

# Guidance notes for Non-CF tobramycin prescribing, administration & monitoring chart

## NURSING STAFF

Tobramycin is an aminoglycoside antibiotic and is prescribed, administered and monitored in exactly the same way as gentamicin. The treatment dose can be calculated using the “gentamicin” calculator or by using the formula on the back of the customised tobramycin prescription, administration and monitoring chart.

- Each dose and time for tobramycin to be given must be prescribed on the prescription section of the tobramycin chart (can be found on the NHST Antimicrobial website):

ALWAYS CHECK IF PREVIOUS DOSES OF AMINOGLYCOSIDES HAVE BEEN ADMINISTERED (e.g. in A&E, surgical prophylaxis-once only section) AND DOCUMENT ON CHART TO ENSURE COMPLETE TREATMENT RECORD

TOXICITY Before prescribing each dose check renal function	Tobramycin Prescription Record				Administration Record			Monitoring Record (samples 6-14 hours after start of infusion)			
	Date to be given	Time to be given 24 h clock	Tobramycin Dose (mg)	Prescriber's signature, name and STATUS	Date given	Time started 24 h clock	Given by	Date of sample	Time of sample 24 h clock	Tobra level (mg/L)	Action/ Comments (please initial action to be taken)
Cr = micromol/L											24 hourly <input type="checkbox"/> 36 hourly <input type="checkbox"/> 48 hourly <input type="checkbox"/> Stop <input type="checkbox"/> Details/other:
Cr = micromol/L											24 hourly <input type="checkbox"/> 36 hourly <input type="checkbox"/> 48 hourly <input type="checkbox"/> Stop <input type="checkbox"/> Details/other:
Cr = micromol/L											24 hourly <input type="checkbox"/> 36 hourly <input type="checkbox"/> 48 hourly <input type="checkbox"/> Stop <input type="checkbox"/> Details/other:

\*If antibiotic therapy is to continue beyond 3 days consider oral switch. Review microbiology results and sensitivities and prescribe targeted therapy where possible\*  
If IV therapy is still indicated discuss with ID/Micro  
\*Discuss with an infection specialist if tobramycin required for more than 72hrs\*

- Date and time of administration must be completed in the administration section of the chart by the staff member administering the dose of tobramycin. It is important to document the time tobramycin is given in order to interpret the levels of tobramycin and to calculate the time of the next dose.
- Tobramycin levels should be taken **6-14 hours** after the start of the infusion. If you know that a patient has not had a level taken then please contact a member of the medical team.
- Tobramycin must also be prescribed on HEPMA. The time, dose and dosing frequency of tobramycin will not be documented. Instead, the prescriber will prescribe the dose “as per paper chart” and not document a time for administration.

DRUG SEARCH CLINICAL DRUG INFORMATION HELP

Drug Notes ☒ Formulary ☒ Drug Conflicts ☐ Order Entry ☒ Confirmation ☒

Legend

The following orders will be added

PRN NON STOCK

TOBRAMYCIN Infusion - AS PER PAPER CHART		PRN order with no defined frequency
Dose 480 Dose	Route Intravenous Intermittent Inf...	
Frequency		
Rx on 09-Feb-2024 12:22	Stop on	
BNF Aminoglycosides	Prescriber Heather Kennedy (NMP)	

**Prescribed “As charted”** - The dose and time are not specified by the prescriber in HEPMA – this is documented on the prescribing chart

**Nursing Staff:**  
Sign for time of administration on **both** the tobramycin prescribing chart **and** HEPMA

- The date and time of administration of tobramycin must be signed for on HEPMA as well as the tobramycin chart.
- If the patient reports any adverse effects which may be considered attributable to tobramycin then please discuss with medical staff. These include:
  - new tinnitus
  - dizziness
  - poor balance
  - hearing loss
  - oscillating vision
  - decrease in urine output / oliguria
- To minimise the risk of toxicity, duration of treatment should be limited to 72 hours. All tobramycin prescriptions that continue beyond this **must** be discussed and agreed with microbiology or an infection specialist.
- If you think that a dose is due but it has not been prescribed, contact the prescriber. Ideally this should be identified during normal working hours. Do NOT administer a dose based on what is documented at the top of chart.

## Placement of Chart

The tobramycin prescription, monitoring and administration chart is a stand alone document. Please ensure that this is kept with other paper documentation relating to the patient which is easily accessible to minimise the risk of missed doses.

For further advice please contact your ward pharmacist or antimicrobial pharmacist on bleep 4732.