

ST. CHARLES HEALTHSYSTEM

Ertapenem/Meropenem (Carbapenem restriction policy per P&T)

In an effort to decrease the emergence of resistant organisms and preserve the efficacy of our broadest class of antibiotics, the St Charles Antimicrobial Stewardship Committee has developed a new pre-authorization process that has been approved by the Pharmacy & Therapeutics Committee for ordering meropenem and ertapenem.

Pre-authorization is a process that requires the provider to document clear approved qualification for a medication use and is an essential tool that is used to ensure the drug benefits are administered as designed and that patients receive the medication therapy that is safe, effective for their condition, and provides the greatest values.

- 1) **Empiric approval:** (approval until noon the next business day)
 - a) History of ESBL infection within the last month (30 days)
 - b) Recent prolonged exposure (>5 days) to Zosyn®, cefepime, or other broad spectrum antibiotic
 - c) Clinically unstable (new or persistent fever, WBC increase, hemodynamic instability, etc) and already on broad spectrum gram negative agents (Zosyn®, cefepime)
 - d) Meningitis when listeria plus nosocomial gram negative coverage is needed

- 2) **Definitive Approval:** (no stop date)
 - a) ID Provider
 - b) Confirmed ESBL infection
 - c) Anaphylaxis to PCN in:
 - i) Meningitis
 - ii) Bowel perforation
 - iii) Necrotizing fasciitis

- 3) **One time dose only:**
 - a) Emergency Department
 - b) Immediately prior to discharge in preparation for continued outpatient therapy

Pharmacist Verification:

Step 1 – ensure that either **empiric** qualifications or **definitive** qualifications are accurate.

- If qualifications are not accurate, contact provider and inform that patient does not meet criteria and an alternate antibiotic must be ordered.
- If patient does **not** meet criteria, but in your clinical judgment carbapenem is the only viable option, proceed with verification and document your justification in iVent

Step 2 – when verifying orders that meet **empiric** qualifications

- Edit the stop time as shown below, by clicking on the “Edit Clinical & Dispensing information”
- The stop time should be entered as 12:00 (noon) the next business day. This is accomplished by entering the # of days needed and then the time as 12:00
- **Do not use dose limits**, only days/time to limit duration of therapy.

For orders that meet **definitive** qualifications, no stop date/times are needed.

Step 3 – Enter AMS iVent using the “Restricted Antimicrobial” subtype

- Attach the carbapenem ordered in the “Associated Orders”
- Document any discussions that occurred with provider
- Document justification if verified without meeting criteria (will be audited)
- Leave iVent open for the AMS pharmacist to review

Step 4 – Follow up

- AMS Pharmacist will review open iVents and carbapenem orders daily when scheduled
 - Approve/deny based on established criteria and communicate with provider
- Floor Pharmacist will communicate with AMS pharmacist daily when scheduled to ensure necessary follow up is accomplished
 - With provider if AMS pharmacist is unavailable
- Providers have been informed in writing of the “Carbapenem Restriction Policy” and that empiric orders will have an automatic stop date/time

It is everyone’s responsibility (AMS pharmacist, floor pharmacist, and provider) to ensure that no patients go without antibiotic coverage.