

**VANCOUVER ACUTE
PHARMACIST PRESCRIBING AUTHORITY**

As part of the regional Vancouver Coastal Health pharmacist authority policy, unit-based clinical pharmacists may:

- (1) Modify the dose and/or frequency of oral or parenteral anti-infective drugs based on renal function and clinical status of the patient (as per the attached "Anti-infectives Dosage Adjustments" tables);
- (2) Order serum concentrations of all measurable drug levels including but not limited to aminoglycosides and vancomycin;
- (3) Modify the dosages of intravenous aminoglycosides and vancomycin based on levels; and
- (4) Order any laboratory test to guide in drug therapy decision making.

For the complete policy, please refer to the VA Formulary at www.vhpharmsci.com/VHFormulary/Policies/4.7-Pharmacist-Authority.htm

**ORAL ANTI-INFECTIVES DOSAGE ADJUSTMENTS
(Based on Estimated Creatinine Clearance)**

Medication PO	>50mL/min	30-50mL/min	<30mL/min	HD ¹	CAPD ²
Amoxicillin *	250-500mg TID	250-500mg TID	250-500mg BID	250-500mg BID ³	250mg BID
Amoxicillin/Clavulanate* (Clavulin [®])	250-500mg TID	250-500mg TID	250-500mg BID	250-500mg BID ³	
Azithromycin	250-500mg daily	250-500mg daily	250-500mg daily	250-500mg daily	250-500mg daily
Cefixime	400mg daily	400mg daily	200mg daily	200mg daily	200mg daily
Cefuroxime axetil	250-500mg BID-TID	250-500mg BID-TID	250-500mg BID-TID	250-500mg BID ³	250-500mg BID
Cephalexin *	250-500mg QID	250-500mg TID-QID	250-500mg BID-TID	250-500mg BID ³	250-500mg BID
Ciprofloxacin *	250-500mg BID	250-500mg BID	500mg daily	500mg daily ³	500mg daily
Clarithromycin XL	1g daily	1g daily	500mg daily	500mg daily	500mg daily
Clindamycin	150-600mg TID	150-600mg TID	150-600mg TID	150-600mg TID	150-600mg TID
Cloxacillin	250-500mg QID	250-500mg QID	250-500mg QID	250-500mg QID	250-500mg QID
Cotrimoxazole (DS ⁴ = TMP ⁵ 160mg; SS ⁶ = TMP ⁵ 80mg)	DS ⁴ BID	DS ⁴ BID	DS ⁴ daily or SS ⁶ BID	DS ⁴ daily ³ or SS ⁶ BID ³	SS ⁶ BID
Doxycycline	100mg daily-BID	100mg daily-BID	100mg daily-BID	100mg daily-BID	100mg daily-BID
Erythromycin	250-500mg QID	250-500mg QID	250-500mg QID	250-500mg QID	250-500mg QID
Fluconazole *	100-400mg daily	100-200mg daily (400mg daily*)	100-200mg daily	100-200mg q24h ³ or 200-400mg DAD ³	100-200mg daily
Linezolid	600mg BID	600mg BID	600mg BID	600mg BID ³	600mg BID
Metronidazole	500mg BID-TID	500mg BID-TID	500mg BID-TID	500mg BID-TID	500mg BID-TID
Moxifloxacin	400mg daily	400mg daily	400mg daily	400mg daily	400mg daily
Nitrofurantoin	50-100mg QID (MacroBID [®] 100mg BID)	Avoid	Avoid	Avoid	Avoid
Penicillin VK	300-600mg BID-QID	300-600mg BID-QID	300-600mg BID-QID	300-600mg BID-QID ³	300-600mg BID-QID
Valacyclovir	500-1000mg q8-12h	500-1000mg q8-12h	500-1000mg q12h	500-1000mg daily ³	500-1000mg daily

¹HD = hemodialysis; ²CAPD = continuous ambulatory peritoneal dialysis; ³on dialysis days, give at least one dose after dialysis; ⁴DS = Double Strength; ⁵TMP = trimethoprim; ⁶SS = Single Strength.

