

FORMULARY UPDATES

Laura M. Blackburn, PharmD

The following medication was **ADDED** to Formulary:

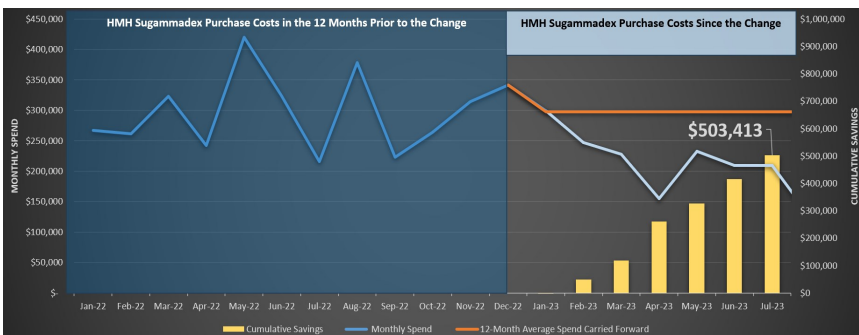
Medication	Pharmacologic Class and Indication	Considerations
Amivantamab-vmjw (RYBREVA [®])	<ul style="list-style-type: none"> Bispecific EGC receptor-directed and MET receptor-directed antibody FDA label: Treatment of adult patients with locally advanced or metastatic non-small cell lung cancer (NSCLC) with epidermal growth factor receptor (EGFR) exon 20 insertion mutations, as detected by an FDA-approved test, whose disease has progressed on or after platinum-based chemotherapy 	<ul style="list-style-type: none"> Restrictions to use: <ul style="list-style-type: none"> ⇒Hematology/ oncology physicians ⇒Outpatient setting with prior financial approval ⇒FDA-approved indication

To request a medication for formulary review, [click here](#)

PHARMACOECONOMICS UPDATES:

Sunny Bhakta, PharmD - Pharmacy Manager HMH

In 2023, HMH began a pilot program in the operative setting of providing ready-to-use syringes of the paralytic reversal agent, sugammadex (Bridion). Sugammadex's mg/kg based dosing often results in less than a full vial size per patient. By preparing smaller syringes sizes that approximate usual doses, HMH is able to reduce waste. The change is on track to eliminating ~\$1 million dollars in expenses this year without adversely impacting patient care.



Have a medication-related, cost-saving idea? [Submit your idea here](#)

The *Pharmacy & Therapeutics News* is dedicated to providing the most current information regarding medication-use policy and formulary issues. Each issue details recently approved actions from the system P&T committee as well as relevant patient safety, pharmacotherapy and drug distribution updates. Entity representatives to the system P&T committee structure can be found [here](#).

Drug Information Resources Updates

On October 1st, Houston Methodist will transition away from the Micromedex drug information platform with the exception of the Redbook and Neofax/Peds modules.

The move comes after an assessment of HM users regarding which drug information platform they most use. The survey showed that Lexicomp was the most regularly used source of drug information across a number of use cases and Micromedex was the least used platform.

The content contained within each platform, Lexicomp and Micromedex, substantially overlap thus creating an unnecessary duplication of resources.

The following links will take you to updated Lexicomp guides and self-training modules for users to gain a better understanding of the content within Lexicomp and efficiency steps to gain more proficiency with the resource.

- [Lexicomp User Academy](#)
- [Lexicomp Neonatal Content Overview](#)
- [Lexicomp Success Center](#)
- [Lexicomp Technical Support](#)



MEDSAFETY MATTERS!

