

## MONTEFIORE MEDICAL CENTER DEPARTMENT OF PHARMACY

SUBJECT: Restricted Drugs Policy, Antibiotic Restrictions

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APPROVED BY: Unified Director of Pharmacy

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BCPS; Priya Nori, MD; April 2021

The Pharmacy and Therapeutics Committee, in approving the addition of certain antibiotics to the Formulary, may restrict their use because of toxicity, and in an attempt to minimize antibiotic resistance. Monitoring of the usage of these antibiotics is the responsibility of the Antibiotic Subcommittee, the Division of Infectious Diseases, the Antibiotic Stewardship Program and the Pharmacy Department.

1. Prescribers wishing to prescribe <u>any restricted antibiotics during designated hours of restriction</u> (<u>see table 1 for specific hours</u>) should contact the designated individual, who is a member of Infectious Diseases (ID) or Antimicrobial Stewardship Program (ASP) on call for antibiotic approval.

Table 1. Hours of Restriction by Division

Division / Patient Population	Days of Restriction	Hours of Restriction
Adults: Moses, Einstein and Wakefield	7 days per week	8 AM to 10 PM
Pediatric: CHAM and NICU	7 days per week	8 AM to 11 PM

<sup>\*</sup>ID consultation must still be obtained for drugs requiring mandatory consult within 24 hours

The prescriber and member of ID/ASP will discuss the most appropriate antimicrobial regimen for patient in question. If clinically indicated, member of ID/ASP will either place approval note under Antimicrobial Stewardship "Antibiotic Approval Note" in Epic or call the pharmacy and provide the following information:

- a. Name of patient
- b. Medical record number
- c. Location of patient
- d. Drug name, dosage, route, administration frequency, and duration of approval
- e. Name of antibiotic approver

If the restricted antibiotic has not been approved by a member of ID/ASP, pharmacists must call the prescriber to inform them that the antibiotic requires ID approval (so doses are not delayed) and enter as intervention (I-vent) in Epic. In instances when prescribers are unable to reach ID/ASP within one hour, prescribers must call the pharmacy and ask for two doses to be dispensed to allow for additional time to obtain approval. A list of these incidents will be generated the following morning by pharmacy for follow up by a member of ID/ASP.

Pharmacists should not automatically dispense the two doses of antibiotic but should wait for the return call from prescribers indicating they were unable to reach ID/ASP. If prescribers do not call back requesting the release of the two doses, no antibiotic should be dispensed. If ID/ASP does not call the pharmacy to release the restricted antibiotics, no further medication will be dispensed.

In order to sufficiently treat patients overnight until stewardship hours resume, a limited number of doses of restricted Category II and III Antibiotics (table 3) can be dispensed without approval from ID/ASP if requested during non-stewardship hours (table 2). Pharmacists should remind prescribers that approval must be obtained (as outlined in Section 1) for continuation of therapy.

Table 2. Hours During Which Limited Doses May Be Dispensed

<b>Division / Patient Population</b>	Day	Time
Moses, Einstein and Wakefield	7 days per week	10PM – 8AM
CHAM, NICU	7 days per week	11PM – 8AM

3. Upon receipt of an order for a restricted antibiotic, pharmacists should verify the order only if ID approval has been obtained as per **Antibiotic Approval Note** in Epic.

If ID approval is pending, the medication order should not be verified, and pharmacists should follow the procedure outlined in Section 1 above.

Once ID approval is obtained, the medication order should be verified by pharmacists, and the appropriate number of doses sent to the patient unit. Pharmacists should modify the antibiotic orders to match the dose, route, frequency, and duration of approval.

- 4. **For category II and III antibiotics**, it is the responsibility of Primary Team to ensure a sufficient duration of approval is obtained from the on-call steward until ID consult is completed to prevent missed doses.
- 5. The following adjustments in restricted antibiotic therapy are **regarded as new orders and will require new approval** as described in Section 1:
  - a. Increased dose of the drug (e.g. vancomycin IV, liposomal amphotericin, etc.)
  - b. Increased frequency of administration (e.g. vancomycin IV)
  - c. Increased (extended) duration
  - d. Changing from the oral to the parenteral route of administration (e.g. azithromycin, quinolones, etc.
- 6. The Director for Clinical and Educational Pharmacy Services will ensure that restricted antibiotics are approved by the responsible departments through scheduled Pharmacy Performance Improvement Initiatives.
  - 5.1 It is the responsibility of pharmacists on duty to ensure each restricted antibiotic is approved by ID or ASP in a timely fashion.
  - 5.2 The lists of Restricted Antibiotics (tables 3 5) are updated as necessary. They are distributed to Department of Pharmacy staff, Division of Infectious Diseases and posted on pharmacy and Infectious Diseases intranet sites

