - riFAMpin (RIFADIN) capsule	600 mg, oral, once, For 1 Doses Reason for Therapy: Bacterial Infection Suspected Indication: Sepsis
<ul> <li>( ) cefTRIAXone (ROCEPHIN) 2 g intraMUSCULA vancomycin 15 mg/kg IV + ampicillin 2 g intraMUSCULAR - For Patients GREATER than old</li> </ul>	
[] cefTRIAXone (ROCEPHIN) IM	2 g, intramuscular, once, For 1 Doses Intramuscular route selected because no IV access available. Administer dose by deep IM into large muscle mass (e.g. gluteal muscles or lateral part of the thigh). Reason for Therapy: Bacterial Infection Suspected Indication: Sepsis Recommendation: Sepsis: Recommended duration is dependent upon patient's clinical response and source identification
[] vancomycin (VANCOCIN) IV + Pharmacy Cor	- ·
Dose (Selection Required)	45 mar/les introvenous and For 4 Deces
[] vancomycin (VANCOCIN)	15 mg/kg, intravenous, once, For 1 Doses Classification: Narrow Spectrum Antibiotic
	When multiple antimicrobial agents are ordered, you may administer these immediately at the SAME TIME via different IV sites. Do not wait for the first antibiotic to infuse. If agents are Y-site compatible, they may be administered per Y-site protocols. IF the ordered agents are NOT Y site compatible, then administer the Broad-spectrum antibiotic first. Refer to available Y site compatibility information and determination of broad-spectrum antibiotic selection chart. Reason for Therapy: Bacterial Infection Suspected Indication: Sepsis Recommended duration is dependent upon patient's clinical response and source identification
[] Pharmacy consult to manage vancomycin	STAT, Once For 1 Occurrences Reason for Therapy: Bacterial Infection Suspected Duration of Therapy (Days): 1 Indication: Sepsis Recommendation: Sepsis: Recommended duration is dependent upon patient's clinical response and source identification

