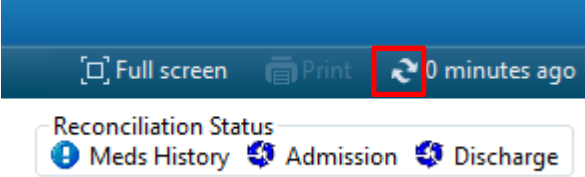
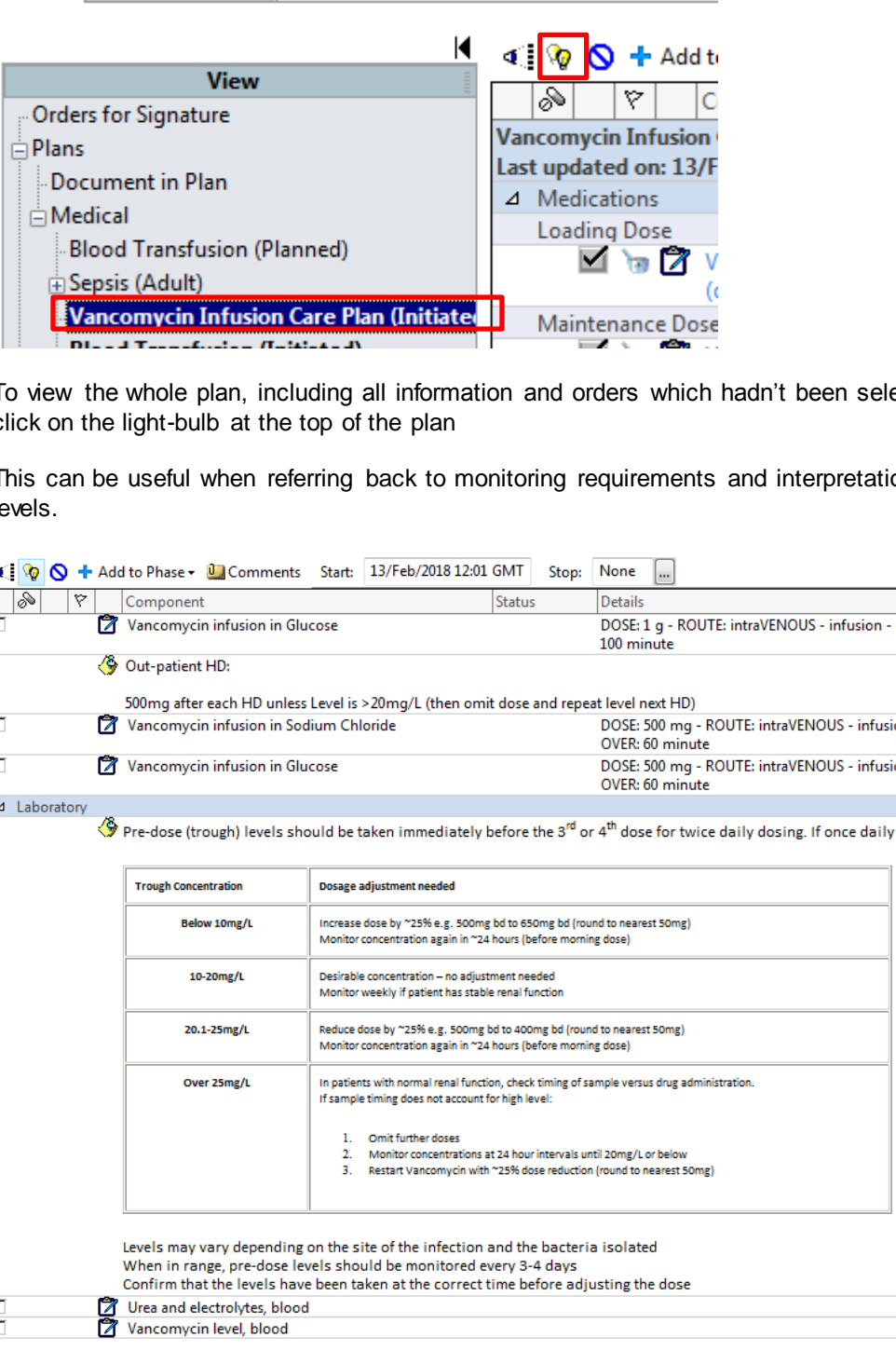


QRG – Vancomycin infusion prescribing		
No.	Action	Responsibility
1.	<p>From the Request / Care Plans tab in PowerChart click on +Add and type in “Vancomycin” to find the Vancomycin Infusion Care Plan</p>	Doctor / NMP
2.	<p>Click on the Powerplan and select  to open the plan</p>	Doctor / NMP
3.	<p>The plan is split into <b>Loading Dose</b> and <b>Maintenance Dose</b> with a section on monitoring at the end.</p> <p><b>Important: When initiating a patient on Vancomycin, order both the loading dose and the maintenance dose at the same time.</b></p> <p>Select the appropriate orders by setting the tick and complete required fields where necessary.</p>	Doctor / NMP
4.	<p>Laboratory requests can be actioned from this plan as well. Select the appropriate order and complete the required fields.</p>	Doctor / NMP
5.	<p>Click </p>	Doctor / NMP
6.	<p>The selected order(s) will display in the Requests / Care plans tab. Please review and then click </p>	Doctor / NMP

