

How to prescribe 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](#)'.

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

Alert the nursing staff who are administering the gentamicin that a dose has been prescribed to ensure prompt administration.

PRN

GENTAMICIN AS PER PAPER CHART Intravenous Infusion PRN order with no defined frequency Administration History

Dose	1 Dose	Route	Intravenous Intermittent Inf...
Frequency			
Rx on	18-Apr-2023 11:45	Stop on	
BNF	Aminoglycosides	Prescriber	TT Doctor1

Order History
Administration History

On HEPMA, do NOT specify a dose amount in mg (leave this as '1 dose'). Prescribe as a PRN order and do NOT specify a dose time/frequency. The dose and dose time will be prescribed on the separate paper gentamicin prescription chart and may vary (see below).

Remember to discontinue gentamicin on both HEPMA AND the paper gentamicin chart when the course is complete. To discontinue on the paper chart tick the 'stopped' box (adding a signature/date) and score through all pages of the chart with the word STOP.

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



Patient name: Alfred PATIENT	Age: 72	Sex: M / F	Initial Gentamicin Dose*: 320mg	*this is not a prescription and may change. Doses must be prescribed individually below.
Date of birth: 19/02/1951	Weight: 62.5kg	Height: 165cm	Predicted Frequency*: 48 hourly	
CHI no.: 1302519999	Creatinine: 114	on: 18 / 04 / 2023		
Affix patient label	Source of first dose: Online calculator (preferred method) <input checked="" type="checkbox"/> Manual calculation <input type="checkbox"/> Weight based, creatinine not known <input type="checkbox"/>			
Step 1: Calculate and prescribe the first dose of gentamicin (see overleaf for more details)				

Prescribe each dose individually and DO NOT prescribe >24h in advance. If the patient requires 48 hourly dosing state 'no dose required' on the chart when applicable (see example below).

Before re-prescribing a dose: assess if the patient still needs antibiotics and, if so, if they could be switched to oral (refer to IVOST). Check sensitivities. If gentamicin is still needed check for toxicity and check HEPMA (in case gentamicin has already been discontinued there).

Creatinine (Cr) should be checked daily and the result recorded on the prescribing chart.

Document: the source of the first dose, the parameters used and the dose calculated.

Renal & otovestibular	is prescribed 'as per chart' on the kardex)		administered (in addition to the kardex)			Monitoring Record					
	Date to be given	Time to be given	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"/>

Always record on the chart: accurate gentamicin sample times, the results obtained and the action taken. Gentamicin levels should be checked after the first dose then at least every 2 days (daily if CrCl <21ml/min).

*Discuss with an infection specialist and document in the notes if treatment is continued beyond 7 days. Risks of prolonged treatment must be considered and treatment options discussed.

Cr =	micromol/L										
Cr =	micromol/L										

*Discuss with an infection specialist before continuing onto a second sheet.