] ampicillin IM	2 g, intramuscular, once, For 1 Doses
	Intramuscular route selected because no IV access available.
	Administer dose by deep IM into large muscle mass (e.g. gluteal
	muscles or lateral part of the thigh).
	Reason for Therapy: Bacterial Infection Suspected
	Indication: Sepsis
] OPTIONAL Additional Therapies -	0.15 mg/kg, intravenous, once, For 1 Doses
dexamethasone (DECADRON) IV	Administer 15-20 minutes before 1st dose of antibiotics.
OPTIONAL Additional Therapies - riFAMpin	600 mg, oral, once, For 1 Doses
(RIFADIN) capsule	Reason for Therapy: Bacterial Infection Suspected
OF \/FDF Degicillia Allegay (Oingle Desgraps)	Indication: Sepsis
SEVERE Penicillin Allergy (Single Response)	of proven or augmented programment and maningities due to C. programment
Dexamethasone is recommended for treatment	of proven or suspected pneumococcal meningitis due to S. pneumoniae
aztreonam (AZACTAM) 2 g IV + vancomycin 1	5 mg/kg
] aztreonam (AZACTAM) IV	2 g, intravenous, once, For 1 Doses
	Classification: Broad Spectrum Antibiotic
	When multiple antimicrobial agents are ordered, you may administer
	these immediately at the SAME TIME via different IV sites. Do not wa
	for the first antibiotic to infuse. If agents are Y-site compatible, they m
	be administered per Y-site protocols. IF the ordered agents are NOT
	site compatible, then administer the Broad-spectrum antibiotic first.
	Refer to available Y site compatibility information and determination o
	broad-spectrum antibiotic selection chart.
	Reason for Therapy: Bacterial Infection Suspected
. (//ANGOOIN) N/ BI	Indication: Sepsis
] vancomycin (VANCOCIN) IV + Pharmacy Co	nsuit to
Dose (Selection Required)	
Dose (Selection Required) [1] vancomycin (VANCOCIN)	15 mg/kg, intravenous, once, For 1 Doses
	15 mg/kg, intravenous, once, For 1 Doses Classification: Narrow Spectrum Antibiotic
	Classification: Narrow Spectrum Antibiotic
	Classification: Narrow Spectrum Antibiotic  When multiple antimicrobial agents are ordered, you may administer
	Classification: Narrow Spectrum Antibiotic  When multiple antimicrobial agents are ordered, you may administer these immediately at the SAME TIME via different IV sites. Do not
	Classification: Narrow Spectrum Antibiotic  When multiple antimicrobial agents are ordered, you may administer these immediately at the SAME TIME via different IV sites. Do not wait for the first antibiotic to infuse. If agents are Y-site compatible,
	Classification: Narrow Spectrum Antibiotic  When multiple antimicrobial agents are ordered, you may administer these immediately at the SAME TIME via different IV sites. Do not wait for the first antibiotic to infuse. If agents are Y-site compatible, they may be administered per Y-site protocols. IF the ordered agents
	Classification: Narrow Spectrum Antibiotic  When multiple antimicrobial agents are ordered, you may administer these immediately at the SAME TIME via different IV sites. Do not wait for the first antibiotic to infuse. If agents are Y-site compatible, they may be administered per Y-site protocols. IF the ordered agents are NOT Y site compatible, then administer the Broad-spectrum
	Classification: Narrow Spectrum Antibiotic  When multiple antimicrobial agents are ordered, you may administer these immediately at the SAME TIME via different IV sites. Do not wait for the first antibiotic to infuse. If agents are Y-site compatible, they may be administered per Y-site protocols. IF the ordered agents are NOT Y site compatible, then administer the Broad-spectrum antibiotic first. Refer to available Y site compatibility information and
	Classification: Narrow Spectrum Antibiotic  When multiple antimicrobial agents are ordered, you may administer these immediately at the SAME TIME via different IV sites. Do not wait for the first antibiotic to infuse. If agents are Y-site compatible, they may be administered per Y-site protocols. IF the ordered agents are NOT Y site compatible, then administer the Broad-spectrum antibiotic first. Refer to available Y site compatibility information and determination of broad-spectrum antibiotic selection chart.
	Classification: Narrow Spectrum Antibiotic  When multiple antimicrobial agents are ordered, you may administer these immediately at the SAME TIME via different IV sites. Do not wait for the first antibiotic to infuse. If agents are Y-site compatible, they may be administered per Y-site protocols. IF the ordered agents are NOT Y site compatible, then administer the Broad-spectrum antibiotic first. Refer to available Y site compatibility information and
	Classification: Narrow Spectrum Antibiotic  When multiple antimicrobial agents are ordered, you may administer these immediately at the SAME TIME via different IV sites. Do not wait for the first antibiotic to infuse. If agents are Y-site compatible, they may be administered per Y-site protocols. IF the ordered agents are NOT Y site compatible, then administer the Broad-spectrum antibiotic first. Refer to available Y site compatibility information and determination of broad-spectrum antibiotic selection chart. Reason for Therapy: Bacterial Infection Suspected
