



COHESIVE HEALTHCARE MANAGEMENT & CONSULTING

Mangum Regional Medical Center

TITLE		POLICY
Medical Staff-Pharmacist Collaborative Practices		DRM-055
MANUAL	EFFECTIVE DATE	REVIEW DATE
Drug Room	10-1-2020	10-1-2020
DEPARTMENT	REFERENCE	
Drug Room	Oklahoma Pharmacy Law Book	

SCOPE

This policy applies to all patients receiving care and treatment at MANGUM REGIONAL MEDICAL CENTER.

PURPOSE

The purpose of this policy is to identify, develop, and implement collaborative practices between medical providers and pharmacists at MANGUM REGIONAL MEDICAL CENTER. Aspects of patient care subject to collaborative practices include laboratory monitoring, medication therapeutic drug level monitoring, and streamlining of antimicrobials based on culture results.

DEFINITIONS

N/A

POLICY

Medical Staff-Pharmacist collaborative practices are intended to optimize medication therapy and pro-actively managed medication dosing based on medication package insert dosing guidelines.

PROCEDURE

Pharmacist(s) may enter laboratory orders and medication orders for patients per “Protocol” (or “Physician Protocol” or “Other” order source as allowed in an electronic health record). A medical provider will sign-off/acknowledge on all orders entered by a pharmacist in a timely manner. Refer to Table 1 and Table for details.

Table 1: Laboratory Orders

Laboratory Order	Reason for Ordering
Vancomycin trough, random levels; Aminoglycoside peak, trough levels	To monitor therapeutic dosing range of select antimicrobials
PT/INR	To monitor Warfarin dosing
Phenytoin, Valproic acid, Oxcarbazepine	To monitor effectiveness of anti-seizure and mood stabilizing medication dosing
Digoxin	To monitor Digoxin dosing
CBC, CMP, BMP, Renal Panel, Magnesium, Phosphorus, Lipid Panel, Total Creatine Kinase	To monitor trends in blood chemistries than can be affected by medications (e.g., medications that require renal dosing adjustments)

Table 2: Pharmacist Renal Dosed Medications

Medication	>60mL/min	60-30mL/min	30-10mL/min	<10mL/min (HD)
Acyclovir IV	5-10mg/kg q8H	5-10mg/kg q8H	5-10mg/kg q24H	2.5-5mg/kg q24H
Ampicillin/ Sulbactam	3g q6H	3q q8H	1.5g q 6H	1.5g q12H
Ampicillin IV	1-2g q4-6H	1-2g q6H	1-2g q 8H	1-2g q 12H
Aztreonam	2g q 6-8H	2g q8H	1g q12H	500mg q12H
Cefazolin	1g q8H	1g q8H	1g q12H	500mg-1g q24H
Cefepime	1-2g q8H	1-2g q12-24H	1-2g q24H	500mg-1g q24H
Ceftazidime	1-2g q8H	1g q8H	1g q12H	500mg-1g q24H
Cipro IV	400mg q8H	400mg q12H	200-400mg Q24H	
Cipro PO	500mg-750mg q12H	500mg q12H	250-500mg q24H	
Daptomycin	4mg/kg q24H	4mg/kg q 24H	4mg/kg q48H	
Empagliflozin	Limit use if CrCl < 45 mL/min		Contraindicated	
Enoxaparin (DVT ppx)	40mg q24H	40mgq24H	30mg q24H	
Enoxaparin (DVT & PE)	1mg/kg q12H	1mg/kg q1H	1mg/kg q24H	
Ertapenem	1g q24H	1g q24H	500mg q 24H	
Famotidine	20mg q12H	20mg q24H	20mg q24H	20mg q48H
Fluconazole IV/PO	200mg-800mg q24H	200mg-400mg q24H	100mg-200mg q24H	

Levofloxacin IV/PO	500mg-750mg q24H	500mg q24H	500mg q48H	500-750mg x1, 250mg q48H
Levetiracetam	500mg-1000mg q12H	250mg-1000mg q12H	250mg-500mg q12H	500-1000mg q24H
Meropenem	500mg q6H	500mg q8H	500mg q12H	500mg q24H
Metoclopramide IV/PO	10mg q6H	10mg q8H	5mg-10mg q 12H	
Metronidazole IV/PO	500mg q8H	500mg q8H	500mg q8H	250mg q8H
Nafcillin	1-2g q4H	No adjustment necessary		
Penicillin G	2-4 MU q4H	1-3 MU q4H	0.5-2 MU q4H	0.5-2 MU q6H
Piperacillin/ Tazobactam	3.375-4.5g q6H	3.375g q6H	2.25g q6H	2.25g q8H
Rivaroxaban (for A. fib)	15mg with supper	15mg with supper	Avoid use	
Sitagliptin	100mg daily	50mg daily	25mg daily	25mg daily
Vancomycin	15mg/kg q12H	Consult with Pharmacist		

REFERENCES

Oklahoma Pharmacy Law Book

ATTACHMENTS

None.

REVISIONS/UPDATES

Date	Brief Description of Revision/Change