## □ 15 milligram/kilogram intravenously once [Max dose = 2 grams], then consult pharmacy to dose linezolid (ZYVOX)

- □ 600 milligram intravenously every 12 hours
- □ 600 milligram tablet orally every 12 hours

Cephalosporin Allergy AND/OR Anaphylaxis to Penicillin: SELECT

- No Cephalosporin Allergy AND No Anaphylaxis to Penicillin: SELECT cefepime and vancomycin \*\* IF vancomycin allergic replace vancomycin with one linezolid
  - cefepime (MAXIPIME)

□ 2 gram intravenously every 12 hours; pharmacy to adjust for renal function vancomvcin

Healthcare- associated UTI and/or Pyelonephritis Anti-Infectives includes catheter associated UTI, any hospitalization and/or any urologic procedure in past 30 days First Line Treatment:

### Most likely pathogens: E. coli and K. pneumoniae First Line Treatment (No Cephalosporin Allergy AND No Anaphylaxis to Penicillin): SELECT

- acetaminophen (TYLENOL)

(place patient label here)

Initial each page and Sign/Date/Time last page

- 650 milligram orally every 4 hours as needed for pain of fever greater than or equal to 100F

If catheter indwelling for > 48 hours, notify provider for catheter change order prior to collecting UA

This order set is not intended for patients with Severe Sepsis or Septic Shock- For these patients, use the ICU

# Medications

 $\mathbf{\nabla}$ 

Patient Name:

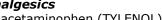
Allergies with reaction type:

Order Set Directions:

Diagnosis:

# Analgesics

Sepsis order set **Nursing Orders** 



cefTRIAXone (ROCEPHIN)

aztreonam (AZACTAM)

- phenazopyridine (PYRIDIUM)
  - □ 200 milligram orally 3 times a day, after meals for 2 days

(v/)- Check orders to activate; Orders with pre-checked box arnothing will be followed unless lined out.

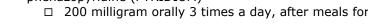
Initial each place in the pre-printed order set where changes such as additions, deletions or line outs have been made

This order set must be used with an admission order set or for patients already admitted.

☑ Verify that blood and urine cultures have been obtained before starting antibiotics

☑ Bladder volume index (BVI) for all male patients on admission

# Community Onset UTI and/or Pyelonephritis Anti-Infectives



2 gram intravenously every 24 hours

□ 2 grams intravenously every 8 hours

Urinary Tract Infection and/or Pyelonephritis



Version 4 7/24/19

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l	prace	patient	label	nere)

Patient Name: \_\_\_\_\_

### Order Set Directions:

- (√)- Check orders to activate; Orders with pre-checked box ⊠ will be followed unless lined out. Þ
- Initial each place in the pre-printed order set where changes such as additions, deletions or line outs have been made Initial each page and Sign/Date/Time last page
- 5



### Cephalosporin Allergy AND/OR Anaphylaxis to Penicillin, SELECT aztreonam & vancomycin (both) \*\*IF vancomycin allergic, replace vancomycin with one linezolid

aztreonam (AZACTAM)

□ 2 grams intravenously every 8 hours

vancomycin

□ 15 milligram/kilogram intravenously once [Max dose = 2 grams], then pharmacy to dose linezolid (ZYVOX)

- □ 600 milligram intravenously every 12 hours
- □ 600 milligram tablet orally every 12 hours

### Laboratory

### Admission labs or labs to be obtained now:

- Select the following only if not already done in ED CULTURE, BLOOD
  - □ x 2 from 2 different sites 5 minutes apart
  - □ UA WITH MICROSCOPY
  - □ CULTURE, URINE
  - □ PREGNANCY TEST, SERUM

### Radiology

**US** Retroperitoneal Complete

routine Reason for exam: \_\_\_\_\_