

**Diagnostic Testing**

**Recommended for all patients (if not done in ED or outpatient office)**

- Blood cultures x 2 sets (if central line present, draw 1 set from line)
  - Hold 1 set for fungal culture (optional)
- UA, hold sample in lab for culture
- CBC with differential
- CMP (if BMP done in ED or office, add Hepatic Function Panel to blood in lab)

**Recommended only when clinically appropriate (see guideline)**

- CXR (recommended if respiratory symptoms present)
  - PA & lateral
  - Portable
- Stool studies (recommended if diarrhea present; check all studies indicated)
  - Leukocytes
  - Lactoferrin
  - C. difficile toxin
  - Giardia antigen
  - Salmonella culture
  - Shigella culture
  - E. coli 0157:H7 culture

**Antibiotic Therapy**

**Recommend one of following for all patients (doses in parentheses are recommended doses for patients with normal renal function)**

- Cefepime (Maxipime®) \_\_\_\_\_ grams IV Q \_\_\_\_\_ hrs (2 grams IV Q12hrs)
- Ceftazidime (Fortaz®) \_\_\_\_\_ grams IV Q \_\_\_\_\_ hrs (2 grams IV Q8hrs)
- Piperacillin/tazobactam (Zosyn®) \_\_\_\_\_ grams IV Q \_\_\_\_\_ hrs (4.5 grams IV Q8hrs) **PLUS**
- Gentamicin \_\_\_\_\_ mg IV Q \_\_\_\_\_ hrs (7 mg / kg Q 24 hrs)
  - Gentamicin level \_\_\_\_\_ hrs after 1<sup>st</sup> dose (6-10 hrs after dose for Q24 hr dosing)
  - Clinical Pharmacy consult to assist with gentamicin dosing
- Cefepime (Maxipime®) \_\_\_\_\_ grams IV Q \_\_\_\_\_ hrs (2 grams IV Q12hrs) **PLUS**
- Gentamicin \_\_\_\_\_ mg IV Q \_\_\_\_\_ hrs (7 mg / kg Q 24 hrs)
  - Gentamicin level \_\_\_\_\_ hrs after 1<sup>st</sup> dose (6-10 hrs after dose for Q24 hr dosing)
  - Clinical Pharmacy consult to assist with gentamicin dosing
- Ceftazidime (Fortaz®) \_\_\_\_\_ grams IV Q \_\_\_\_\_ hrs (2 grams IV Q8hrs) **PLUS**
- Gentamicin \_\_\_\_\_ mg IV Q \_\_\_\_\_ hrs (7 mg / kg Q 24 hrs)
  - Gentamicin level \_\_\_\_\_ hrs after 1<sup>st</sup> dose (6-10 hrs after dose for Q24 hr dosing)
  - Clinical Pharmacy consult to assist with gentamicin dosing
- Other \_\_\_\_\_

**Recommended only when clinically appropriate (see guideline) – should be added to one of the above regimens when indicated and not used as single agent therapy**

- Vancomycin \_\_\_\_\_ mg IV Q \_\_\_\_\_ hrs (1000mg IV Q12 hrs)
  - Clinical Pharmacy consult to assist with vancomycin dosing

\_\_\_\_\_  
Physician Signature

\_\_\_\_\_  
Date

**Colony-Stimulating Factors (consultation with Hematology-Oncology or Infectious Disease strongly recommended if ordered)**

- Filgrastim (Neupogen®, G-CSF):  
\_\_\_\_\_ mcg Q \_\_\_\_\_ hrs sub-Q or IV (circle one) (5 mcg / kg Q 24 hrs sub-Q)
- Sargramostim (Leukine®, glycosylated GM-CSF):  
\_\_\_\_\_ mcg Q \_\_\_\_\_ hrs sub-Q or IV (circle one) (250 mcg / square meter Q 24 hrs sub-Q)
- Other \_\_\_\_\_

**Consults**

- Hematology/Oncology
- Infectious Disease
- Other \_\_\_\_\_

\_\_\_\_\_  
Physician Signature

\_\_\_\_\_  
Date