ID Restricted Antimicrobial Prior Authorization Process

Several formulary antimicrobial medications are locally restricted to specialty services such as infectious diseases (ID) as part of ongoing antimicrobial stewardship measures to reduce collateral effects such as the emergence of antimicrobial resistance, *C. difficle* infection, and drug associated toxicities.

Antimicrobials restricted to the ID service are available to order by house staff BUT require prior approval by ID provider/ ASP pharmacist before processing pharmacist will release the medication order.

If an order for an ID restricted agent is received without prior approval, pharmacist will make a reasonable attempt to contact prescribing provider/ ordering service.

ID/ASP Antimicrobial Approval Coverage:

- Weekdays 8 am to 4:30 pm → Contact ASP Pharmacist (pager: 415-223-8046)
- Weekdays 4:30 pm to 10 pm, Weekends, Holidays → Contact ID Fellow (pager: 415-443-5151)

Restricted agents ordered during off hours will be processed as one-time doses by pharmacy and reviewed for continuation by ID/ASP during business hours. Restricted antimicrobials may be continued when patients transfer units including antimicrobials initiated in the ICU prior to transfer.

Available Antimicrobials at SFVA

Shaded = Restricted to Infectious Diseases (ID) service
* = Restricted to indication and/or non-ID specialty service
NFDR=Pharmacy NFDR Consult required

ANTIBIOTICS
AMIKACIN SULFATE 250MG/ML INJ
AMOXICILLIN 125MG SUSP 250MG CAP/SUSP, 500MG CAP
AMOXICILLIN/CLAV 500/125MG, 875/125MG TAB
AMOXICILLIN/CLAV 400/ 57MG / 5 ML PO SUSP
AMPICILLIN 500MG, 1GM, 2GM INJ
AMPICILLIN /SULBACTAM 1.5GM, 3GM INJ
AZITHROMYCIN 250MG TAB/SUSP, 600MG TAB; 500MG INJ
AZTREONAM 1GM, 2GM INJ*SEVERE PENICILLIN-ALLERGY, OTHER USES NEED ID APPROVAL
CEFACLOR 250MG, 500MG CAP
CEFAZOLIN 1GM, 2GM INJ*ID IF DOSE > Q 8H
CEFDINIR 300MG; 600MG CAP
CEFEPIME 1GM, 2GM INJ *ICU, ED, & HEM/ONC
CEFOXITIN 1GM INJ
CEFPODOXIME PROXETIL 100MG, 200MG TAB
CEFTAROLINE FOSAMIL 600MG INJ
CEFTAZIDIME 1GM; 2GM INJ
CEFTAZIDIME/AVIBACTAM 2.5GM INJ
CEFTOLOZANE/TAZOBACTAM 1.5GM INJ
CEFTRIAXONE 250MG, 2GM, 1GM INJ
CEFUROXIME AXETIL 250MG TAB
CEFUROXIME 0.75GM, 1.5GM INJ* OPHTHAMOLOGY
CEPHALEXIN 250MG, 500MG CAP
CHLORAMPHENICOL 1GM INJ
CIPROFLOXACIN HCL 250MG, 500MG, 750MG TAB; 200MG, 400MG INJ* GI (service restrictions for inpatient use ONLY)
CIPROFLOXACIN HCL 500MG/5ML SUSP[NFDR]* GI (service restrictions for inpatient use ONLY)
CLARITHROMYCIN 500MG TAB
CLARITHROMYCIN 125 MG/ 5ML, 250MG/5ML SUSP[NFDR]
CLINDAMYCIN HCL 150MG CAP* ORAL SURG & ENT (service restrictions for Inpatient use ONLY)
CLINDAMYCIN 75MG/5ML ORAL SOLN *ORAL SURG & ENT (service restrictions for Inpatient use ONLY)
CLINDAMYCIN PHOS 150MG INJ
DALBAVANCIN 500 MG INJ [NFDR]
DAPTOMYCIN 500MG INJ
DEMECLOCYCLINE 150MG, 300MG TAB
DICLOXACILLIN 250MG CAP
DOXYCYCLINE 100MG TAB & INJ
ERAVACYCLINE 50MG INJ
ERTAPENEM 500MG, 1GM INJ
ERYTHROMYCIN BASE 250MG TAB* COLORECTAL SX PPX
ERYTHROMYCIN ES 400MG/5ML PO SUSP; 500MG, 1GM INJ
FIDAXOMICIN 200MG TAB
FOSFOMYCIN TROMETHAMINE 3GM SACHET[NFDR]
GENTAMICIN 10MG, 40 MG INJ
IMIPENEM- CILASTATIN 500MG; 1GM INJ
LEVOFLOXACIN 250MG, 500MG, 750MG TAB & INJ* HEM/ONC EXCEPT FOR PCN-ALLERGIC PTS W/CAP
LINEZOLID 600MG TAB & INJ; 100MG/5ML SUSP,ORAL
MEROPENEM 500MG, 1GM, 2GM INJ
METRONIDAZOLE 250MG, 500MG TAB; 500MG INJ
MINOCYCLINE HCL 50MG, 100MG CAP* DERM
MINOCYCLINE HCL 100MG/VIL INJ[NFDR]
MOXIFLOXACIN HCL 400MG TAB & INJ
MUPIROCIN 2% OINT
NAFCILLIN 1GM, 2GM INJ
NEOMYCIN SULFATE 500MG TAB
NITROFURANTOIN MONO/MACRO 100MG CAP
NORFLOXACIN 400MG TAB[NFDR]
OFLOXACIN 200MG, 300MG, 400MG TAB[NFDR]
PENICILLIN G BENZATHINE 1.2MU/2ML INJ
PENICILLIN G POTASSIUM 20 MU INJ
PENICILLIN G PROCAINE 1.2 MU TUBEX

