

Adult Amikacin Dosing²

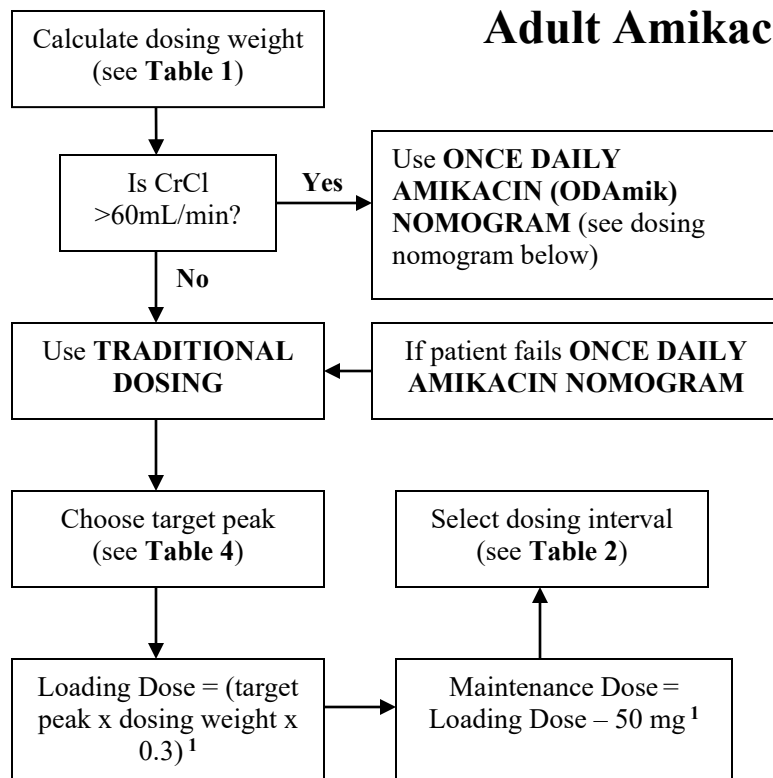


Table 1: Dosing Weight
Is patient obese? If **NO**, dosing weight = total body weight. If **YES**, calculate dosing weight below.
Dosing weight calculation:

1. Calculate lean body weight (LBW):
LBW = 2.3 (inches over 5 feet tall) + [45 (female) or 50 (male)]
2. If total body weight (TBW) is >40% above lean body weight (LBW), dosing weight = LBW + 0.4(TBW-LBW)

Table 2: Dosing Interval

CrCl (mL/min)	Dosing Interval
≥ 90	Every 8 hours
60-89	Every 12 hours
25-59	Every 24 hours
10-24	Every 48 hours
<10	Per levels
CRRT	Per levels
Hemodialysis ²	After HD

Table 3: Monitoring

Key Points About Obtaining Levels

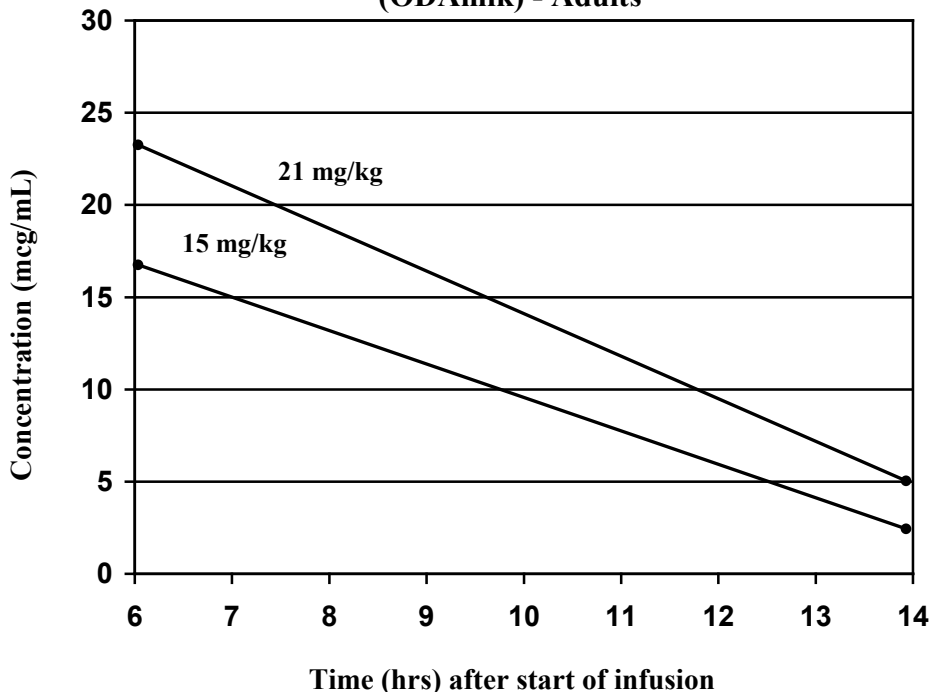
- If using **TRADITIONAL DOSING**, peak and trough concentrations should be obtained around the 4th dose (to ensure steady state). Adjust dose to reflect target peak & trough.
 - ⇒ Peak concentrations should be obtained at least 30 minutes after a 1 hour infusion.
 - ⇒ Trough concentrations should be obtained just before the next scheduled dose.
- Peaks and troughs are not necessary if dosing by **ONCE DAILY** method (use nomogram)

Alternative amikacin dosing and target concentrations for non-tuberculosis mycobacterial (NTM) infections may be required. Consult ID or CAUSE for dosing recommendations if needed.

Table 4: Target Concentrations (mcg/mL)

Indication	Target Peak	Target Trough
UTI	15-20	≤ 2-4
Pneumonia	27-30	≤ 4
Bacteremia	25-30	≤ 4
Abdominal	25-30	≤ 4
Cellulitis	25-30	≤ 2-4
Urosepsis	20-25	≤ 2-4

Once Daily Amikacin Nomogram (ODAmik) - Adults



ODAmik Nomogram Dosing

- Use total body weight unless patient is obese
- If obese, see **Table 1** above to calculate dosing weight
- Dose is **15 or 21 mg/kg q24 hours**
- Consider 15 mg/kg when pathogen MIC is known to be ≤ 4 mcg/mL or for treatment of UTI, cellulitis, or pyelonephritis

Dose Confirmation on Nomogram

- Confirmation should occur after first dose
- In place of peak & trough concentrations, follow the sequence below:
 1. Obtain random serum concentration 6-14 hours after dose
 2. Plot concentration on nomogram
 3. If below line for respective dose, continue dose
 4. If above line, use flow chart of Traditional Dosing shown above
 5. Repeat dose confirmation every 7 days and/or in the event of changes in renal function

¹ Round dose to nearest 50 mg
² Consultation with a clinical pharmacist for amikacin dosing is recommended