

Antibiotic “” List

When reviewing new or existing antimicrobial orders, the following list should set off an alarm. Contact prescribers to confirm the regimen is intended and/or correct.

1. Double β -lactam therapy

Imipenem/cilastatin + Piperacillin/tazobactam	Ampicillin/sulbactam + Piperacillin/tazobactam
Piperacillin/tazobactam + Aztreonam	Piperacillin/tazobactam + Ceftriaxone
Ampicillin/sulbactam + Ceftriaxone	Ampicillin + Piperacillin/tazobactam

2. Double fluoroquinolone therapy

Ciprofloxacin + Levofloxacin	Ciprofloxacin + Moxifloxacin
Levofloxacin + Moxifloxacin	

3. Double anaerobic coverage

Piperacillin/tazobactam + metronidazole when *C difficile* infection is not present
Any carbapenem + metronidazole when *C difficile* infection is not present

4. Double coverage for *Clostridium difficile* infection

PO vancomycin + PO metronidazole

5. Double atypical coverage for pneumonia

Azithromycin + any fluoroquinolones

6. Use of highly bioavailable IV antibiotics when patients are on other oral medications

Ciprofloxacin, doxycycline, fluconazole, levofloxacin, linezolid, metronidazole, moxifloxacin, rifampin, TMP-SMX, voriconazole

7. Use of last resort antibiotics without infectious diseases consultation

Carbapenems, ceftolozane/tazobactam, ceftazidime/avibactam, colistin, daptomycin, linezolid, polymyxin B, posaconazole, tigecycline

8. Empiric therapy >5 days

Empiric therapy, especially in patients without positive cultures, should not be longer than treatment for most confirmed infections (i.e., >5 days)

9. Odd antibiotic dosing regimen

Ordering frequency of BID, TID, QID instead of q12h, q8h, q6h
Using ciprofloxacin at 200mg IV or 250mg PO q12h instead of 400mg IV or 500mg PO q24h to take advantage of pharmacodynamic property of fluoroquinolones

10. Incomplete antiretroviral combinations/wrong dose/drug-drug interactions

Complete antiretroviral regimens are typically at least 3 drugs
Check renal function to determine if NRTI dose should be adjusted
Check for drug-drug interactions especially with PIs and NNRTIs