

Medication Ordering – Intermittent Infusions

Purpose

This document provides a concise reference for prescribers on how to order IV intermittent infusions in Meditech Expanse. It highlights key actions, system behaviours, and clinical considerations to support safe and efficient prescribing.

Audience

Doctors, Nurses, Clinical Pharmacists

Version Control

Version	Date	Author	Changes Made
1.0	23-Oct-2025	Le-Jhel Williams/ Justin Capati Christopher Meddings Medical Services	Initial draft

Medication Ordering - Intermittent Infusions

This guide outlines the steps for ordering IV intermittent infusions—in Meditech Expense.

Orders

CURRENT

ENTER

Add New

Favorites Sort meropen

meropenem IV INF IV INJ

meropenem [meropenem 1000 mg vial]

meropenem [meropenem 1000 mg vial] 1,000 mg IV INF EVERY 8 HOURS (P)

1,000 mg IV INF EVERY 8 HOURS SCH (P)

2,000 mg IV INF EVERY 8 HOURS SCH (P)

meropenem [meropenem 500 mg vial]

meropenem [meropenem 500 mg vial] 500 mg IV INJ EVERY 8 HOURS (P)

500 mg IV INF EVERY 8 HOURS SCH (P)

500 mg IV INJ EVERY 8 HOURS SCH (P)

Click on **Orders > Enter**

Drugs are located by generic name.

IV Intermittent strings can be identified with the pre-defined route of "IV INF"

There- strings will have a fluid attached and are rate controlled, thus will add to intake and output.

**Refer to separate tip sheet for further information on intake and output.*

Orders

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1,000 mg IV INF EVERY 8 HOURS SCH (P)

2,000 mg IV INF EVERY 8 HOURS SCH (P)

meropenem [meropenem 500 mg vial]

500 mg IV INF EVERY 8 HOURS SCH (P)

500 mg IV INJ EVERY 8 HOURS SCH (P)

Clicking on the "IV INF", applies a filter for all the strings pre-built with this route

The route can be changed by clicking the route and navigating the search pop-up.

However, if a string with IV INF is modified, then the associated fluid and requirements for infusion documentation will follow onto the MAR

Orders

CURRENT ENTER

[Add New](#)

Favorites Sort Q meropen

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meropenem [meropenem 1000 mg vial] 1,000 mg IV INF EVERY 8 HOURS P

1,000 mg IV IN EVERY 8 HOURS SCH P

2,000 mg IV INF EVERY 8 HOURS SCH P

meropenem [meropenem 500 mg vial]

500 mg IV INF EVERY 8 HOURS SCH P

meropenem [meropenem 1000 mg vial]

meropenem [meropenem 1000 mg vial] 1,000 mg IV INF EVERY 8 HOURS P

meropenem [meropenem 1000 mg vial] 1,000 mg IV INF EVERY 8 HOURS SCH P 📱

* Provider Doctor, Ex

* Source Independent

* Clinical Indication Search

Search ...

EVERY 8 HOURS

<Clear>

Show All Directions 🔍

IV intermittent infusions will have a frequency.

These can be changed by clicking the frequency and searching

metronidazole infusion IV INF

metroNIDAZOLE [metroNIDAZOLE 500 mg / 100 mL bottle] 500 mg in 100 ml IV INF TDS 200 mls/hr SCH

metroNIDAZOLE 500 mg in 100 mL infusion

metroNIDAZOLE [metroNIDAZOLE 500 mg / 100 mL bottle] 500 mg in 100 ml IV INF TDS 200 mls/hr SCH

* Provider Template, Consultant

* Source Resident Doctor

* Clinical Indication Search For Clinical Indication

For **antibiotic prescriptions**, a **clinical indication** must be selected documented prior to proceeding. If the clinical indication is not listed select **Other-Other (detail in notes)**.

meropenem IV INF IV INJ

meropenem [meropenem 1000 mg vial]

meropenem [meropenem 1000 mg vial] 1,000 mg IV INF EVERY 8 HOURS P Ordered

meropenem [meropenem 1000 mg vial] 1,000 mg IV INF EVERY 8 HOURS SCH P 📱 26/10/25 22:00

* Provider Doctor, Expanse3

* Source Independent clinician order

* Clinical Indication Resp-Pneumonia (HAP)

1,000 mg IV INF EVERY 8 HOURS SCH P

2,000 mg IV INF EVERY 8 HOURS SCH P

Click to select the drug for ordering

Click to expand the full order details.

- This is useful to view:
- Fluid and volume
 - Infusion information
 - Other clinical details

meropenem [meropenem 1000 mg vial] 1,000 mg IV INF EVERY 8 HOURS SCH

Ordered 17/10/25 14:00 - 18/10/25 23:59
 26/10/25 22:00 STOP DATE * New

* Dose 1,000
 Units mg
 * Route IV INF
 * Freq EVERY 8 HOURS
 * Sch SCH
 Monograph View
 Additional Admin Copy Admin

* Start Date Today
 * Start Time 22:00
 Stop Date
 Stop Time
 Days
 Total Doses
 Notify Add/View

IV Fluid * Volume Per Bag Units
 Sodium Chloride 0.9% [Sodium Chloride 0.9% Bag (100 ML)] 100 ml X
 * Rate 400
 * Units mls/hr

IV Fluid * Volume Per Bag Units

 sodium chloride 0.9% bag 50 mL 200 mls/hr
 glucose 5% bag 50 mL 200 mls/hr
 sodium chloride 0.9% bag (100 mL) 400 mls/hr
 glucose 5% bag (100 mL) 400 mls/hr

Here information can be changed, such as the rate of administration.

For IV Intermittent infusions, if the fluid bag is incorrect and needs amending. Click the "X" and select from the narrowed list of approved fluid bags

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* Dose 1,000
 Units mg
 * Route IV INF
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 Additional Admin Copy Admin

* Start Date Today
 * Start Time 22:00
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 Total Doses
 Notify Add/View

IV Fluid * Volume Per Bag Units
 Sodium Chloride 0.9% [Sodium Chloride 0.9% Bag (100 ML)] 100 ml X
 * Rate 400
 * Units mls/hr

The **start date/start time and stop date** can be adjusted as required.