Table 3. Restricted Antimicrobial List for Moses, Einstein, Wakefield (Adults) as of April 2021

		for Moses, Einstein, Wakefield (Adults) as of April 2021
ANTIMICROBIAL	ROUTE	COMMENTS
CATEGORY I – ID or ster	wardship a	approval is required 24h/day & 7-days per week. Ideally,
these are not started over	ernight, bu	It may be required in certain circumstances. ID consult
		ed within 24 hours of the first dose.
Amikacin		None
Amphotericin B deoxycholate	IV	None
	IV,	Ambisome is the Amphotericin B lipid formulation available at
Amphotericin B (liposomal)	Inhalation	Montefiore
Artemether/lumefantrine	PO	None
Artesunate*	IV	None
Cefiderocol	IV	None
Ceftazidime/avibactam	IV	None
Ceftolozane/tazobactam	IV	None
Cidofovir	IV	None
Colistin*	Inhalation	None
Daptomycin	IV	None
Eravacycline	IV	None
Fidaxomicin	PO	None
Foscarnet	IV	None
Imipenem/cilastatin/relebactam*	IV	None
Isavuconazole*	IV, PO	None
IVIG	lıv	Need ID approval/consult for any ID indications (i.e. C. difficile colitis,
		group A streptococcal or MRSA toxic shock syndrome).
Letermovir*	IV, PO	None
Meropenem/vaborbactam*	IV	None
Pentamidine	IV	None
Peramivir*	IV	None
Polymyxin B	IV	None
Pyrimethamine	PO	None
Remdesivir	IV	Mandatory ID consult not required
Ribavirin*	Inhalation	None
CATEGORY II – ID or st	tewardship	o approval must be requested from 8am-10pm, but 1-2
		pm-8am without approval. ID consult must be obtained
		irst dose (see meropenem exception below).
Ceftaroline	IV	None
Certaronne		None (patients are automatically switched to the oral formulation
Linezolid	IV, PO	when able to take oral medications).
		ID consult required within 24h of first dose on weekdays. On
		weekends, ID consult can be ordered within 48 hours or Monday
Meropenem	IV	morning; but it is the responsibility of the Primary Team to ensure
		a sufficient duration of approval is obtained from on-call steward
		to prevent missing doses while awaiting ID consult.
	n z	ID consultation/approval is not required for 50 mg/day for antifungal
Micafungin	IV	prophylaxis in allogeneic stem cell patients.
		ID consult and approval are not required for prophylaxis for AML/high
		risk MDS on induction or consolidation therapy with ANC<500, or
Posaconazole	IV*, PO	allogeneic stem cell patient with GVHD or receiving alemtuzumab or
		high dose steroids. Please note: suspension and extended-release
		tablet dosing are NOT interchangeable.
		ID consult is not required for lung transplant prophylaxis and approval
Voriconazole	IV, PO	is not required for 1st dose of 200 mg IV ordered for surgical
		prophylaxis of fresh lung transplant.
<b>CATEGORY III - ID or ste</b>	wardship	approval must be requested from 8am-10pm, but one or
		10pm-8am without approval when being given to adults.
Acyclovir	IV	Approval is not required for 250 mg IV q12h prophylaxis in stem cell
	•	The state of the s

