

Pentamidine for PJP prophylaxis							Attach patient sticker						
Allergies:			Date										
Destination:			Weight										
Frequency: every 28 days													
Reference: Sweiss K, et al. Bone Marrow Transplantation 2018; 53: 300–6.										ADMINISTRATION USE			
Month	Date	Time	Medication	Dose	Route	Instructions	Doctor Sign	Given by	Second Check	Time			
1			Pentamidine 4mg/kg	mg	IV	In 2mg/mL sodium chloride 0.9% over 3 hours							
2			Pentamidine 4mg/kg	mg	IV	In 2mg/mL sodium chloride 0.9% over 2 hours							
3			Pentamidine 4mg/kg	mg	IV	In 2mg/mL sodium chloride 0.9% over 2 hours							
4			Pentamidine 4mg/kg	mg	IV	In 2mg/mL sodium chloride 0.9% over 2 hours							
5			Pentamidine 4mg/kg	mg	IV	In 2mg/mL sodium chloride 0.9% over 2 hours							
6			Pentamidine 4mg/kg	mg	IV	In 2mg/mL sodium chloride 0.9% over 2 hours							
Please review need for pentamidine													
1			Pentamidine 4mg/kg	mg	IV	In 2mg/mL sodium chloride 0.9% over 2 hours							
2			Pentamidine 4mg/kg	mg	IV	In 2mg/mL sodium chloride 0.9% over 2 hours							
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6			Pentamidine 4mg/kg	mg	IV	In 2mg/mL sodium chloride 0.9% over 2 hours							

Rounding: Maximum dose 300mg. For lower doses round to multiples of 12mg (eg 216mg, 228mg, 240mg, 252mg, 264mg, 276mg, 288mg)

Notes: Nursing staff:

- Initial dose to be given over 3 hours, subsequent infusions may be shortened to a minimum of 2 hours dependent on tolerability. Monitor for hypotension.
- If problems with thrombophlebitis occur with peripheral line use consider slowing the infusion or running extra IV fluids via a Y site.

Medical staff:

- Review regularly to ensure pentamidine is due monthly or change to trimethoprim/sulfamethoxazole (cotrimoxazole) if neutrophil count allows.

Consultant: NZMC Reg. No: