CRMC Vancomycin De-escalation Procedure

Vancomycin Consult Received

Are any of the following true?

- Patient has history of MRSA in past 12 months.
- Patient is diabetic being treat for SSTI.
- Patient is <18 years old.
- Patient received vancomycin prior to blood culture collection.

Yes → Patient is not eligible for vancomycin de-escalation at this time.

No → Have Blood Cultures been ordered?

(If UTI, has urine culture been ordered?)

No → Has patient received antibiotics?

Yes → Patient is not eligible for vancomycin de-escalation at this time.

No → Order Blood Cultures x2 lab to draw (unless patient has PICC/CVL enter nurse to draw 1 and lab to draw 1)

If UTI, order UA microscopic and Urine Culture.

Yes → If PNA, has MRSA Nasal Screen been ordered on this admission?

No → Order MRSA Nasal Screen

Yes (or not PNA) →

Are the following true?

- Microbiology report states "No growth after" 2 days or more; or patient has definitive (2 of 2) blood cultures for an organism that is not MRSA or E.faecalis.
- If UTI/Pyelonephritis is the only documented source of infection, urine culture for an organism that is not MRSA or E.faecalis.
- If patient has documented infection of pneumonia, nasal swab is negative for MRSA.
- Pt has received at least 48 hours of vancomycin treatment.
- Pt has not had sputum or bronch cultures **collected** within the past 48 hours with results still pending.
- Osteomyelitis or Meningitis ruled out.
- Patient on Vancomycin monotherapy.

No → Patient is not eligible for vancomycin de-escalation at this time.

Yes →

Contact either the ordering provider or provider assigned to that patient for the day and recommend discontinuation of vancomycin. If the recommendation is accepted, document with a note in the patient's EMR and internal antibiotic recommendation log. If the recommendation is not accepted, document on the internal patient's vancomycin form and internal antibiotic recommendation log.

DAY 1

DAY 2+