Mobolaji Adeola, PharmD



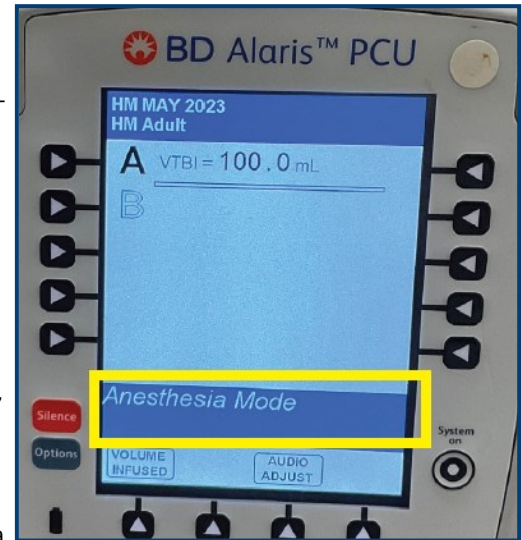
ISMP Medication Safety Newsletter Links: [Acute Care & NurseERR](#) & [Community/Ambulatory](#)

Anesthesia Mode on Smart Infusion Pumps

Anesthesia mode is a feature available on the Alaris Smart Infusion pumps for anesthesia use only. When enabled, there are anesthesia-specific drugs with concentration or dosing limits that may differ from intended use in the ICU setting. For patient safety, **anesthesia mode must be disabled when a patient is transferred from the care of anesthesia in OR/procedural area to unit and pump settings reviewed on hand-off.**

If enabled, “Anesthesia Mode” will display in a blue banner at the bottom of the pump screen. The banner display alternates with “Battery Runtime”. There are several ways to disable anesthesia mode as indicated below.

1. From system options menu: 1) Press “OPTIONS” soft key; 2) Press “Anesthesia Mode” soft key; 3) Press “Disable” soft key; 4) Press “CONFIRM” soft key.
2. If pump is disconnected from AC power (unplug pump) while in anesthesia mode, it is automatically disabled.
3. If pump is connected to AC power (plug pump in) while in anesthesia mode, a prompt will appear " AC power cord was connected. Continue ANESTHESIA MODE?" Press the “No” softkey to disable.



Once disabled, all active infusions continue at the same dose and rate. There are 3 drugs with anesthesia drug profiles to take note of as indicated in the table. Anesthesia drug profiles may have different concentration/dosing limits and are intended for anesthesia-use only. If an medication is infusing and has the suffix – ANES, the pump should be reprogrammed using the non-anesthesia profiles pursuant to a provider order.

Anesthesia Only Profile Options	Non-Anesthesia Profile Options
propofol-ANES dexmedetomidine-ANES remifentanyl-ANES	propofol dexmedetomidine remifentanyl

2023 - 2024 FLU VACCINE SEASON BEGINS

On September 5th, patients may be vaccinated under the nursing driven vaccine protocol with Flucelvax®; a “standard dose”, inactivated, four-component (quadrivalent) flu vaccine until the High-Dose (HD), four-component (quadrivalent) inactivated influenza vaccine (Fluzone®) becomes available.

When HM receives the HD Fluzone® inventory in mid-September, patients 65 years and older; and Solid Organ Transplant (SOT) recipients will default in EPIC to receive the HD vaccine (Fluzone®).

Flucelvax® is approved for patients 2 years and older and utilizes cell culture technology, not eggs, and does not contain antibiotics or preservatives.

Fluzone®, contains the same components as Flucelvax®. With the enhanced immune response promoted by the high-dose, more patients may experience mild side-effects (e.g. pain, redness or swelling at the injection site, headache, muscle ache and malaise). Communicate to patients this possibility and to remind them that these are not the symptoms of an allergic reaction and does not preclude them from receiving the vaccine in the future.

Vaccine related BPAs have been streamlined to reduce noise and promote vaccine administration to those patients meeting criteria.

Vaccinated patients should be given a Vaccine Administration Record and a Vaccine Information Statement (VIS). Link to the VIS from the HM Intranet homepage under Patient Education Info. The CDC provides translations into several languages. Note, some translations may be from a previous years (2015–2019 depending on the language). If an outdated translation is used, the English, 8/6/2021 version should also be provided.

