Ertapenem (Invanz®)

IV and IM Only

Use requires formal ID Consult

<u>Activity:</u> Coverage against many gram-negatives (including those that produce ESBL), gram-positives, and anaerobes

NOT ACTIVE against *Pseudomonas* spp., *Acinetobacter* spp., MRSA, or *Enterococcus* spp.

Criteria for Use:

Outpatient treatment of community acquired infections; outpatient settings

Unacceptable Uses:

- Caution use of ertapenem in organisms producing AmpC beta-lactamase without testing the organisms specifically against ertapenem susceptibility
- Contraindicated in patients with documented hypersensitivity to beta-lactams
- Treatment of P. aeruginosa, Acinetobacter spp., MRSA, or Enterococcus spp. Infections

Dosing in Adults:

- Standard dose: 1 gm IV or IM Q24H
- Renal dose adjustment:

CrCl < 30 mL/min: 500 mg IV or IM Q24H Hemodialysis: 500 mg IV or IM Q24H; supplemental dose of 150 mg after dialysis if last 500 mg dose given within 6 hours prior to dialysis, no supplemental dose necessary if last 500 mg dose given at least 6 hours prior to dialysis

No hepatic dose adjustment

Monitoring:

Fever, CBC, hepatic function, pulmonary function (in pneumonia)

CBC= Complete blood count; CrCl= Creatinine clearance; ESBL= Extended spectrum beta-lactamase; H= hour(s); ID= Infectious Disease; IM= Intramuscular; IV= Intravenous; MRSA= Methicillin-resistant Staphylococcus aureus; Q= every; Spp= Species