7.	 <p>Click refresh</p>	Doctor / NMP										
8.	<p>To refer back to the plan and which elements had been ordered from it, navigate to the requests / care plan tab into the Plans &gt; Medical section.</p>  <p>To view the whole plan, including all information and orders which hadn't been selected, click on the light-bulb at the top of the plan</p> <p>This can be useful when referring back to monitoring requirements and interpretation of levels.</p> <table border="1" data-bbox="363 1451 1189 1825"> <thead> <tr> <th>Trough Concentration</th> <th>Dosage adjustment needed</th> </tr> </thead> <tbody> <tr> <td>Below 10mg/L</td> <td>Increase dose by ~25% e.g. 500mg bd to 650mg bd (round to nearest 50mg) Monitor concentration again in ~24 hours (before morning dose)</td> </tr> <tr> <td>10-20mg/L</td> <td>Desirable concentration – no adjustment needed Monitor weekly if patient has stable renal function</td> </tr> <tr> <td>20.1-25mg/L</td> <td>Reduce dose by ~25% e.g. 500mg bd to 400mg bd (round to nearest 50mg) Monitor concentration again in ~24 hours (before morning dose)</td> </tr> <tr> <td>Over 25mg/L</td> <td>In patients with normal renal function, check timing of sample versus drug administration. If sample timing does not account for high level:                     <ol style="list-style-type: none"> <li>Omit further doses</li> <li>Monitor concentrations at 24 hour intervals until 20mg/L or below</li> <li>Restart Vancomycin with ~25% dose reduction (round to nearest 50mg)</li> </ol> </td> </tr> </tbody> </table> <p>Levels may vary depending on the site of the infection and the bacteria isolated When in range, pre-dose levels should be monitored every 3-4 days Confirm that the levels have been taken at the correct time before adjusting the dose</p>	Trough Concentration	Dosage adjustment needed	Below 10mg/L	Increase dose by ~25% e.g. 500mg bd to 650mg bd (round to nearest 50mg) Monitor concentration again in ~24 hours (before morning dose)	10-20mg/L	Desirable concentration – no adjustment needed Monitor weekly if patient has stable renal function	20.1-25mg/L	Reduce dose by ~25% e.g. 500mg bd to 400mg bd (round to nearest 50mg) Monitor concentration again in ~24 hours (before morning dose)	Over 25mg/L	In patients with normal renal function, check timing of sample versus drug administration. If sample timing does not account for high level: <ol style="list-style-type: none"> <li>Omit further doses</li> <li>Monitor concentrations at 24 hour intervals until 20mg/L or below</li> <li>Restart Vancomycin with ~25% dose reduction (round to nearest 50mg)</li> </ol>	Doctor / NMP
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9.	Navigate to drug chart to ensure that all medication orders display correctly.	Doctor / NMP										

10.

**Tip:** Vancomycin twice daily is ordered as “every TWELVE hours”. This may fall into odd times and not align with nursing rounds. If at some point you would like to **change the administration times** this can be done as follows:

Doctor / NMP

In the Requests / Care Plans tab right-click onto the order that needs rescheduling (in this case the 12 hourly order).

Select “Reschedule Administration Times”.

Component	Status	Details
<b>Vancomycin Infusion Care Plan (Initiated)</b>		
Last updated on: 13/Feb/2018 12:03 GMT by: Test , ClinPrac01		
Medications		
Loading Dose		
<input checked="" type="checkbox"/> <input type="checkbox"/>	Ordered	DOSE: 1 g - ROUTE: intraVENOUS - infusion - once ONLY - Reconstitute with Wat 12:01:00 GMT - STOP: 13/Feb/18 12:01:00 GMT - INFUSE OVER: 100 minute - RATE
Maintenance Dose		
<input checked="" type="checkbox"/> <input type="checkbox"/>	Ordered	DOSE: 1 g - ROUTE: intraVENOUS - infusion - every TWELVE hours - Reconstitute

Amend the date/time to when you want the next dose to be given. If the order is 12hourly dosing, and the next dose has been changed to for example 22:00, this would mean that after this dose at 22:00 the next one would be due at 10:00 and so forth.

Reschedule: Vancomycin for Infusion + Sodium Chloride ...

The next dose is currently scheduled at:

14/02/2018 0100 GMT

**\*Enter the new time for the next dose:**

14/02/2018 0100 GMT

ZZZSTANDEN, AAA - 865587

Save Cancel