PENICILLIN G SODIUM 5 MU INJ[NFDR]
PENICILLIN VK 250MG, 500MG TAB
PENICILLIN VK 125MG/5ML, 250MG/5ML SOLN
PIPERACILLIN TAZOBACTAM 2.25GM, 3.375GM, 4.5GM INJ**ICU, ED OR SINGLE PERI-PROCEDURAL DOSES*
POLYMYXIN-B 500,000U INJ
STREPTOMYCIN 1GM INJ
SULFAMETHOX/TMP 80/16MG/ML INJ
SULFAMETHOX/TMP 200/40MG/5ML SUSP
SULFAMETHOX/TMP 400/80MG; 800/160MG TAB
TETRACYCLINE HCL 250MG, 500MG CAP** H. Pylori Treatment*
TIGECYCLINE 50MG INJ
TRIMETHOPRIM 100MG TAB
TOBRAMYCIN SULFATE 40MG INJ
VANCOMYCIN HCL 125MG CAP** Outpatient restriction: NEED ID OK if dose exceeds 125MG QID X 10 days*
VANCOMYCIN HCL 1GM INJ
VANCOMYCIN HCL 25MG/ML ORAL SOLN
ANTIFUNGALS
AMPHOTERICIN B CONVENTIONAL 50MG INJ
AMPHOTERICIN B LIPOSOME 50MG INJ
FLUCONAZOLE 50MG, 100MG, 150MG, 200MG TAB
FLUCONAZOLE 10MG/ML 40MG/ML PO SUSP
FLUCONAZOLE 200MG; 400MG INJ
FLUCYTOSINE 250MG, 500MG CAP
ISAVUCONAZONIUM SULFATE 186MG ORAL CAP[NFDR]
ISAVUCONAZONIUM SULFATE 372MG INJ[NFDR]
ITRACONAZOLE 100MG CAP & 50MG/5ML ORAL SOLN
KETOCONAZOLE 200MG TAB** HEM/ONC, ENDO*
MICAFUNGIN 50MG; 100MG INJ
POSACONAZOLE 100MG EC TAB** HEM/ONC*
POSACONAZOLE 200MG/5ML ORAL SUSP
TERBINAFINE 250MG TAB
VORICONAZOLE, 50MG, 200MG TAB & 200MG INJ
VORICONAZOLE 200MG/5ML ORAL SUSP[NFDR]
ANTIRETROVIRALS
ABACAVIR/DOLUTEGRAVIR/LAMIVUDINE 600/50/300MG TAB
ABACAVIR /LAMIVUDINE 600MG/300MG TAB
ABACAVIR 100MG/5ML ORAL SOLN
ABACAVIR SULFATE 300MG TAB
ABACAVIR/LAMIVUDINE/ZIDOVUDINE 300/150/300MG TAB
ATAZANAVIR 150MG, 200MG, 300MG CAP
BICTEGRAVIR/EMTRICITABINE/TAF 50/200/25MG TAB
COBICISTAT /DARUNAVIR 150MG/800MG TAB
EMTRICITABINE/RILPIVIRINE/TDF 200/25/25/300 MGTAB
DARUNAVIR ETHANOLATE 600MG, 800MG TAB
DIDANOSINE 250MG EC CAP
DOLUTEGRAVIR 50MG TAB
DOLUTEGRAVIR/LAMIVUDINE 50MG/300MG TAB
DOLUTEGRAVIR/RILPIVIRINE 50MG/25MG TAB
DORAVIRINE 100MG TAB
EFAVIRENZ/EMTRICITABINE/TDF 600/200/300MG TAB
EFAVIRENZ /LAMIVUDINE /TDF 600/300/ 300MG TAB
EFAVIRENZ 600MG TAB
EMTRICITABINE 200MG CAP
EMTRICITABINE 200MG/TAF 25MG TAB
EMTRICITABINE 200MG/TDF 300MG TAB