	Classification: Narrow Spectrum Antibiotic  When multiple antimicrobial agents are ordered, you may administer these immediately at the SAME TIME via different IV sites. Do not wait for the first antibiotic to infuse. If agents are Y-site compatible, they may be administered per Y-site protocols. IF the ordered agents are NOT Y site compatible, then administer the Broad-spectrum antibiotic 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)	Classification: Narrow Spectrum Antibiotic  When multiple antimicrobial agents are ordered, you may administer these immediately at the SAME TIME via different IV sites. Do not wait for the first antibiotic to infuse. If agents are Y-site compatible, they may be administered per Y-site protocols. IF the ordered agents are NOT Y site compatible, then administer the Broad-spectrum antibiotic first. Refer to available Y site compatibility information and determination of broad-spectrum antibiotic selection chart. Reason for Therapy: Bacterial Infection Suspected Indication: Sepsis  Recommendation: Sepsis: Recommended duration is dependent
	Classification: Narrow Spectrum Antibiotic  When multiple antimicrobial agents are ordered, you may administer these immediately at the SAME TIME via different IV sites. Do not wait for the first antibiotic to infuse. If agents are Y-site compatible, they may be administered per Y-site protocols. IF the ordered agents are NOT Y site compatible, then administer the Broad-spectrum antibiotic first. Refer to available Y site compatibility information and determination of broad-spectrum antibiotic selection chart. Reason for Therapy: Bacterial Infection Suspected Indication: Sepsis  Recommendation: Sepsis: Recommended duration is dependent upon patient's clinical response and source identification  STAT, Once For 1 Occurrences
[] vancomycin (VANCOCIN)	Classification: Narrow Spectrum Antibiotic  When multiple antimicrobial agents are ordered, you may administer these immediately at the SAME TIME via different IV sites. Do not wait for the first antibiotic to infuse. If agents are Y-site compatible, they may be administered per Y-site protocols. IF the ordered agents are NOT Y site compatible, then administer the Broad-spectrum antibiotic first. Refer to available Y site compatibility information and determination of broad-spectrum antibiotic selection chart. Reason for Therapy: Bacterial Infection Suspected Indication: Sepsis  Recommendation: Sepsis: Recommended duration is dependent upon patient's clinical response and source identification  STAT, Once For 1 Occurrences Reason for Therapy: Bacterial Infection Suspected
[] vancomycin (VANCOCIN)	Classification: Narrow Spectrum Antibiotic  When multiple antimicrobial agents are ordered, you may administer these immediately at the SAME TIME via different IV sites. Do not wait for the first antibiotic to infuse. If agents are Y-site compatible, they may be administered per Y-site protocols. IF the ordered agents are NOT Y site compatible, then administer the Broad-spectrum antibiotic first. Refer to available Y site compatibility information and determination of broad-spectrum antibiotic selection chart. Reason for Therapy: Bacterial Infection Suspected Indication: Sepsis  Recommendation: Sepsis: Recommended duration is dependent upon patient's clinical response and source identification  STAT, Once For 1 Occurrences
[] vancomycin (VANCOCIN)	Classification: Narrow Spectrum Antibiotic  When multiple antimicrobial agents are ordered, you may administer these immediately at the SAME TIME via different IV sites. Do not wait for the first antibiotic to infuse. If agents are Y-site compatible, they may be administered per Y-site protocols. IF the ordered agents are NOT Y site compatible, then administer the Broad-spectrum antibiotic first. Refer to available Y site compatibility information and determination of broad-spectrum antibiotic selection chart. Reason for Therapy: Bacterial Infection Suspected Indication: Sepsis  Recommendation: Sepsis: Recommended duration is dependent upon patient's clinical response and source identification  STAT, Once For 1 Occurrences Reason for Therapy: Bacterial Infection Suspected Duration of Therapy (Days): 1 Indication: Sepsis
[] vancomycin (VANCOCIN)	Classification: Narrow Spectrum Antibiotic  When multiple antimicrobial agents are ordered, you may administer these immediately at the SAME TIME via different IV sites. Do not wait for the first antibiotic to infuse. If agents are Y-site compatible, they may be administered per Y-site protocols. IF the ordered agents are NOT Y site compatible, then administer the Broad-spectrum antibiotic first. Refer to available Y site compatibility information and determination of broad-spectrum antibiotic selection chart. Reason for Therapy: Bacterial Infection Suspected Indication: Sepsis  Recommendation: Sepsis: Recommended duration is dependent upon patient's clinical response and source identification  STAT, Once For 1 Occurrences Reason for Therapy: Bacterial Infection Suspected Duration of Therapy (Days): 1
[] vancomycin (VANCOCIN)	Classification: Narrow Spectrum Antibiotic  When multiple antimicrobial agents are ordered, you may administer these immediately at the SAME TIME via different IV sites. Do not wait for the first antibiotic to infuse. If agents are Y-site compatible, they may be administered per Y-site protocols. IF the ordered agents are NOT Y site compatible, then administer the Broad-spectrum antibiotic first. Refer to available Y site compatibility information and determination of broad-spectrum antibiotic selection chart.  Reason for Therapy: Bacterial Infection Suspected Indication: Sepsis  Recommendation: Sepsis: Recommended duration is dependent upon patient's clinical response and source identification  STAT, Once For 1 Occurrences  Reason for Therapy: Bacterial Infection Suspected Duration of Therapy (Days): 1 Indication: Sepsis  Recommendation: Sepsis: Recommended duration is dependent

