

# Vancomycin Dosing Worksheet



★★★★★ BEFORE COMPLETING, MAKE SURE VANCOMYCIN IS NEEDED ★★★★★

Indication & target organism(s) for vancomycin:

Patient Location:

Abx allergies:

Age:      Sex:

Actual body weight:

BMI:

IBW:

Height:

Start date/ time:

Expected stop date/ time:

Current dose/ frequency/times:

Missed doses or dosing issues:

Goal vancomycin level:

### Recent Dosing History

<u>Date/ time:</u>									
<u>Dose Given:</u>									

### Recent Labs:

<u>Date:</u>	<u>Baseline</u>								
<u>SCr (mg/dL):</u>									
<u>CrCl (mL/min):</u>									
<u>eGFR (mL/min/1.73 m<sup>3</sup>):</u>									
<u>WBC:</u>									
<u>Vancomycin level:</u>									

(NOTE: watch for trends)

- Dialysis status:  Not on dialysis     iHD MWF/TTS     PRN dialysis     CRRT

Microbiology data:

- Positive or pending culture(s):
- MRSA colonization status:

Clinical status:  worsening     improving     no change

Plan from primary team & ID consult (if following):

Your plan:

Dose:

Frequency:

Next level:

Next CBC/BMP:

Notes/ other:

**Abbreviations:** BMI = body mass index, CrCl = creatinine clearance, CRRT = continuous renal replacement therapy, GFR = glomerular filtration rate, IBW = ideal body weight, iHD = intermittent hemodialysis, kg = kilograms, lb = pounds, MWF = Monday/Wednesday/Friday, PRN = as needed, SCr = serum creatinine, TTS = Tuesday, Thursday, Saturday

**Disclaimer: Factors not listed may impact renal dose-adjustment decisions and antibiotic selection.**