		recipients unable to take oral valacyclovir.
Albendazole	PO	None
Amikacin	IV, IM	None
Azithromycin	IV	Approval is not required for single dose 500mg for Caesarian section during L&D. Approval not required for 1st dose ordered via Severe Sepsis Protocol.
Aztreonam	IV	Approval not required for 1st dose ordered via Severe Sepsis Protocol.
Cefepime	IV	Moses/Einstein: approval is exempt for oncology patients in NW 2 (Moses) and 11S (Einstein) and patients in critical care units (not stepdown patients).  Wakefield: approval is not required for the initial 72 hours.  For all campuses: approval is not required for 1st dose ordered via Severe Sepsis Protocol.
Ceftriaxone	IV	Only >2g/day requires ID/ASP approval (i.e. meningitis 2g IV q12h)
Ciprofloxacin	IV	Approval is not required for 1st dose ordered via Severe Sepsis Protocol. Patients are automatically switched to the oral formulation when able to take oral medications.
Fluconazole	IV, PO	Approval is not required for HIV patients, for prophylaxis in stem cell recipients receiving up to 400 mg/day, for 1st dose of 200 mg IV ordered for surgical prophylaxis of fresh dual kidney/pancreas transplant, and for single 150 mg PO dose for candidal vaginitis. Patients are automatically switched to the oral formulation when able to take oral medications.
Flucytosine	PO	None
Fosfomycin*	PO	None
Ganciclovir	IV	None
Itraconazole	PO	None
Ivermectin	PO	None
Levofloxacin	IV, PO	Approval is not required for oral doses ≤500 mg daily and IV formulation for prophylaxis doses in stem cell recipients. Patients are automatically switched to the oral formulation when able to take oral medications.
Oseltamivir	РО	Approval is required for influenza prophylaxis, treatment duration >5 days, or no positive lab result for influenza.
Piperacillin/tazobactam	IV	Moses/Einstein: approval is required only for patients in the Emergency Room and on Vascular Surgery.  Wakefield: approval is not required for the initial 72 hours.  For all campuses: approval is not required for 1st dose ordered via Severe Sepsis Protocol.
Ribavirin	PO	None
Tobramycin	Inhalation	Approval is not required for post lung transplant.
Vancomycin	IV, PO, Rectal	Approval is not required for the initial 72 hours of PO and IV therapy, however, approval is still required for <i>C. difficile</i> prophylaxis or any oral dose >125 mg. Approval is not required for IV therapy for peri-operative LVAD surgery prophylaxis x 48 hours.
*Nonformulary antimicrobials		V-71-17