* For invasive infections, higher doses and/or intervals may be required.

**INTRAVENOUS ANTI-INFECTIVES DOSAGE ADJUSTMENTS
(Based on Estimated Creatinine Clearance)**

Medication IV	>50mL/min	30-50mL/min	<30mL/min	HD ¹	CAPD ²
Acyclovir	5-10mg/kg q8h	5-10mg/kg q12h	5-10mg/kg q24h	2.5-5mg/kg q24h ³	2.5-5mg/kg q24h
Amikacin	5mg/kg q8h or 7.5mg/kg q12h guided by levels	7.5mg/kg q24h guided by levels	7.5mg/kg guided by levels	5-7.5mg/kg DAD ³ guided by levels	
Ampicillin	1-2g q4-6h	1-2g q6-8h	1-2g q8-12h	1g q12h	1g q12h
Azithromycin	500mg q24h	500mg q24h	500mg q24h	500mg q24h	500mg q24h
Cefazolin	1-2g q8h	1-2g q12h	1-2g q12-24h	1-2g DAD ³ or 0.5-1g q24h ^{3,4}	500mg q12h
Cefotaxime	1-2g q8h (Meningitis: 2g q6h)	10-50mL/min: 1-2g q8-12h (Meningitis: 2g q8h)	<10mL/min: 1-2g q24h (Meningitis: 2g q12h)	1-2g DAD ³ or 1-2g q24h ^{3,5}	1g q24h
Ceftazidime	1-2g q8h	1-2g q12h	1-2g q12-24h	1-2g DAD ³ or 0.5-1g q24h ^{3,4}	0.5-1g q24h
Ceftriaxone	1-2g q24h	1-2g q24h	1-2g q24h	1-2g q24h ³	1-2g q24h
Cefuroxime	0.75-1.5g q8h	0.75-1.5g q8-12h	0.75-1.5g q8-12h	0.75-1.5g q24h ³	0.75-1.5g q24h
Ciprofloxacin	200-400mg q12h	200-400mg q12h	400mg q24h	400mg q24h ³	200mg q12h
Clindamycin	300-600mg q8h	300-600mg q8h	300-600mg q8h	300-600mg q8h	300-600mg q8h
Cloxacillin	0.5-2g q4-6h	0.5-2g q4-6h	0.5-2g q4-6h	0.5-2g q6h	0.5-2g q6h
Cotrimoxazole (mg/kg TMP ⁵)	2.5-5mg/kg/dose q6h	2.5-5mg/kg/dose q8h	2.5-5mg/kg/dose q12h	2.5-5mg/kg q24h ³	2.5mg/kg q24h
Erythromycin	0.5-1g q6h	0.5-1g q6h	0.5-1g q6h	0.5-1g q6h	0.5-1g q6h
Fluconazole	100-400mg q24h	100-200mg q24h-(400mg q24h ¹)	100-200mg q24h	100-200mg q24h ^{3,4} or 200-400mg DAD ³	100-200mg q24h
Ganciclovir	>70mL/min: 5mg/kg q12h; 50-69mL/min: 2.5mg/kg q12h	2.5mg/kg q24h	1.25mg/kg q24h	1.25mg/kg 3x/week DAD ³	1.25mg/kg 3x/week
Gentamicin	*	*	*	2mg/kg load, then 1-1.5mg/kg DAD ³	
Imipenem	500mg q6-8h	500mg q8h	250-500mg q12h	250-500mg q12h	250-500mg q12h
Levofloxacin	750mg q24h	20-50mL/min: 750mg q48h	<20mL/min: 750mg, then 500mg q48h	750mg, then 500mg qHD ¹	750mg, then 500mg q48h
Linezolid	600mg q12h	600mg q12h	600mg q12h	600mg q12h ³	600mg q12h
Metronidazole	500mg q8-12h	500mg q8-12h	500mg q8-12h	500mg q8-12h	500mg q8-12h
Moxifloxacin	400mg daily	400mg daily	400mg daily	400mg daily	400mg daily
Penicillin G	0.5-4MU q4-6h	0.5-4MU q6h	Maximum 6-9MU/day	Maximum 6MU/day ³	Maximum 6MU/day
Piperacillin-Tazobactam	3.375g q6h or 4.5g q6-8h	3.375g q6h	2.25g q6h	2.25g q8h ³	2.25g q8h
Ticarcillin-Clavulanate	3.1g q4-6h	3.1g q6h	3.1g q8h	3.1g q12h	3.1g q12h
Tobramycin	*	*	*	2mg/kg load, then 1-1.5mg/kg DAD ³	
Vancomycin	**	**	**	25mg/kg load, then 500-750mg qHD ¹	15mg/kg q4-7 days
Voriconazole	6mg/kg q12h x 2, then 4mg/kg q12h	Avoid IV formulation (may use PO)	Avoid IV formulation (may use PO)	Avoid IV formulation (may use PO)	Avoid IV formulation (may use PO)