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

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

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

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

[] aztreonam (AZACTAM) IV	2 g, intravenous, once, For 1 Doses Classification: Broad Spectrum Antibiotic
	When multiple antimicrobial agents are ordered, you may administer these immediately at the SAME TIME via different IV sites. Do not wait for the first antibiotic to infuse. If agents are Y-site compatible, they may be administered per Y-site protocols. IF the ordered agents are NOT Y site compatible, then administer the Broad-spectrum antibiotic first. Refer to available Y site compatibility information and determination of broad-spectrum antibiotic selection chart. Reason for Therapy: Bacterial Infection Suspected Indication: Sepsis
[] linezolid in dextrose 5% (ZYVOX) IVPB	600 mg, intravenous, for 60 Minutes, once, For 1 Doses Classification: Narrow Spectrum Antibiotic
	When multiple antimicrobial agents are ordered, you may administer these immediately at the SAME TIME via different IV sites. Do not wait for the first antibiotic to infuse. If agents are Y-site compatible, they may be administered per Y-site protocols. IF the ordered agents are NOT Y site compatible, then administer the Broad-spectrum antibiotic first. Refer to available Y site compatibility information and determination of broad-spectrum antibiotic selection chart. Reason for Therapy: Bacterial Infection Suspected Indication: Sepsis Recommended duration is dependent upon patient's clinical response and source identification
[] OPTIONAL Additional Therapies -	0.15 mg/kg, intravenous, once, For 1 Doses
dexamethasone (DECADRON) IV  () aztreonam (AZACTAM) 2 g intraMUSCULAR	Administer 15-20 minutes before 1st dose of antibiotics.  + linezolid
(ZYVOX) 600 mg IV	- III.026114
[] aztreonam (AZACTAM) IM	2 g, intramuscular, once, For 1 Doses
	Classification: Broad Spectrum Antibiotic
[1] linezelid in devtroce 5% (ZVVOV) IV/PR	When multiple antimicrobial agents are ordered, you may administer these immediately at the SAME TIME via different IV sites. Do not wait for the first antibiotic to infuse. If agents are Y-site compatible, they may be administered per Y-site protocols. IF the ordered agents are NOT Y site compatible, then administer the Broad-spectrum antibiotic first. Refer to available Y site compatibility information and determination of broad-spectrum antibiotic selection chart. Reason for Therapy: Bacterial Infection Suspected Indication: Sepsis  IM Route Selection: I have opted to select the IM route because IV access could not be established
[] linezolid in dextrose 5% (ZYVOX) IVPB	600 mg, intravenous, for 60 Minutes, once, For 1 Doses Classification: Narrow Spectrum Antibiotic
	When multiple antimicrobial agents are ordered, you may administer these immediately at the SAME TIME via different IV sites. Do not wait for the first antibiotic to infuse. If agents are Y-site compatible, they may be administered per Y-site protocols. IF the ordered agents are NOT Y site compatible, then administer the Broad-spectrum antibiotic first. Refer to available Y site compatibility information and determination of broad-spectrum antibiotic selection chart. Reason for Therapy: Bacterial Infection Suspected Indication: Sepsis Recommendation: Sepsis: Recommended duration is dependent upon patient's clinical response and source identification
[] OPTIONAL Additional Therapies -	0.15 mg/kg, intravenous, once, For 1 Doses
dexamethasone (DECADRON) IV  Bacterial Meningitis - ImmunoCOMPROMISED,	Administer 15-20 minutes before 1st dose of antibiotics.
,	