<sup>\*</sup>Nonformulary antimicrobials

Table 4. Restricted Antimicrobial List for (CHAM Pediatrics) as of April 2021

Albendazole Oral None Amantadine Oral None Amantadine Oral None Amphotericin B Jeoxycholate Amphotericin B Ipid Complex Artesunate Artesunate Aztreonam IV None, coordination with the clinical manager Aztreonam IV One dose exception for severe sepsis.  Approvals are exempt on CHAM 9 and CHAM 10. One dose exceptions are for severe sepsis, possible meningitis, and febrile neutropenia (in ER only) Ceftarolline IV None Ceftazidime- Avibactam Ceftocaran- Carlotoxane- Carlotoxane- Cidofovir IV None Ciprofloxacin Oral, IV One dose exception for severe sepsis Clarithromycin Oral None Clarithromycin Oral None Captomycin IV None Piluconazole Oral, IV None Filuconazole Oral, IV None Ciprofloxacin Oral None Cascariet Captorioxin Oral None Ciprofloxacin Oral, IV None Ciprofloxacin Oral Oral Ciprofloxacin Oral Ciprofloxacin Oral Ciprofloxacin Oral Ciprofloxacin Oral Ciprofloxacin Oral	Table 4. Restricted Antimicrobial List for (CHAM Pediatrics) as of April 2021		
Weeks, severe sepsis and possible meningitis	ANTIMICROBIAL	ROUTE	EXEMPTIONS
Amantadine	Acyclovir	IV, oral	
Amikacin Amphotericin B IV None None Sexeption for severe sepsis Amphotericin B Ipid boxycholate IV None, coordination with the clinical manager Aztresunate IV One dose exception for severe sepsis.  Approvals are exempt on CHAM 9 and CHAM 10. One dose exceptions are for severe sepsis, possible meningitis, and febrile neutropenia (in ER only)  Ceftaroline IV None  Ceftaroline IV None  Ceftazolime-Auricatam VN None  Ceftolozane-Tazobactam IV None  Chloramphenicol IV The oral formulation is no longer made in the U.S. and is unavailable. Citofovir IV None  Clarithromycin Oral, IV One dose exception for severe sepsis  Clarithromycin Oral None  Clarithromycin IV None  Poptomycin IV None  Telucopasole Oral, IV None  Telucopasole Oral, IV None  Ganciclovir IV None  German IV One dose exception for severe sepsis  German IV One dose exception for severe sepsis  German IV None  German IV	Albendazole	Oral	None
Amphotericin B delexycholate   IV	Amantadine	Oral	None
Amphotericin B delexycholate	Amikacin	IV, IM	One dose exception for severe sepsis
Mone	Amphotericin B		
Amphotericin B lipid over a complex and the second place of the se		IV	None
Aztronam IV One dose exception for severe sepsis.  Cefepime IV Approvals are exempt on CHAM 9 and CHAM 10. One dose exceptions are for severe sepsis, possible meningitis, and febrile neutropenia (in ER only)  Ceftazidime IV None Ceftazidime IV None Ceftolozane- Iazobactam Ceftolozane- Iazobactam Colloforamphenicol IV IV None Cidofovir IV None Cidofovir IV None Cidofovir IV None Cidofovir Ciarithromycin Coral Coral Coral IV None Collosin Nebulizer Coral Collosin Nebulizer Coral Coral Coral Coral IV None Coral Co	Amphotericin B lipid	IV	None
Aztreonam IV One dose exception for severe sepsis.  Approvals are exempt on CHAM 9 and CHAM 10. One dose exceptions are for severe sepsis, possible meningitis, and febrile neutropenia (in ER only)  Ceftazidime- Avibactam IV None Ceftolozane- Iazobactam IV None Cidofovir IV None Cidofovir IV None Ciprofloxacin Oral, IV One dose exception for severe sepsis Clarithromycin Oral None Clarithromycin IV None Clarithromycin IV None Clarithromycin IV None Clostistin Nebulizer Inhalation None Conscious IV None Coral None	-	IV	None, coordination with the clinical manager
Cefepime IV Approvals are exempt on CHAM 9 and CHAM 10. One dose exceptions are for severe sepsis, possible meningitis, and febrile neutropenia (in ER only) Ceftaroline IV None Ceftacloime- Avibactam Ceftolozane- Tazobactam Chloramphenicol IV The oral formulation is no longer made in the U.S. and is unavailable. Ciclofovir IV None Clarithromycin Oral None Colistin Nebulizer Inhalation None Poscarnet IV None Tluconazole Oral, IV None Tluconazole Oral, IV None Tluconazole Oral, IV None Canciclovir IV None Coral None			
Ceftazidime- Avibactam	Cefepime		Approvals are exempt on CHAM 9 and CHAM 10. <b>One dose exceptions</b> are for severe sepsis, possible meningitis, and febrile neutropenia (in ER
Avibactam Ceftolozane- Tazobactam Chloramphenicol Cidofovir Cilorofovir Coral, IV Cone Colistin Nebulizer Coral, IV None Colistin Nebulizer Coral, IV None Cilorofovir Coral, IV None Cilorofovir Coral, IV None Coral, IV None Coral, IV Cone dose exception for severe sepsis Coral, IV None Coral, IV Cone dose exception for severe sepsis Coral, IV None Micafungin Coral	Ceftaroline	IV	None
Tazobactam    V	Ceftazidime- Avibactam	IV	None
Cidofovir   IV   None   Ciprofloxacin   Oral, IV   One dose exception for severe sepsis   Clarithromycin   Oral   None   Colistin Nebulizer   Inhalation   None   Clarithromycin   IV   None   Clarithromycin   Oral, IV   One dose exception for severe sepsis   Clarithromycin   IV   None   Clarithromycin   IV   One dose exceptions are for severe sepsis and possible meningitis	Ceftolozane- Tazobactam		
