

UHealth Tower Restricted Antimicrobial Approval Process

FORMULARY ANTIMICROBIALS REQUIRING ASP APPROVAL		NON-FORMULARY ANTIMICROBIALS REQUIRING ASP APPROVAL
Amphotericin B Liposomal (AmBisome®)	Imipenem/cilastatin (Primaxin®)	Amphotericin B Lipid Complex (Abelcet®)
Aztreonam (Azactam®)	Isavuconazonium Sulfate (Cresemba®)	Ceftazidime/avibactam (Avycaz®)
Ceftaroline (Teflaro®)	Meropenem (Merrem®) outside of ICU	Ceftolozane/tazobactam (Zerbaxa®)
Ceftazidime (Fortaz®)	Micafungin (Mycamine®)	Fidaxomicin (Difcid®)
Colistimethate IV (Colistin®)	Minocycline IV (Minocin®)	Oritavancin (Orbactiv®)
Daptomycin (Cubicin®)	Posaconazole (Noxafil®)	Meropenem/vaborbactam (Vabomere®)
Ertapenem (Invanz®) outside of pre-operative colorectal procedures	Tigecycline (Tygacil®)	Nitazoxanide (Alinia®)
Linezolid (Zyvox®)	Voriconazole (Vfend®)	Telavancin (Vibativ®)

PROCESS FOR APPROVAL OF RESTRICTED ANTIMICROBIALS

- Approvals for restricted antimicrobials may be given by the following:
 - Infectious Diseases (ID) Physician Consulted
 - On-Call Antimicrobial Stewardship Program (ASP) Pharmacist
 - Clinical Pharmacist
- Call the ASP member at **786-501-5008** (available Monday - Friday, 9:00 – 17:30; Saturday and Sunday 8:00 – 16:30):
 - The ASP member will be able to assist you in identifying the best antimicrobial based on the site of infection, at the best dose possible
 - Calling the ASP member immediately when ordering the antimicrobial will expedite the approval process
 - Pharmacy will not enter antimicrobial doses during these hours unless the ASP member releases the agent**
 - After hours (17:30 – 9:00), immediately proceed to step 3
- Enter order through electronic health system. If drug is non-formulary, enter as a non-formulary order with the rationale for use. Please include your contact number in the request.
- After hours, enough doses will be dispensed until the following morning at 9:00, if med is stocked in main pharmacy. **A conversation is required to take place between the prescriber and the ASP member before additional doses are dispensed**

RATIONALE FOR CHANGES IN PRACTICE

Optimal selection and continuation of appropriate antimicrobial therapy in acute care hospitals are part of a broader activity that is referred to as “Antimicrobial Stewardship”. The purpose of an Antimicrobial Stewardship Program (ASP) is to improve patient care by optimizing selection, dosing, route, and duration of antimicrobial therapy to maximize clinical cure or prevention of infection while limiting the unintended consequences, such as the development of resistance, adverse drug events, and costs.

Dellit TH, Owens RC, McGowan JE, Jr., et al. Infectious Diseases Society of America and the Society for Healthcare Epidemiology of America guidelines for developing an institutional program to enhance antimicrobial stewardship. *Clin Infect Dis.* Jan 15 2007;44(2):159-177.

UHEALTH TOWER ASP: (786) 501-5008

For other useful tools, please visit our website: www.ugotabug.med.miami.edu