ENFUVIRTIDE 90MG INJ
ETRAVIRINE 100MG, 200MG TAB
FOSAMPRENAVIR 700MG TAB
FOSTEMSAVIR 600MG TAB
LAMIVUDINE 100MG, 150MG, 300MG TAB **Liver*
LAMIVUDINE 50MG/5ML ORAL SOLN** Liver*
LAMIVUDINE 300MG/TDF 300MG TAB
LAMIVUDINE 150MG/ZIDOVUDINE 300MG TAB
LOPINAVIR 200MG/RITONAVIR 50MG TAB
MARAVIROC 150MG, 300MG TAB
NELFINAVIR MESYLATE 250MG, 625MG TAB
NEVIRAPINE 200MG TAB
EMTRICITABINE/RILPIVIRINE/TAF 200/25/25 TAB
RALTEGRAVIR 400MG, 600MG TAB
SAQUINAVIR MESYLATE 500MG TAB
STAVUDINE (d4T), 20MG, 30MG, 40MG CAP
COBICISTAT/ELVITEGR/ EMTRI/ TDF 50/150/200/300MG TAB
COBICISTAT/ DARUNAVIR/ EMT/ TAF 150/800/200/10MG TAB
TENOFOVIR ALAFENAMIDE (TAF) 25MG TAB** Liver*
TENOFOVIR DISOPROXIL FUMARATE (TDF) 300MG TAB** LIVER*
TIPRANAVIR 250MG CAP
ZIDOVUDINE 100MG CAP; 300MG TAB & 10MG/ML INJ
ANTIVIRALS
ACYCLOVIR 200MG CAP, 400MG, 800MG TAB
ACYCLOVIR 500MG, 1GM INJ
ADEFOVIR DIPIVOXIL 10MG TAB
CIDOFOVIR 75MG/ML INJ
ELBASVIR 50MG/GRAZOPREVIR 100MG TAB** LIVER*
ENTECAVIR 0.5MG, 1MG TAB** LIVER, RHEUM, HEM/ONC*
FAMCICLOVIR 125MG, 250MG, 500MG TAB** DERM*
FOSCARNET 24MG/ML INJ 250ML, 24MG/ML INJ **DERM*
GANCICLOVIR 500MG CAP[NFDR] & 500MG INJ
GLECAPREVIR 100MG /PIBRENTASVIR 40MG TAB** LIVER*
LEDIPASVIR 90MG/SOFOSBUVIR 400MG TAB** LIVER*
OSELTAMIVIR 30MG, 75MG CAP
OSELTAMIVIR 6MG/ML ORAL SUSP[NFDR]
REMDESIVIR 100MG INJ** Use > 5 days COVID ATTENDING OK*
RIBAVIRIN 200MG CAP** LIVER*
RILPIVIRINE 25MG TAB
RIMANTADINE HCL 100MG TAB
RITONAVIR 100MG TAB & 80MG/ML ORAL SOLN
SOFOSBUVIR 400MG TAB[NFDR] **LIVER*
FOSBUVIR 400MG/VELPATASVIR 100MG TAB
SOFOSBUVIR/VELPATASVIR/VOXILAPREVIR TAB **LIVER*
VALACYCLOVIR HCL 500 MG, 1GM TAB
VALGANCICLOVIR HCL 450MG TAB
ZANAMIVIR 5MG INHL
MISCELLANEOUS ANTI-INFECTIVES
ALBENDAZOLE 200MG TAB
ATOVAQUONE 750MG/5ML ORAL SUSP
ATOVAQUONE 250MG/PROGUANIL HCL 100MG TAB
BEZLOTOXUMAB 25MG/ML SOLN INJ[NFDR]
DAPSONE 25MG, 100MG TAB
CYCLOSERINE 250MG CAP
ETHAMBUTOL HCL 100MG, 400MG TAB
ETHIONAMIDE 250MG TAB
ISONIAZID 100MG, 300MG TAB & 50MG/5ML SYRUP[NFDR]