Ciprofloxacin Oral, IV One dose exception for severe sepsis Clarithromycin Oral None Colistin Nebulizer Inhalation None Cuptomycin IV None Fluconazole Oral, IV None Fluconazole Oral None Flucotosine Oral None Garaciclovir IV None Caramet Garaciclovir IV None Caraciclovir IV One dose exception for severe sepsis Ciproplication Oral, IV One dose exception for severe sepsis Ciproplication Oral, IV One dose exception for severe sepsis Ciproplication Oral, IV One dose exception for severe sepsis Ciproplication Oral, IV One dose exception for severe sepsis Ciproplication Oral, IV One dose exception for severe sepsis Ciproplication Oral, IV None Condition Oral For treatment, answer choices in the EPIC ordering set are mandatory Condition Oral For treatment, answer choices in the EPIC ordering set are mandatory Condition Oral For treatment, answer choices in the EPIC ordering set are mandatory Condition Oral For treatment, answer choices in the EPIC ordering set are mandatory Condition Oral For treatment, answer choices in the EPIC ordering set are mandatory Condition Oral For treatment, answer choices in the EPIC ordering set are mandatory Condition Oral For treatment, answer choices in the EPIC ordering set are mandatory Condition Oral For treatment, answer choices in the EPIC ordering set are mandatory Condition Oral For treatment, answer choices in the EPIC ordering set are mandatory Condition Oral For treatment, answer choices in the EPIC ordering set are mandatory Condition Oral For treatment, answer choices in the EPIC ordering set are mandatory Condition Oral For treatment, answer choices in the EPIC ordering Set are mandatory Condition Oral For treatment, answer choices in the EPIC ordering Set are mandatory Condition Oral For treatment, answer choices in the EPIC ordering Set are mandatory Condition Oral For treatment, answer choices in the EPIC ordering Set are mandatory Condition Oral For treatment, answer choices in the EPIC	Chloramphenicol	IV	The oral formulation is no longer made in the U.S. and is unavailable.
Clarithromycin Oral None Colistin Nebulizer Inhalation None Daptomycin IV None Fluconazole Oral, IV None Flucytosine Oral None Foscarnet IV None Ganciclovir IV None Ganciclovir IV None Cevofloxacin Oral, IV One dose exception for severe sepsis Cinezolid Oral, IV One dose exception for severe sepsis Cinezolid Oral, IV One dose exception for severe sepsis Cinezolid Oral, IV None Cinezolid Oral, IV One dose exception for severe sepsis Cinezolid Oral, IV One dose exception for severe sepsis Cinezolid Oral, IV One dose exception for severe sepsis Cinezolid Oral, IV None Cinezolid Oral Oral None Cinezolid Oral Oral None Cinezolid Oral Oral Oral Oral Oral Oral Oral Oral	Cidofovir	IV	None
Colistin Nebulizer Inhalation None Daptomycin IV None Fluconazole Oral, IV None Flucytosine Oral None Foscarnet IV None Ganciclovir Oral, IV One dose exception for severe sepsis Metropenem IV None Gose exception for severe sepsis Metronidazole IV None Goseltamivir Oral For treatment, answer choices in the EPIC ordering set are mandatory Palivizumab Min, IV None, must be evaluated by an ASP member from 8 a.m. – 5 p.m. Monday through Friday Pentamidine IV, inhalation None Polymyxin B IV None Ribavirin Oral, inhalation None Posaconazole Oral, IV None Remdesivir IV None Remdesivir IV None Rimantadine Oral None Figecycline IV None Valganciclovir PO None Valganciclovir IV, oral, rectal IV: One dose exceptions are for severe sepsis and possible meningitis	Ciprofloxacin	Oral, IV	One dose exception for severe sepsis
Daptomycin IV None Fluconazole Oral, IV None Flucytosine Oral None Foscarnet IV None Ganciclovir IV None  Levofloxacin Oral, IV One dose exception for severe sepsis Linezolid Oral, IV One dose exception for severe sepsis Linezolid Oral, IV One dose exception for severe sepsis Linezolid Oral, IV One dose exception for severe sepsis Linezolid Oral, IV One dose exception for severe sepsis Meropenem IV One dose exception for severe sepsis Meronidazole IV None Micafungin IV None Oseltamivir Oral For treatment, answer choices in the EPIC ordering set are mandatory Palivizumab IM, IV None, must be evaluated by an ASP member from 8 a.m. – 5 p.m. Monday through Friday Pentamidine IV, inhalation None Polymyxin B IV None Ribavirin Oral, inhalation None Posaconazole Oral, IV None Remdesivir IV None Remdesivir IV None Rimantadine Oral None Tigecycline IV None Valganciclovir PO None Valganciclovir PO None Valganciclovir IV, oral, rectal IV: One dose exceptions are for severe sepsis and possible meningitis	Clarithromycin	Oral	None
Fluconazole Oral, IV None Flucytosine Oral None Foscarnet IV None Ganciclovir IV None Levofloxacin Oral, IV One dose exception for severe sepsis Linezolid Oral, IV One dose exception for severe sepsis Linezolid Oral, IV One dose exception for severe sepsis Meropenem IV One dose exception for severe sepsis Metronidazole IV None Micafungin IV None Oseltamivir Oral For treatment, answer choices in the EPIC ordering set are mandatory Palivizumab IM, IV None, must be evaluated by an ASP member from 8 a.m. – 5 p.m. Monday through Friday Pentamidine IV, inhalation None Polymyxin B IV None Ribavirin Oral, inhalation None Posaconazole Oral, IV None Remdesivir IV None Remdesivir IV None Rimantadine Oral None Figecycline IV None Valganciclovir PO None Valganciclovir PO None Valganciclovir IV, oral, rectal IV: One dose exceptions are for severe sepsis and possible meningitis	Colistin Nebulizer	Inhalation	None
