# Gentamicin in Haemodialysis

| Indication | • Empirical antibiotic with vancomycin for line sepsis (review ongoing need when culture results are available)  
• All other indications as per NHS Lothian Antimicrobial guideline |
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| Dosage and administration | 2mg/kg  
(Please use dry weight. This is particularly important in patients with oedema)  
**Do NOT use Gentamicin Calculator on the Intranet**  
Please administer via a central venous catheter or a large vein if only peripheral access is available. |
| Concentration/strength | 80mg/2ml or diluted for infusion |
| Stability | Please use reconstituted solution as soon as possible. |
| Reconstitution instructions | IV injection - to be administered over 5 minutes  
Can be given undiluted (40mg/ml) or diluted in 10-20ml of sodium chloride 0.9% or glucose 5% to aid slow bolus injection.  
**IV infusion - to be infused over 20 minutes**  
Dilute in 100ml of sodium chloride 0.9% or glucose 5% |
| Additional information | • Haemodialysis (HD) removal: Yes  
Haemodiafiltration (HDF) removal: Yes  
• Dose should be administered after dialysis  
• Monitoring: |
| | **Inpatients** | **Outpatients** |
| **Dialysis days** |  
• Take a level pre-dialysis  
• Dose to be administered if level is <3mg/l |  
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| **Non-dialysis days** |  
• Please take a level before the expected dosing time  
• Dose to be administered if level is <2mg/l |  
• Dose to be administered if level is <3mg/l |
| **Peak level after dose administration** |  
• Take a peak level **ONE HOUR AFTER** the end of dose administration  
• Target peak is 8 to 12mg/l. Please discuss dose adjustment with Renal pharmacist if target not achieved  
• No further dose change is required when two therapeutic peak levels are achieved unless clinically indicated. |  
• For **NEW** patients starting on gentamicin, a pre-dialysis level is **not** required prior to the first dose |

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Date written: January 2018  
Review date: January 2020