Bacterial Meningitis - ImmunoCOMPROMISED, Post-Neurosurgery or Penetrating Head Trauma (Single Response)

Does your patient have a SEVERE Penicillin and/o	r vancomycin allergy?
() No SEVERE Penicillin or Vancomycin Allergy (S Response)	ingle
Dexamethasone is recommended for treatment	of proven or suspected pneumococcal meningitis due to S. pneumoniae
( ) ceFEPime 2 g IV or meropenem (MERREM) 2 vancomycin 15 mg/kg IV - For Patients LESS to years old	han 50
[] ceFEPime 2 g IV or meropenem (MERREM) 2 (Single Response)	2 g IV
() ceFEPime (MAXIPIME) IV	2 g, intravenous, once, For 1 Doses Classification: Broad Spectrum Antibiotic
	When multiple antimicrobial agents are ordered, you may administer these immediately at the SAME TIME via different IV sites. Do not wait for the first antibiotic to infuse. If agents are Y-site compatible, they may be administered per Y-site protocols. IF the ordered agents are NOT Y site compatible, then administer the Broad-spectrum antibiotic first. Refer to available Y site compatibility information and determination of broad-spectrum antibiotic selection chart. Reason for Therapy: Bacterial Infection Suspected
	Indication: Sepsis Recommendation: Sepsis: Recommended duration is dependent upon patient's clinical response and source identification
() meropenem (MERREM) IV	2 g, intravenous, once, For 1 Doses Classification: Broad Spectrum Antibiotic
	When multiple antimicrobial agents are ordered, you may administer these immediately at the SAME TIME via different IV sites. Do not wait for the first antibiotic to infuse. If agents are Y-site compatible, they may be administered per Y-site protocols. IF the ordered agents are NOT Y site compatible, then administer the Broad-spectrum antibiotic first. Refer to available Y site compatibility information and determination of broad-spectrum antibiotic selection chart. Reason for Therapy: Bacterial Infection Suspected Indication: Sepsis
	Recommendation: Sepsis: Recommended duration is dependent upon patient's clinical response and source identification
<ul><li>[] vancomycin (VANCOCIN) IV + Pharmacy Cor Dose (Selection Required)</li></ul>	nsult to
[] vancomycin (VANCOCIN)	15 mg/kg, intravenous, once, For 1 Doses Classification: Narrow Spectrum Antibiotic
	When multiple antimicrobial agents are ordered, you may administer these immediately at the SAME TIME via different IV sites. Do not wait for the first antibiotic to infuse. If agents are Y-site compatible, they may be administered per Y-site protocols. IF the ordered agents are NOT Y site compatible, then administer the Broad-spectrum antibiotic first. Refer to available Y site compatibility information and determination of broad-spectrum antibiotic selection chart. Reason for Therapy: Bacterial Infection Suspected Indication: Sepsis
	Recommendation: Sepsis: Recommended duration is dependent upon patient's clinical response and source identification
[] Pharmacy consult to manage vancomycin	STAT, Once For 1 Occurrences Reason for Therapy: Bacterial Infection Suspected Duration of Therapy (Days): 1 Indication: Sepsis Recommendation: Sepsis: Recommended duration is dependent
[] OPTIONAL Additional Therapies - dexamethasone (DECADRON) IV	upon patient's clinical response and source identification 0.15 mg/kg, intravenous, once, For 1 Doses Administer 15-20 minutes before 1st dose of antibiotics.

