TITLE: Ordering and Monitoring of Aminoglycosides/Vancomycin for Adults

Purpose: To establish uniform guidelines for the ordering and monitoring of Aminoglycosides and/or Vancomycin in patients over 18 years of age.

Policy:

A pharmacist will dose and monitor all adult patients prescribed an aminoglycoside or vancomycin.

Physician Responsibility

♦ Write/enter an order or give a verbal order for an aminoglycoside or vancomycin in the patient’s medical record.

Pharmacy Responsibility

♦ Obtain necessary patient information and complete necessary forms in the Clinical Pharmacy Polk Kinetics folder.
♦ Enter correct dose in PharmNet.
♦ Order necessary labs
♦ Place correct lab draw instructions in Powerchart as a communication order.
♦ Monitor the patient as needed.
♦ Document interventions and complete SOAP notes as needed.

Nursing Responsibility

♦ The nurse will scan written orders to the Pharmacy Department or enter verbal orders in Cerner.
♦ The nurse will follow all orders unless otherwise ordered.
♦ If a dose of aminoglycoside or vancomycin is not given within 30 minutes of when scheduled to be given, the nurse will take the following action:
  ➢ The nurse will chart the time of administration on the EMAR.
➢ The nurse may call the Pharmacy to request an altered schedule if needed.

OBTAINING BLOOD SAMPLES FOR AMINOGLYCOSIDE/VANCOMYCIN LEVELS

Prior to laboratory or nursing personnel obtaining the blood sample for an aminoglycoside or vancomycin level, the nurse will verify the sample is to be obtained at that time. To allow for the most accurate blood levels of these drugs, the order for collection site preference will be as follows:

1. Separate stick from a peripheral vein.

2. Multiple lumen central line (Use only if #1 cannot be obtained), which must be taken from a different port than the one used for drug infusion. One lumen of the line will be marked for aminoglycoside or vancomycin infusion. The most proximal port should be the one used for obtaining blood, with a more distal port used for drug infusion. If drawn from the central line, a notation must be made in Cerner to document that the specimen was drawn from a central line.

Note: Blood for aminoglycoside/vancomycin levels should not be drawn from the same line/port that is used to infuse the drug except in unusual circumstances, and then only if none of the above sites are available. If drawn from the same line, the line should be flushed first, and then at least 10 ml of blood drawn and discarded before obtaining the sample to send to the lab. Blood drawn from the same line/port that is used to infuse the drug must be documented in the nurse’s notes.