IVERMECTIN 3MG TAB[NFDR]
LACTOBACILLUS ACIDOPHILUS TAB
NITAZOXANIDE 500MG TAB[NFDR]
PENTAMIDINE ISETHIONATE 300MG/VI INJ
PYRAZINAMIDE 500MG TAB
RIFABUTIN 150MG CAP
RIFAMPIN 150MG, 300MG CAP
RIFAMPIN 600MG INJ**ONE-TIME FOR O.R. GRAFT SOAKING*
RIFAPENTINE 150MG TAB **VA LTBI CLINIC ONLY*
SULFADIAZINE 500MG TAB
VACCINES
DIPHTH/PERTUSS/TET (Tdap) (ADACEL) INJ
HAVRIX 1440 EL.U./ML VACCINE INJ 1ML
HEP B VACC RECOM(ENGERIX-B) 20MCG/ML SYR
HEP B VACC RECOM(HEPLISAV-B) 20MCG/0.5ML-- *LIVER*
HEPATITIS A&B (720/20) VACC(TWINRIX) INJ**--LIVER*
INFLUENZA VAC,QUAD RECOMBINANT(PF) 0.5ML** PATIENTS WITH SEVERE EGG ALLERGY; CONSULT RX*

INFLUENZA VAC,TRI RECOMBINANT(PF) 0.5ML**--FOR USE IN PATIENTS WITH SEVERE EGG ALLERGY; CONSULT RX*
INFLUENZA VACC AFLURIA,QUAD PF SYR 0.5ML**-- CONSULT RX for outpatient use*
INFLUENZA VACC FLUAD,QUAD,ADJ PF 0.5ML**-- PTS AT LEAST 65 YEARS OF AGE; CONSULT RX for outpatient use*
JAPANESE ENCEPHALITIS VIR VAC PF(IXIARO)[NFDR]
MEASLES/MUMPS/RUBELLA VACC(MMR II) 0.5ML
MENINGOCOCCAL B (BEXSERO) INJ SYR 0.5ML--*RESTRICTED TO ACIP RECOMMENDATION*
MENINGOCOCCAL OLIG CONJ (MENVEO) INJ
PAPILLOMA VIR 9-VAL VAC(GARDASIL 9)0.5ML
PNEUMOCOCCAL 15-VAL CONJ VAC (VAXNEUVANCE)
PNEUMOCOCCAL 20-VAL CONJ VAC(PREVNAR 20)
PNEUMOCOCCAL 23-VAL VACC (PNEUMOVAX 23)
POLIOVIRUS VACCINE INACTIVATED(IPOL)SYR
RABIES VACCINE 2.5UNT/VIL INJ,KIT
TYPHOID VACCINE LIVE (VIVOTIF) CAP
TYPHOID Vi POLYSAC TYPHIM VACC 0.5ML SYR
ZOSTER VACC RECOMBINANT (SHINGRIX) INJ