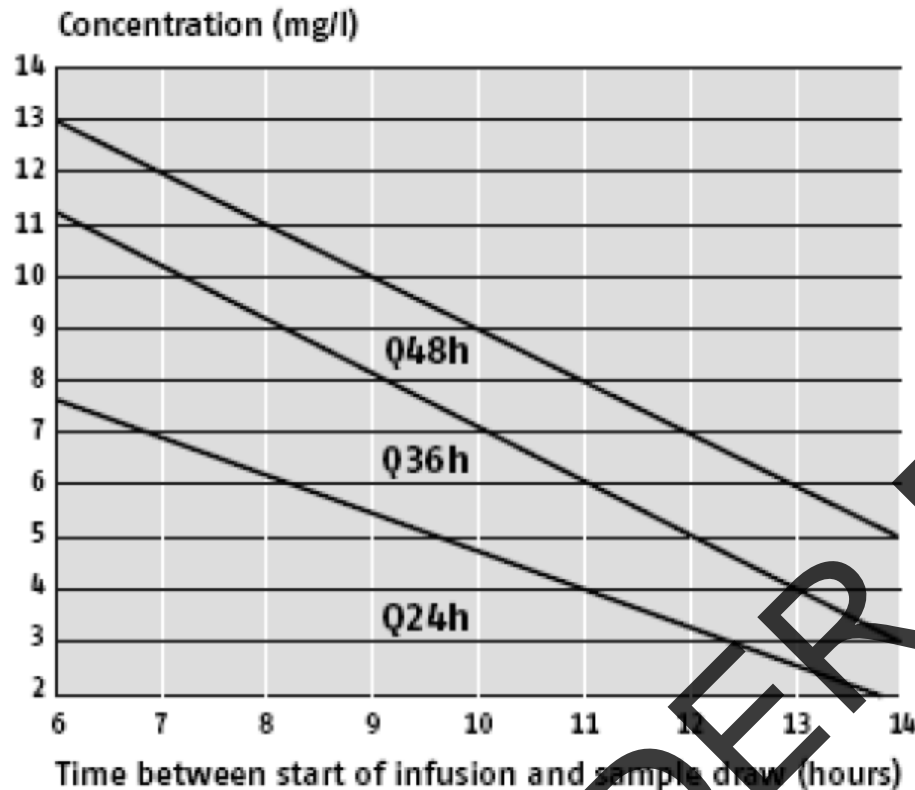


Patient name:

CHI no.:

ADULT PARENTERAL GENTAMICIN (HARTFORD): PRESCRIBING, ADMINISTRATION & MONITORING CHART

Prescribing, monitoring, interpreting and re-prescribing advice



If the measured concentration is unexpectedly HIGH or LOW

- Were dose and sample times recorded accurately?
- Was the correct dose administered?
- Was the sample taken from the line used to administer the drug?
- Was the sample taken during drug administration?
- Has renal function declined or improved?
- Does the patient have oedema or ascites?

If in doubt, take another sample before re-prescribing and/or contact pharmacy for advice.

Calculating the first dose of gentamicin

- If creatinine is known - use the online gentamicin dose calculator.
- If creatinine is not known - give 7 mg/kg gentamicin (maximum 600 mg) or, if CKD 5, give 2.5 mg/kg (maximum 180 mg) on advice of senior medical staff. If obese refer to full guideline to calculate corrected dosing weight.
- Re-calculate and assess the dose once creatinine is available.

Checking the patient's gentamicin concentration

- Take a blood sample 6-14 hours after the start of the first gentamicin infusion (or after 24 hours if CrCl \leq 20 ml/min).
- Thereafter, sample at least every 2 days.
- Record the exact time of all gentamicin samples overleaf AND on the sample request form.

Interpreting gentamicin results and re-prescribing

- Record the measured concentration overleaf.
- If creatinine clearance is \leq 20 ml/min and therapy is to continue, give a further dose once the measured concentration is <1 mg/L.
- If creatinine clearance is >20 ml/min and therapy is to continue, plot the gentamicin concentration on the graph opposite & reassess the dose/dosing interval as indicated.
- If the result is on the line, choose the longer interval. If the level is above the Q48h line, stop therapy and reassess the dosage regimen. Do not give a further dose until the concentration is <1 mg/L.
- Document the action taken in the medical notes and overleaf. Prescribe the next dose overleaf as appropriate.
- Contact pharmacy for further advice as necessary (e.g. if renal function is changing or the gentamicin concentration is unexpectedly high or low).
- Check microbiology sensitivities and refer to the IV to Oral switch policy.