Flucytosine Oral None Foscarnet IV None Ganciclovir IV None Ganciclovir IV None Cral IV One dose exception for severe sepsis Cral IV One dose exception for severe sepsis Cral IV None Cral For treatment, answer choices in the EPIC ordering set are mandatory Cral For treatment, answer choices in the EPIC ordering set are mandatory Cral For treatment, answer choices in the EPIC ordering set are mandatory Cral For treatment, answer choices in the EPIC ordering set are mandatory Cral IV None, must be evaluated by an ASP member from 8 a.m. – 5 p.m. Cral Monday through Friday Cral IV None Cral None Cral None Cral IV None Cral None Cral None Cral IV None Cral None Cral IV None Cral None Cral IV None Cral None Cral None Cral IV Oral Recral IV None Cral IV Oral IV None Cral IV Oral	Daptomycin	IV	None
Foscarnet IV None Ganciclovir IV None Itraconazole Oral None Levofloxacin Oral, IV One dose exception for severe sepsis Linezolid Oral, IV One dose exception for severe sepsis Meropenem IV One dose exception for severe sepsis Metronidazole IV None Micafungin IV None Oseltamivir Oral For treatment, answer choices in the EPIC ordering set are mandatory Palivizumab IM, IV None, must be evaluated by an ASP member from 8 a.m. – 5 p.m. Monday through Friday Pentamidine IV, inhalation None Polymyxin B IV None Ribavirin Oral, inhalation None Posaconazole Oral, IV None Remdesivir IV None Remdesivir IV None Rimantadine Oral None Tigecycline IV None Tobramycin IV, inh, inhalation None Valganciclovir PO None Valganciclovir PO None Vancomycin IV, oral, rectal IV: One dose exceptions are for severe sepsis and possible meningitis	Fluconazole	Oral, IV	None
Sanciclovir   IV   None	Flucytosine	Oral	None
traconazole Oral None Levofloxacin Oral, IV One dose exception for severe sepsis Linezolid Oral, IV One dose exception for severe sepsis Meropenem IV One dose exception for severe sepsis Metronidazole IV None Micafungin IV None Oseltamivir Oral For treatment, answer choices in the EPIC ordering set are mandatory Palivizumab IM, IV None, must be evaluated by an ASP member from 8 a.m. – 5 p.m. Monday through Friday Pentamidine IV, inhalation None Polymyxin B IV None Ribavirin Oral, inhalation None Posaconazole Oral, IV None Remdesivir IV None Remdesivir IV None Rimantadine Oral None Tigecycline IV None Tobramycin IV, IM, inhalation None Valganciclovir PO None Vancomycin IV, oral, rectal IV: One dose exceptions are for severe sepsis and possible meningitis	Foscarnet	IV	None
Levofloxacin  Coral, IV  Cone dose exception for severe sepsis  Meropenem  IV  One dose exception for severe sepsis  Metronidazole  IV  None  Micafungin  Oral  IV  None  Oseltamivir  Palivizumab  IM, IV  Pentamidine  Polymyxin B  Ribavirin  Posaconazole  Oral, IV  None  None  Remdesivir  IV  None  None  Remdesivir  IV  None  None  Rimantadine  Oral  IV  None  None  Torteatment, answer choices in the EPIC ordering set are mandatory  None, must be evaluated by an ASP member from 8 a.m. – 5 p.m.  Monday through Friday  None  None  None  Polymyxin B  IV  None  Remdesivir  IV  None  Remdesivir  IV  None  Rimantadine  Oral  Topramycin  IV, IM, inhalation  None  Valganciclovir  PO  None  IV: One dose exceptions are for severe sepsis and possible meningitis	Ganciclovir	IV	None
Levofloxacin  Coral, IV  Cone dose exception for severe sepsis  Meropenem  IV  One dose exception for severe sepsis  Metronidazole  IV  None  Micafungin  Oral  IV  None  Oseltamivir  Palivizumab  IM, IV  Pentamidine  Polymyxin B  Ribavirin  Posaconazole  Oral, IV  None  None  Remdesivir  IV  None  None  Remdesivir  IV  None  None  Rimantadine  Oral  IV  None  None  Torteatment, answer choices in the EPIC ordering set are mandatory  None, must be evaluated by an ASP member from 8 a.m. – 5 p.m.  Monday through Friday  None  None  None  Polymyxin B  IV  None  Remdesivir  IV  None  Remdesivir  IV  None  Rimantadine  Oral  Topramycin  IV, IM, inhalation  None  Valganciclovir  PO  None  IV: One dose exceptions are for severe sepsis and possible meningitis	Itraconazole	Oral	
Linezolid  Oral, IV  One dose exception for severe sepsis  Metronidazole  IV  None  Micafungin  Oral  For treatment, answer choices in the EPIC ordering set are mandatory  Palivizumab  IM, IV  None, must be evaluated by an ASP member from 8 a.m. – 5 p.m.  Monday through Friday  Pentamidine  IV, inhalation  None  Polymyxin B  IV  None  Ribavirin  Oral, inhalation  Posaconazole  Oral, IV  None  Remdesivir  IV  None  Rimantadine  Oral  None  Tigecycline  IV, IM, inhalation  None  Valganciclovir  PO  None  IV: One dose exceptions are for severe sepsis  IV  One dose exception for severe sepsis  None  Posever sepsis  None  None  IV  None  None  IV: One dose exceptions are for severe sepsis and possible meningitis	Levofloxacin		