2023-2024 Flu Vaccine Components
<ul style="list-style-type: none"> • A/Wisconsin/67/2022 (H1N1)pdm09-like virus; • A/Darwin/6/2021 (H3N2)-like virus • B/Austria/1359417/2021-like virus (B/Victoria lineage) • B/Phuket/3073/2013-like virus (B/Yamagata lineage)

ANTICOAGULATION USE SAFETY

Michael Sirimatuross, PharmD



Anticoagulation Monitoring Tab in Epic Standardized

The anticoagulation monitoring tab in Epic used by pharmacists and nurses will be updated to allow more complete assessment of information relevant to anticoagulation dosing. The update will efficiently bring necessary laboratory results into view for assessment by pharmacists and nurses at the point of order verification or administration respectively for safer patient care.

ANTIMICROBIAL STEWARDSHIP

Shivani Patel, PharmD

Daptomycin Dosing Weight in Obese Patients

The FDA-approved daptomycin dosing using actual body weight, despite limited dosing information for obese patients. Studies report alterations in daptomycin pharmacokinetics and creatine phosphokinase elevations associated with higher weight-based doses required for obese patients. Evidence now supports use of AdjBW for mg/kg dose calculations with Daptomycin in obese patients (Fox AN). Houston Methodist will adjust the default calculations in Epic for daptomycin to AdjBW in Obese patients (BMI >30).

Aminoglycoside Dosing Table

Owning the changing CSLI breakpoint requirements for determining susceptibility of pseudomonas to aminoglycosides, Houston Methodist will add a dosing guidance in Epic for providers when prescribing aminoglycosides. Of not, Amikacin and Gentamicin should NOT be used to treat pseudomonas. A slide panel in

Aminoglycoside	Recommended Empiric Loading Dose	Therapy Notes
Tobramycin	7mg/kg	-Recommend for empiric coverage of <i>Pseudomonas aeruginosa</i> or MDR Gram-negative bacilli -Tobramycin susceptibility does not predict gentamicin or amikacin susceptibility
Amikacin	15mg/kg	-Not recommended for empiric use against <i>P. aeruginosa</i> -Amikacin should NOT be used to treat non-urinary <i>P. aeruginosa</i> infections
Gentamicin	7mg/kg	-Not recommended for empiric use against <i>P. aeruginosa</i> -Gentamicin should NOT be used for the treatment of any <i>P. aeruginosa</i> infections

epic will support providers to select the correct product and dose. The optimal strategy for dosing aminoglycosides remains using higher doses at extended intervals to capitalize on the dose-dependent killing of the bacteria and the reduced risk for nephrotoxicity by allowing longer intervals without exposure to aminoglycosides.

HMH Renewed as an IDSA Center of Excellence for Antimicrobial Stewardship

Houston Methodist Hospital was recently notified that it will be renewed as a [Center of Excellence in Antimicrobial Stewardship](#). The continued recognition highlights HMH as well as the HM system's efforts to be a leader in antimicrobial stewardship. Notable initiatives highlighted in this submission cycle included incorporation of MRSA PCR testing and demonstrated reductions in vancomycin use, [pre-op antibiotic prophylaxis standardization](#), and success with reducing excessive aztreonam and eravacycline use when alternative agents could be employed.



These new initiatives build on the existing, continued programs such as rapid blood culture reviews ([Perez K. Lockwood A](#)), IV to PO conversion, and automated renal dosing adjustments. Prospective audit and feedback monitoring of targeted antibiotics have increased this year and are considered a stewardship best practice to ensure antibiotics are used in the most appropriate situation and for the most appropriate duration to avoid adverse events and the promotion of resistance.

We recognize Natalie Finch, PharmD, Wesley Hoffmann, PharmD, Judy Ikwuagwu, PharmD, William Musick, PharmD, Shivani Patel, PharmD, and M. Yasser Alsafadi, MD, for leading stewardship efforts at HMH. Importantly, the initiatives above that were recognized in the certification are applied across all Houston Methodist entities and benefit all HM patients.

NEWSLETTER STAFF

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