

Memorial Health Care System
Restricted Antimicrobials
Updated: February 2016

The medications listed below have restrictions placed on their usage by the Antimicrobial Stewardship Program, Antimicrobial Sub-Committee, and Therapeutics Committee. These agents have a high potential for misuse that could result in patient harm or could significantly affect antimicrobial resistance if not used appropriately. If the medication is used outside of recommended criteria, the pharmacist will review the case with the antimicrobial stewardship pharmacist and the prescriber and recommend an appropriate alternative agent if necessary. If the prescriber is unable to be reached and/or feels that the prescribed antimicrobial is still necessary then the medication will be dispensed and the case reviewed by the following day with the infectious diseases service and/or antimicrobial stewardship pharmacist(s) for appropriateness. Usage outside of the criteria will not result in delay of therapy if it is safe and appropriate.

Amphotericin (Ambisome®/Abelcet®)

1. Infectious disease service.
2. Treatment of invasive fungal infections where treatment with amphotericin is indicated.

Ceftazidime/Avibactam (Avycaz®)

1. Infectious disease service.
2. Treatment of proven cases of susceptibility in the setting of multi-drug resistance on a case by case basis per Antimicrobial Stewardship Team.

Ceftolozane/Tazobactam (Zerbaxa®)

1. Infectious disease service.
2. Treatment of proven cases of susceptibility in the setting of multi-drug resistance on a case by case basis per Antimicrobial Stewardship Team.

Ceftaroline (Teflaro®)

1. Infectious disease service

Ciprofloxacin (Cipro®)

1. Infectious disease service, intensivists, pulmonology service
2. Suspected infection or history of *Pseudomonas aeruginosa*

Daptomycin (Cubicin®) - *Should not be used for treatment of pneumonia.*

1. Infectious disease service.
2. Treatment of bacteremia and/or endocarditis due to documented or suspected multi-drug resistant gram positive organisms (MRSA, MRSE, and VRE) when vancomycin cannot be used.
 - Vancomycin allergy
 - Vancomycin failure
 - Clinical decompensation after 72 hours
 - Failure to clear blood cultures after 48 hours for bacteremia/endocarditis
 - Vancomycin *Staphylococcus aureus* MIC > 2 mcg/ml
 - Recent vancomycin therapy
3. Treatment of complicated skin and skin structure infections due to multi-drug resistant gram positive organisms (MRSA, MRSE, and VRE) when both vancomycin and linezolid cannot be used.

Ertapenem (Invanz®)

1. Infectious disease service.
2. Patients transitioning to outpatient carbapenem therapy who are currently receiving meropenem.

Fidaxomicin (Dificid®)

1. Infectious disease service.

Isavuconazonium (Cresemba®)

1. Infectious disease service.

Linezolid (Zyvox®) - *Not recommended for treatment of bacteremia or endocarditis.*

1. Infectious disease service, Intensivists, Pulmonology service
2. Treatment of HCAP/HAP/VAP infections due to documented or suspected multi-drug resistant gram positive organisms (MRSA, MRSE, and VRE) when vancomycin cannot be used.
3. Treatment of complicated skin and soft structure infectious due to documented or suspected multi-drug resistant gram positive organisms (MRSA, MRSE, and VRE) when vancomycin cannot be used.
4. Treatment of VRE urinary tract infections.

Meropenem (Merrem®)

1. Infectious disease service, Intensivists, Pulmonology service
2. Treatment of confirmed, suspected, or past infection with multi-drug resistant organisms including extended spectrum β -lactam producing organisms (ESBLs) and as deemed appropriate per the Antimicrobial Stewardship Team.
3. Treatment of meningitis or febrile neutropenia where a carbapenem is needed.

Micafungin (Mycamine®)

1. Infectious disease service, Intensivists, Pulmonology service.
2. Empiric treatment of candidemia in ICU patients with shock or new organ dysfunction.
3. Empiric treatment of febrile neutropenia.
4. Treatment of azole-resistant fungal infections (including UTI's caused by *Candida glabrata*, *Candida krusei*)

Peramivir (Rapivab®)

1. Infectious disease service, Intensivists
2. Patient must be in a critical care/ICU level of care.
3. Cannot or suspect unable to absorb oral/enteral Tamiflu (oseltamivir) – Tamiflu is the drug of choice if enteral administration possible per CDC recommendations (2015).
4. Patient should be influenza PCR positive or must have symptoms consistent with influenza illness.

Quinupristin/dalfopristin (Synercid®)

1. Infectious disease service
2. Treatment of multi-drug resistant gram positive organisms where vancomycin, linezolid, daptomycin, and tigecycline cannot be used based on susceptibility and indication.

Tigecycline (Tygacil®) - *Should not be used to treat bacteremia, urinary tract, or Pseudomonas infections.*

1. Restricted to Infectious disease service, Intensivists
2. Treatment of documented multi-drug resistant gram negative infections (not Pseudomonas) sensitive to tigecycline (must request from the lab).
3. Treatment as a second or third line agent for skin soft structure infections when first-line agents cannot be used.
4. Treatment of intra-abdominal infections in a patient who cannot tolerate β -lactams.

Voriconazole (VFend®)

1. Infectious disease service, Intensivists, Hematology/Oncology
2. Treatment of fluconazole resistant candidiasis