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

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

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

[] ampicillin IM	2 g, intramuscular, once, For 1 Doses
	Intramuscular route selected because no IV access available.
	Administer dose by deep IM into large muscle mass (e.g. gluteal
	muscles or lateral part of the thigh).
	Reason for Therapy: Bacterial Infection Suspected
	Indication: Sepsis
[] OPTIONAL Additional Therapies -	0.15 mg/kg, intravenous, once, For 1 Doses
dexamethasone (DECADRON) IV	Administer 15-20 minutes before 1st dose of antibiotics.
) SEVERE Penicillin Allergy (Single Response)	
Dexamethasone is recommended for treatment	of proven or suspected pneumococcal meningitis due to S. pneumoniae
( ) aztreonam (AZACTAM) 2 g IV + vancomycin 1	5 mg/kg
IV [] aztreonam (AZACTAM) IV	2 g, intravenous, once, For 1 Doses
[] 4246614111 (12/16/1/111)	Classification: Broad Spectrum Antibiotic
	Classification: Broad openium Antibiotic
	When multiple antimicrobial agents are ordered, you may administer
	these immediately at the SAME TIME via different IV sites. Do not wait
	for the first antibiotic to infuse. If agents are Y-site compatible, they ma
	be administered per Y-site protocols. IF the ordered agents are NOT Y
	site compatible, then administer the Broad-spectrum antibiotic first.
	Refer to available Y site compatibility information and determination of
	broad-spectrum antibiotic selection chart.
	Reason for Therapy: Bacterial Infection Suspected
	Indication: Sepsis
[] vancomycin (VANCOCIN) IV + Pharmacy Cor	
Dose (Selection Required)	
[] vancomycin (VANCOCIN)	15 mg/kg, intravenous, once, For 1 Doses
	Classification: Narrow Spectrum Antibiotic
	When multiple antimicrobial agents are ordered, you may administer
	these immediately at the SAME TIME via different IV sites. Do not
	wait for the first antibiotic to infuse. If agents are Y-site compatible,
	they may be administered per Y-site protocols. IF the ordered agents
	are NOT Y site compatible, then administer the Broad-spectrum
	antibiotic first. Refer to available Y site compatibility information and
	determination of broad-spectrum antibiotic selection chart.
	Reason for Therapy: Bacterial Infection Suspected
	Indication: Sepsis
	Recommendation: Sepsis: Recommended duration is dependent
	upon patient's clinical response and source identification
[] Pharmacy consult to manage vancomycin	STAT, Once For 1 Occurrences
[] Thamaey conducte manage valicemyem	Reason for Therapy: Bacterial Infection Suspected
	Duration of Therapy (Days): 1
	Indication: Sepsis
	Recommendation: Sepsis: Recommended duration is dependent
	·
[1 OPTIONAL Additional Therenias	upon patient's clinical response and source identification
[] OPTIONAL Additional Therapies -	0.15 mg/kg, intravenous, once, For 1 Doses
dexamethasone (DECADRON) IV	Administer 15-20 minutes before 1st dose of antibiotics.
( ) aztreonam (AZACTAM) 2 g intraMUSCULAR +	•
vancomycin 15 mg/kg IV	

[] aztreonam (AZACTAM) intraMUSCULAR	2 g, intramuscular, once, For 1 Doses Classification: Broad Spectrum Antibiotic
	When multiple antimicrobial agents are ordered, you may administer these immediately at the SAME TIME via different IV sites. Do not wait for the first antibiotic to infuse. If agents are Y-site compatible, they may be administered per Y-site protocols. IF the ordered agents are NOT Y site compatible, then administer the Broad-spectrum antibiotic first. Refer to available Y site compatibility information and determination of broad-spectrum antibiotic selection chart. Reason for Therapy: Bacterial Infection Suspected Indication: Sepsis IM Route Selection: I have opted to select the IM route because IV access could not be established
<ul><li>[] vancomycin (VANCOCIN) IV + Pharmacy Cons Dose (Selection Required)</li></ul>	sult to
[] vancomycin (VANCOCIN)	15 mg/kg, intravenous, once, For 1 Doses Classification: Narrow Spectrum Antibiotic
	When multiple antimicrobial agents are ordered, you may administer these immediately at the SAME TIME via different IV sites. Do not wait for the first antibiotic to infuse. If agents are Y-site compatible, they may be administered per Y-site protocols. IF the ordered agents are NOT Y site compatible, then administer the Broad-spectrum antibiotic first. Refer to available Y site compatibility information and determination of broad-spectrum antibiotic selection chart. Reason for Therapy: Bacterial Infection Suspected Indication: Sepsis Recommended duration is dependent upon patient's clinical response and source identification
[] Pharmacy consult to manage vancomycin	STAT, Once For 1 Occurrences Reason for Therapy: Bacterial Infection Suspected Duration of Therapy (Days): 1 Indication: Sepsis Recommendation: Sepsis: Recommended duration is dependent upon patient's clinical response and source identification
[] OPTIONAL Additional Therapies - dexamethasone (DECADRON) IV	0.15 mg/kg, intravenous, once, For 1 Doses Administer 15-20 minutes before 1st dose of antibiotics.
() SEVERE Vancomycin Allergy (Single Response)	Administer 13-20 minutes before 13t dose of antibiotics.
( ) ceFEPime 2 g IV or meropenem (MERREM) 2 g linezolid (ZYVOX) 600 mg IV - For Patients LES 50 years old	S than
[] ceFEPime 2 g IV or meropenem (MERREM) 2 (Single Response)	
() ceFEPime (MAXIPIME) IV	2 g, intravenous, once, For 1 Doses Classification: Broad Spectrum Antibiotic
	When multiple antimicrobial agents are ordered, you may administer these immediately at the SAME TIME via different IV sites. Do not wait for the first antibiotic to infuse. If agents are Y-site compatible, they may be administered per Y-site protocols. IF the ordered agents are NOT Y site compatible, then administer the Broad-spectrum antibiotic first. Refer to available Y site compatibility information and determination of broad-spectrum antibiotic selection chart. Reason for Therapy: Bacterial Infection Suspected Indication: Sepsis Recommendation: Sepsis: Recommended duration is dependent upon patient's clinical response and source identification