¹HD = hemodialysis; ²CAPD = continuous ambulatory peritoneal dialysis; ³DAD = on dialysis days, give dose after dialysis; ⁴For more aggressive therapy; ⁵TMP = trimethoprim; ⁶Levofloxacin restricted to dialysis patients.

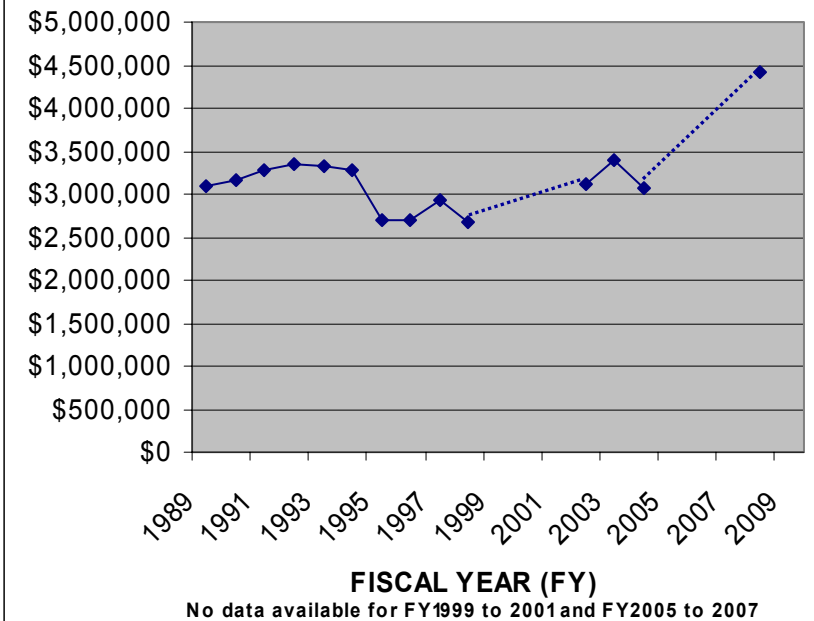
* See Aminoglycoside Dosing Guidelines.

** See Vancomycin Dosing Guidelines.



**ANTI-INFECTIVE COMPARISON CARD
Vancouver General Hospital &
University of BC Hospital
Revised August 2008
Originally published 1984
UPDATE NO. XXIV**

ANNUAL SYSTEMIC ANTI-INFECTIVE COSTS



The Anti-Infective Comparison Card has been produced as a collaborative effort of the Clinical Services Unit (CSU) Pharmaceutical Sciences, the Division of Medical Microbiology and Infection Control, and the Division of Infectious Diseases.

For more information, please contact:
CSU Pharmaceutical Sciences: 604-875-4111 ext. 62481
Medical Microbiologist (on call): 604-875-5000
Division of Infectious Diseases: 604-875-4588

Prepared by: The Medication Use Management Program
CSU Pharmaceutical Sciences, Vancouver General Hospital, Vancouver, BC, Canada.
Website: www.vhpharmsci.com
Copyright 2009

