

Initial dosing guideline for cardiac surgical patients up to 1 week post-op.

Table 1. Vancomycin Starting Dose for Post-Cardiac Surgery Patients

eGFR ¹ (ml/min/1.73m ²) based on SCr within past 24 hours	Age	Initial Regimen ²	Max single dose
>75 (and surgery > 7 days ago)	<2mo	15 mg/kg IV q12h	1000 mg
	2mo -13yo	15 mg/kg IV q12h	
	>13yo	12.5 mg/kg IV q8h	
50 to 75	<2mo	10 mg/kg IV q12h	750 mg
	2mo -13yo	10 mg/kg IV q12h	
	>13yo	15 mg/kg IV q12h	
30 to 50	<2mo	10 mg/kg IV q24h	500 mg
	2mo -13yo	10 mg/kg IV 24h	
	>13yo	10 mg/kg IV q12h	
15 to 29 OR < 15/dialysis/MCS ³	<2mo	10 mg/kg IV x 1 Redose base on levels	500 mg
	2mo -13yo		
	>13yo		
1. Urine output must be evaluated as well. If UOP < 1 mL/kg/hour, but SCr/eGFR appear “good”, consider a conservative approach. 2. Consider extending dosing interval (i.e. q8h->q12h) if critical illness in ICU or worsening renal function 3. Consider Nephrology or Infectious Disease consult if eGFR <15 ml/min/1.73m ² or dialysis or ECMO			

eGFR = estimated glomerular filtration; Mechanical circulatory support; SCr = Serum creatinine