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

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

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

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

antimicrobial agents are ordered, you may administer ely at the SAME TIME via different IV sites. Do not wait biotic to infuse. If agents are Y-site compatible, they may different ely at the SAME TIME via different IV sites. Do not wait biotic to infuse. If agents are Y-site compatible, they may different ely site protocols. IF the ordered agents are NOT Y then administer the Broad-spectrum antibiotic first. Site Y site compatibility information and determination of antibiotic selection chart.  Trapy: Bacterial Infection Suspected else on: Sepsis: Recommended duration is dependent upon a response and source identification.  Travenous, once, For 1 Doses else of the else
travenous, once, For 1 Doses ster 500 mL intravenous once for patients not ding to initialfluid resuscitation with crystalloids. on:  Response)  cg/min, intravenous, titrated morepinephrine infusion at 4 mcg/min. Titrate to keep etween 65 mmHg to 70 mmHg }.  cy 2 mcg/minute every 5 minutes. Call MD if mean pressure is LESS than 65 mmHg and rate is 30
travenous, once, For 1 Doses ster 500 mL intravenous once for patients not ding to initialfluid resuscitation with crystalloids. on:  Response)  cg/min, intravenous, titrated morepinephrine infusion at 4 mcg/min. Titrate to keep etween 65 mmHg to 70 mmHg }.  cy 2 mcg/minute every 5 minutes. Call MD if mean pressure is LESS than 65 mmHg and rate is 30
travenous, once, For 1 Doses ster 500 mL intravenous once for patients not ding to initialfluid resuscitation with crystalloids. on:  Response)  cg/min, intravenous, titrated morepinephrine infusion at 4 mcg/min. Titrate to keep etween 65 mmHg to 70 mmHg }.  cy 2 mcg/minute every 5 minutes. Call MD if mean pressure is LESS than 65 mmHg and rate is 30
ester 500 mL intravenous once for patients not ding to initialfluid resuscitation with crystalloids. On:  Response)  Eg/min, intravenous, titrated horepinephrine infusion at 4 mcg/min. Titrate to keep etween 65 mmHg to 70 mmHg }.  Egy 2 mcg/minute every 5 minutes. Call MD if mean pressure is LESS than 65 mmHg and rate is 30
cg/min, intravenous, titrated norepinephrine infusion at 4 mcg/min. Titrate to keep etween 65 mmHg to 70 mmHg }. by 2 mcg/minute every 5 minutes. Call MD if mean pressure is LESS than 65 mmHg and rate is 30
norepinephrine infusion at 4 mcg/min. Titrate to keep etween 65 mmHg to 70 mmHg }. by 2 mcg/minute every 5 minutes. Call MD if mean pressure is LESS than 65 mmHg and rate is 30
cg/min, intravenous, titrated by 2 micrograms per minute every 5 minutes for mean pressure 65-70 mmHg. Call MD if mean arterial e is LESS than 65 mmHg and rate is 30 mcg/min.
mcg/kg/min, intravenous, titrated by 2 mcg/kg/min every 10 minutes for mean arterial e 65-70 mmHg. Call MD if mean arterial pressure is man 65 mmHg and rate is 10 mcg/kg/min.
e of hypotension which is refractory to both fluids red for patients with a history of recent and/or
intravenous, every 6 hours ents with shock refractory to fluids and vasopressors.
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[] B natriuretic peptide	STAT For 1 Occurrences
[] Troponin T	STAT For 1 Occurrences
[] Fibrinogen	STAT For 1 Occurrences
[] Hepatic function panel	STAT For 1 Occurrences
[] Ionized calcium	STAT For 1 Occurrences
[ ] Lactic acid level	STAT For 1 Occurrences
[] Magnesium	STAT For 1 Occurrences
[] Phosphorus	STAT For 1 Occurrences
[] Type and screen	
[] Type and screen	STAT For 1 Occurrences, Blood Bank
[] ABO and Rh confirmation	Once, Blood Bank Confirmation
Laboratory STAT	
Laboratory - STAT	
[] Arterial blood gas	STAT For 1 Occurrences
[] Venous blood gas	STAT For 1 Occurrences
[] Comprehensive metabolic panel	STAT For 1 Occurrences
[] Prothrombin time with INR, I-Stat	STAT For 1 Occurrences
[] Partial thromboplastin time	STAT For 1 Occurrences
[] Basic metabolic panel	STAT For 1 Occurrences
[] CBC with differential	STAT For 1 Occurrences
[] Fibrinogen	STAT For 1 Occurrences
[] B natriuretic peptide	STAT For 1 Occurrences
[] Troponin T	STAT For 1 Occurrences
[] Hepatic function panel	STAT For 1 Occurrences
[] Ionized calcium	STAT For 1 Occurrences
[] Lactic acid level	STAT For 1 Occurrences
[] Magnesium	STAT For 1 Occurrences
[] Phosphorus	STAT For 1 Occurrences
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[] Type and screen [] ABO and Rh confirmation  Laboratory - STAT	Once, Blood Bank Confirmation
[] Type and screen [] ABO and Rh confirmation  Laboratory - STAT [] Arterial blood gas	Once, Blood Bank Confirmation  STAT For 1 Occurrences
[] Type and screen [] ABO and Rh confirmation  Laboratory - STAT  [] Arterial blood gas [] Venous blood gas	Once, Blood Bank Confirmation  STAT For 1 Occurrences  STAT For 1 Occurrences
[] Type and screen [] ABO and Rh confirmation  Laboratory - STAT  [] Arterial blood gas [] Venous blood gas [] Comprehensive metabolic panel	Once, Blood Bank Confirmation  STAT For 1 Occurrences  STAT For 1 Occurrences  STAT For 1 Occurrences
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[] Type and screen [] ABO and Rh confirmation  Laboratory - STAT  [] Arterial blood gas [] Venous blood gas [] Comprehensive metabolic panel [] Prothrombin time with INR, I-Stat [] Partial thromboplastin time	Once, Blood Bank Confirmation  STAT For 1 Occurrences
[] Type and screen [] ABO and Rh confirmation  Laboratory - STAT  [] Arterial blood gas [] Venous blood gas [] Comprehensive metabolic panel [] Prothrombin time with INR, I-Stat [] Partial thromboplastin time [] Basic metabolic panel	Once, Blood Bank Confirmation  STAT For 1 Occurrences
[] Type and screen [] ABO and Rh confirmation  Laboratory - STAT  [] Arterial blood gas [] Venous blood gas [] Comprehensive metabolic panel [] Prothrombin time with INR, I-Stat [] Partial thromboplastin time [] Basic metabolic panel [] CBC with differential	Once, Blood Bank Confirmation  STAT For 1 Occurrences