Meropenem IV None Metronidazole IV None Micafungin IV None Oseltamivir Oral For treatment, answer choices in the EPIC ordering set are mandatory Palivizumab IM, IV None, must be evaluated by an ASP member from 8 a.m. – 5 p.m. Monday through Friday Pentamidine IV, inhalation None Polymyxin B IV None Ribavirin Oral, inhalation None Posaconazole Oral, IV None Remdesivir IV None Rimantadine Oral None Tigecycline IV None Tobramycin IV, IM, inhalation None Valganciclovir PO None IV: One dose exceptions are for severe sepsis and possible meningitis	Linezolid	, , , , , , , , , , , , , , , , , , ,	
Metronidazole IV None Micafungin IV None Oseltamivir Oral For treatment, answer choices in the EPIC ordering set are mandatory Palivizumab IM, IV None, must be evaluated by an ASP member from 8 a.m. – 5 p.m. Monday through Friday Pentamidine IV, inhalation None Polymyxin B IV None Ribavirin Oral, inhalation None Posaconazole Oral, IV None Remdesivir IV None Rimantadine Oral None Tigecycline IV None Tobramycin IV, IM, inhalation None Valganciclovir PO None Vancomycin IV, oral, rectal IV: One dose exceptions are for severe sepsis and possible meningitis	Meropenem	, , , , , , , , , , , , , , , , , , ,	
Micafungin Oseltamivir Oral For treatment, answer choices in the EPIC ordering set are mandatory None, must be evaluated by an ASP member from 8 a.m. – 5 p.m. Monday through Friday Pentamidine IV, inhalation None Polymyxin B IV None Ribavirin Oral, inhalation None Posaconazole Oral, IV None Remdesivir IV None Rimantadine Oral None Tigecycline IV None Tobramycin Valganciclovir Vancomycin IV, oral, rectal IV: One dose exceptions are for severe sepsis and possible meningitis		IV	
Oseltamivir Palivizumab  IM, IV None, must be evaluated by an ASP member from 8 a.m. – 5 p.m. Monday through Friday  Pentamidine Polymyxin B Ribavirin Oral, inhalation Posaconazole Remdesivir Rimantadine Tigecycline Tobramycin Vancomycin Vancomycin IV, oral, rectal For treatment, answer choices in the EPIC ordering set are mandatory None, must be evaluated by an ASP member from 8 a.m. – 5 p.m. Monday through Friday  None None None None None None None Non	Micafungin		
Palivizumab  IM, IV  None, must be evaluated by an ASP member from 8 a.m. – 5 p.m. Monday through Friday  Pentamidine  IV, inhalation  None  Ribavirin  Oral, inhalation  None  Posaconazole  Oral, IV  None  Remdesivir  IV  None  Rimantadine  Oral  None  Tigecycline  IV  None  Tobramycin  Valganciclovir  Vancomycin  IV, oral, rectal  IV: One dose exceptions are for severe sepsis and possible meningitis			
Pentamidine IV, inhalation None Polymyxin B IV None Ribavirin Oral, inhalation None Posaconazole Oral, IV None Remdesivir IV None Rimantadine Oral None Tigecycline IV None Tobramycin IV, IM, inhalation None Valganciclovir PO None Vancomycin IV, oral, rectal IV: One dose exceptions are for severe sepsis and possible meningitis	Palivizumab		None, must be evaluated by an ASP member from 8 a.m. – 5 p.m.
Polymyxin B IV None Ribavirin Oral, inhalation None Posaconazole Oral, IV None Remdesivir IV None Rimantadine Oral None Tigecycline IV None Tobramycin IV, IM, inhalation None Valganciclovir PO None Vancomycin IV, oral, rectal IV: One dose exceptions are for severe sepsis and possible meningitis	Pentamidine	IV, inhalation	
Ribavirin Oral, inhalation None Posaconazole Oral, IV None Remdesivir IV None Rimantadine Oral None Tigecycline IV None Tobramycin IV, IM, inhalation None Valganciclovir PO None Vancomycin IV, oral, rectal IV: One dose exceptions are for severe sepsis and possible meningitis	Polymyxin B		
Posaconazole Oral, IV None Remdesivir IV None Rimantadine Oral None Tigecycline IV None Tobramycin IV, IM, inhalation None Valganciclovir PO None Vancomycin IV, oral, rectal IV: One dose exceptions are for severe sepsis and possible meningitis	Ribavirin	Oral, inhalation	
Remdesivir Rimantadine Oral None Tigecycline IV None Tobramycin IV, IM, inhalation Valganciclovir Vancomycin IV, oral, rectal IV: One dose exceptions are for severe sepsis and possible meningitis	Posaconazole		
Rimantadine Oral None Tigecycline IV None Tobramycin IV, IM, inhalation None Valganciclovir PO None Vancomycin IV, oral, rectal IV: One dose exceptions are for severe sepsis and possible meningitis	Remdesivir	· ·	
Tigecycline IV None Tobramycin IV, IM, inhalation None Valganciclovir PO None Vancomycin IV, oral, rectal IV: One dose exceptions are for severe sepsis and possible meningitis	Rimantadine		
Tobramycin       IV, IM, inhalation       None         Valganciclovir       PO       None         Vancomycin       IV, oral, rectal       IV: One dose exceptions are for severe sepsis and possible meningitis			
ValganciclovirPONoneVancomycinIV, oral, rectalIV: One dose exceptions are for severe sepsis and possible meningitis			
Vancomycin IV, oral, rectal IV: One dose exceptions are for severe sepsis and possible meningitis			

