

How to administer treatment dose gentamicin on HEPMA and the gentamicin chart

Further detail on how to prescribe and administer gentamicin on HEPMA can be found in the StaffNet document '[Intravenous gentamicin and vancomycin for adults on HEPMA: Frequently Asked Questions](#)'.

Check that the correct gentamicin option on HEPMA has been selected for treatment dose – i.e. 'as per paper chart'. There are also separate options for 'synergistic (endocarditis)' or 'prophylaxis/stat catheter dose' gentamicin.

On HEPMA, treatment dose gentamicin should have been prescribed as a PRN order, without a dose in mg or a dose time/frequency. The dose and dose time will be prescribed on the separate paper gentamicin prescription chart and may vary (see below).

Nursing staff MUST:

- Check the PRN medication on HEPMA on EVERY medication round to see if their patient is prescribed gentamicin.
- If gentamicin is prescribed, check the paper gentamicin chart on EVERY medication round to see if a dose is due.
- Record administration of gentamicin on BOTH the paper gentamicin chart and HEPMA, with accurate administration times.

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

Use for all patients prescribed intravenous gentamicin unless prophylactic indication or synergistic doses (usually in endocarditis) are being used

Dosing frequency varies between patients: some require a dose every 24 hours while others require a dose every 48 hours. Each dose is prescribed individually on the paper gentamicin chart.

Before administering a dose: check the DATE and TIME the dose is prescribed for carefully. Also check HEPMA in case gentamicin has been discontinued there.

SIGNS OF GENTAMICIN TOXICITY

RENAL: ↓ urine output/oliguria or ↑ creatinine

OTO: NEW tinnitus, dizziness, poor balance,

VESTIBULAR: hearing loss, oscillating vision

Toxicities may occur irrespective of gentamicin concentration

TWO nurses should:

- independently check preparation
- check & sign the chart and HEPMA
- record the exact administration time

TOXICITY Before prescribing each dose check: Renal & otovestibular function	Gentamicin Prescription Record					Administration Record			Monitoring Record		
	Date to be given	Time to be given (24 h clock)	Gentamicin Dose (mg)	Prescriber's signature and PRINTED name	*Infuse over 30 mins* Date given	Time started (24 h clock)	Given by	Date of sample	Time of sample (24 h clock)	Gent level (mg/L)	Action/ Comments (please initial action to be taken)
Cr = 114 micromol/L	18/04	11:45	320mg	J Smith J SMITH (FY1)	18/04	12:00	LS FR	18/04	22:04	5.1	24 hourly <input type="checkbox"/> 48 hourly <input checked="" type="checkbox"/> Withhold <input type="checkbox"/> Stop <input type="checkbox"/> Details/other:
Cr = 118 micromol/L	19/04	No dose required	48 hourly dosing	J Smith J SMITH (FY1)	----	----	----				24 hourly <input type="checkbox"/> 48 hourly <input type="checkbox"/> Withhold <input type="checkbox"/> Stop <input type="checkbox"/> Details/other:

Gentamicin levels should be checked after the first dose then at least every 2 days. Creatinine (Cr) should be checked every day. The results of both should be recorded on this chart. Discuss this with the prescriber if this is not happening.

Discuss with an infection specialist and document in the notes if treatment continues beyond 3 to 4 days