[] Type and screen [] ABO and Rh confirmation  Laboratory - STAT  [] Arterial blood gas [] Venous blood gas [] Comprehensive metabolic panel [] Prothrombin time with INR, I-Stat [] Partial thromboplastin time [] Basic metabolic panel [] CBC with differential [] Fibrinogen	Once, Blood Bank Confirmation  STAT For 1 Occurrences
[] Type and screen [] ABO and Rh confirmation  Laboratory - STAT  [] Arterial blood gas [] Venous blood gas [] Comprehensive metabolic panel [] Prothrombin time with INR, I-Stat [] Partial thromboplastin time [] Basic metabolic panel [] CBC with differential [] Fibrinogen [] B natriuretic peptide	Once, Blood Bank Confirmation  STAT For 1 Occurrences
[] Type and screen [] ABO and Rh confirmation  Laboratory - STAT  [] Arterial blood gas [] Venous blood gas [] Comprehensive metabolic panel [] Prothrombin time with INR, I-Stat [] Partial thromboplastin time [] Basic metabolic panel [] CBC with differential [] Fibrinogen [] B natriuretic peptide [] Troponin T	Once, Blood Bank Confirmation  STAT For 1 Occurrences
[] Type and screen [] ABO and Rh confirmation  Laboratory - STAT  [] Arterial blood gas [] Venous blood gas [] Comprehensive metabolic panel [] Prothrombin time with INR, I-Stat [] Partial thromboplastin time [] Basic metabolic panel [] CBC with differential [] Fibrinogen [] B natriuretic peptide [] Troponin T [] Hepatic function panel	Once, Blood Bank Confirmation  STAT For 1 Occurrences
[] Type and screen [] ABO and Rh confirmation  Laboratory - STAT  [] Arterial blood gas [] Venous blood gas [] Comprehensive metabolic panel [] Prothrombin time with INR, I-Stat [] Partial thromboplastin time [] Basic metabolic panel [] CBC with differential [] Fibrinogen [] B natriuretic peptide [] Troponin T [] Hepatic function panel [] lonized calcium	Once, Blood Bank Confirmation  STAT For 1 Occurrences
[] Type and screen [] ABO and Rh confirmation  Laboratory - STAT  [] Arterial blood gas [] Venous blood gas [] Comprehensive metabolic panel [] Prothrombin time with INR, I-Stat [] Partial thromboplastin time [] Basic metabolic panel [] CBC with differential [] Fibrinogen [] B natriuretic peptide [] Troponin T [] Hepatic function panel [] lonized calcium [] Lactic acid, I-Stat	Once, Blood Bank Confirmation  STAT For 1 Occurrences
[] Type and screen [] ABO and Rh confirmation  Laboratory - STAT  [] Arterial blood gas [] Venous blood gas [] Comprehensive metabolic panel [] Prothrombin time with INR, I-Stat [] Partial thromboplastin time [] Basic metabolic panel [] CBC with differential [] Fibrinogen [] B natriuretic peptide [] Troponin T [] Hepatic function panel [] lonized calcium [] Lactic acid, I-Stat [] Magnesium	Once, Blood Bank Confirmation  STAT For 1 Occurrences
[] Type and screen [] ABO and Rh confirmation  Laboratory - STAT  [] Arterial blood gas [] Venous blood gas [] Comprehensive metabolic panel [] Prothrombin time with INR, I-Stat [] Partial thromboplastin time [] Basic metabolic panel [] CBC with differential [] Fibrinogen [] B natriuretic peptide [] Troponin T [] Hepatic function panel [] lonized calcium [] Lactic acid, I-Stat [] Magnesium [] Phosphorus	Once, Blood Bank Confirmation  STAT For 1 Occurrences
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[] Type and screen [] ABO and Rh confirmation  Laboratory - STAT  [] Arterial blood gas [] Venous blood gas [] Comprehensive metabolic panel [] Prothrombin time with INR, I-Stat [] Partial thromboplastin time [] Basic metabolic panel [] CBC with differential [] Fibrinogen [] B natriuretic peptide [] Troponin T [] Hepatic function panel [] lonized calcium [] Lactic acid, I-Stat [] Magnesium [] Phosphorus [] Type and screen [] Type and screen [] Type and screen [] ABO and Rh confirmation  Laboratory - Repeat [] Basic metabolic panel	STAT For 1 Occurrences
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The Association of the second	0510
[] Aerobic culture	Once For 1 Occurrences
[] Anaerobic culture	Once For 1 Occurrences  Once For 1 Occurrences  Mini branchial alvadar lavaga
[] Respiratory culture, quantitative	Once For 1 Occurrences, Mini bronchial alveolar lavage
[] Respiratory pathogen panel with COVID-19 RT-PCR	Once For 1 Occurrences Once For 1 Occurrences, Sputum
<ul><li>[] Sputum culture</li><li>[] Urinalysis screen and microscopy, with reflex to culture</li></ul>	Once For 1 Occurrences, Spatiani Once For 1 Occurrences
[] Offinalysis screen and microscopy, with reliex to culture	Specimen Source: Urine
	Specimen Source: Office Specimen Site:
	opcomen one.
Laboratory - Additional Microbiology Screens	
[] Aerobic culture	Once
[] Anaerobic culture	Once
[] Gastrointestinal panel	Once, Stool
[] Respiratory culture, quantitative	Once, Mini bronchial alveolar lavage
[] Respiratory pathogen panel with COVID-19 RT-PCR	Once
[] Sputum culture	Once, Sputum
[] Urine Culture and Urinalysis	"And" Linked Panel
5.2	or 1 Occurrences, Urine
[] Urinalysis STAT F	For 1 Occurrences
Laboratory - Additional Microbiology Screens	
[] Aerobic culture	Once For 1 Occurrences
Anaerobic culture	Once For 1 Occurrences
[] Gastrointestinal panel	Once For 1 Occurrences, Stool
[] Respiratory culture, quantitative	Once For 1 Occurrences, Mini bronchial alveolar lavage
[] Respiratory pathogen panel with COVID-19 RT-PCR	Once For 1 Occurrences
[] Sputum culture	Once For 1 Occurrences, Sputum
[] Urinalysis	Once For 1 Occurrences
[] Urine culture	Once For 1 Occurrences, Urine
Imaging	
Chest X -Ray	
[] Chest 1 Vw Portable	STAT, 1 time imaging, Starting S at 1:00 AM For 1
[] Chest 2 Vw	STAT, 1 time imaging, Starting S at 1:00 AM For 1
Consults	
Antibiotics Pharmacy Consult	
Pharmacy consult to manage dose adjustments for renal	Routine, Until discontinued, Starting S
function	Adjust dose for:
	Pharmacy consult to review orders for renal dosing prior to
	administration of second dose of antibiotics
Consults	
[] Consult Infectious Diseases	Reason for Consult? Consult with Infectious Disease to review
	and/or adjust current antibiotic selection if necessary. Initial
	treatment should already be initiated.
	Patient/Clinical information communicated?
	Patient/clinical information communicated?
	Ordering provider must contact ID Consultant