Table 5. Restricted Antimicrobial List for (Einstein and Wakefield NICU) as of April 2021

ANTIMICROBIAL	ROUTE	EXEMPTIONS
Acyclovir	IV	One dose exception for severe sepsis
Albendazole	Oral	None
Amantadine	Oral	None
Amikacin	IV, IM	One dose exception for severe sepsis
Amphotericin B	1) /	·
deoxycholate	IV	None
Amphotericin B lipid	IV	None
complex		None
Aztreonam	IV	None
Cefepime	IV	None
Ceftaroline	IV	None
Chloramphenicol	IV	The oral formulation is no longer made in the U.S. and is unavailable.
Cidofovir	IV	None
Ciprofloxacin	IV	One dose exception for severe sepsis
Clarithromycin	Oral	None
Daptomycin	IV	None
Fluconazole	Oral, IV	Approval is not required in neonates using doses of 3mg/kg q72h.
Flucytosine	Oral	None
Foscarnet	IV	None
Ganciclovir	IV	None
Itraconazole	Oral	None
Imipenem	IV	None
Levofloxacin	IV	One dose exception for severe sepsis
Linezolid	Oral, IV	One dose exception for severe sepsis
Meropenem	IV	One dose exception for severe sepsis
Metronidazole	IV	None
Micafungin	IV	None
Oseltamivir	Oral	For treatment, answer choices in the EPIC ordering set are mandatory
Pentamidine	IV	None
Polymyxin B	IV	None
Remdesivir	IV	None
Ribavirin	Oral, inhalation	None
Rimantadine	Oral	None
Tigecycline	IV	None
Tobramycin	IV, IM, inhalation	None
Valganciclovir	PO	None
Vancomycin	Oral, IV, rectal	IV: One dose exception for severe sepsis and possible meningitis
Voriconazole	IV, oral	None