PHARMACY IS NOT PERMITTED TO DISPENSE THIS MEDICATION UNTIL THIS FORM IS COMPLETED

Patient must be in an intensive care unit (ICU, CCU, and CSU) to receive drotrecogin

Patient must meet at least 3 of the following criteria (check all that apply):

☐ Temperature ≥38°C or ≤36°C (rectal, central catheter or tympanic measurement). If axillary temperature is used, add 0.5°C to the measured value.

☐ Heart rate ≥90 beats/min in the absence of a known medical condition that would prevent tachycardia (e.g., heart block, beta-blockers). In the presence of a known medical condition that would prevent tachycardia, the patient only has to meet 2 of the other criteria for infection.

☐ Respiratory rate ≥20 breaths/min or PaCO₂ ≤32 mmHg or mechanical ventilation for an acute process that is not related to a neuromuscular disease or the need for general anesthesia.

☐ WBC > 12,000/mm³, < 4000/mm³, or > 10% immature neutrophils (bands)

Patients must present with at least 2 of the following criteria (check all that apply):

☐ Cardiovascular organ dysfunction
  - An arterial systolic blood pressure of < 90 mmHg or a mean arterial pressure (MAP) = 70 mmHg for at least 1 hour despite adequate fluid resuscitation
  - Adequate intravascular volume status and the need for vasopressors to maintain systolic blood pressure (SBP) > 90 mmHg or MAP > 70 mmHg

☐ Renal dysfunction
  - Urine output < 0.5 ml/kg/hr for 1 hour despite adequate fluid resuscitation

☐ Respiratory dysfunction
  - Ratio of PaO₂/FiO₂ ≤ 250 in the presence of other dysfunctional organs or systems (if the lung is the only dysfunctional organ, the ratio of PaO₂/FiO₂ must be ≤ 200)

☐ Hematologic dysfunction
  - Platelet count of < 80,000/mm³ or decreased by 50% in the past 3 days

☐ Metabolic acidosis
  - pH ≤ 7.30 or base deficit ≥ 5.0 mEq/L with a plasma lactate level > 1.5 times normal

☐ Other evidence of organ dysfunction

Contraindications: Xigris® increases the risk of bleeding. Xigris® is contraindicated in patients with the following clinical conditions. None of the following conditions are present:

- Active internal bleeding
- Recent (within 3 months) hemorrhagic stroke
- Recent (within 2 months) intracranial or intraspinal surgery, or severe head trauma requiring hospitalization
- Trauma patients with increased risk of life-threatening bleeding
- Presence of an epidural catheter
- Intracranial neoplasm or mass lesion or evidence of cerebral herniation
- Patients with known hypersensitivity to drotrecogin alfa or any component of the product
- Patient weight > 135 kilogram
- Patient < 18 years old

Authorization is given to dispense a generic equivalent unless the drug is circled (according to formulary policy).

Physician’s Signature: ____________________________  Date: ____________________________

Patient Information:

Drotrecogin Alfa Activated (Xigris®)
University Hospital

UC4027 3/02
Warnings: Bleeding is the most common serious adverse effect associated with Xigris® therapy. For patients with severe sepsis who have ONE or more of the following conditions, the increased risk of bleeding should be carefully considered when deciding whether to use Xigris® therapy.
- Concurrent therapeutic heparin (≥15 units/kg/hr)
- Platelet count <30,000 x 10^9/L even if the platelet count is increased after transfusions
- Prothrombin time – INR >3.0
- Recent (within 6 weeks) gastrointestinal bleeding
- Recent administration (within 3 days) of thrombolytic therapy
- Recent administration (within 7 days) of oral anticoagulants or glycoprotein IIb/IIIa inhibitors
- Recent administration (within 7 days) of aspirin >650 mg per day or other platelet inhibitors
- Recent (within 3 months) ischemic stroke
- Known bleeding diathesis
- Chronic severe hepatic disease
- Chronic renal failure requiring hemodialysis or peritoneal dialysis

### Guidelines for Stopping the Infusion if an Invasive Procedure is Needed

<table>
<thead>
<tr>
<th>Procedure</th>
<th>Time Pre-Procedure to Stop Xigris® Infusion</th>
<th>Time Post-Procedure to Restart Xigris® Infusion</th>
</tr>
</thead>
<tbody>
<tr>
<td>Surgical Procedure*</td>
<td>2 hours prior to procedure</td>
<td>12 hours after procedure</td>
</tr>
<tr>
<td>Lumbar puncture</td>
<td>2 hours prior to procedure</td>
<td>1 hour after procedure**</td>
</tr>
<tr>
<td>Tracheostomy</td>
<td>2 hours prior to procedure</td>
<td></td>
</tr>
<tr>
<td>Chest tube insertion</td>
<td>2 hours prior to procedure</td>
<td></td>
</tr>
<tr>
<td>Thoracic drainage</td>
<td>2 hours prior to procedure</td>
<td></td>
</tr>
<tr>
<td>Sinus puncture</td>
<td>2 hours prior to procedure</td>
<td>Immediately after procedure**</td>
</tr>
<tr>
<td>Arterial catheter</td>
<td>1 hour prior to procedure</td>
<td>Immediately after procedure**</td>
</tr>
<tr>
<td>Central venous catheter</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Re-intubation (tube change)</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

*A significant surgical procedure that requires the use of an operating room, anesthesia, etc.  
**If no signs and symptoms of bleeding are present and a minimal risk of bleeding complication is expected

Dose: 24 mcg/kg/hr for no longer than 96 hours. Pharmacy to calculate dose and dispense drotrecogin alfa for 96 hours unless prescribing physician discontinues order before then.

**Patient’s weight (please fill out): _______ kg  lb (circle one)**

References:

Physician's Signature: ___________________________ Pager#: ___________________________ Date: ___________________________

Prescribing physician must be one of the following (Please check one):
☐ Pulmonologist
☐ Infectious Disease
☐ Critical Care Intensivist

Authorization is given to dispense a generic equivalent unless the drug is circled (according to formulary policy)

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