

Baptist Memorial Hospital  
Columbus, MS  
**Physician's Orders:**  
**Eptifibatide (Integrilin)**

Date      Time      Physician's Orders- Eptifibatide (Integrilin)  
See MASTER ALLERGY sheet.

1. Dosage is based on patient weight of \_\_\_\_\_ kg and Creatinine Clearance (CrCl) \_\_\_\_\_.

**\*If has End-Stage Renal Disease (ESRD), do not use eptifibatide**

2. Bolus dose 180 mcg/kg = \_\_\_\_\_ ml of 2mg/ml eptifibatide

3. Infusion (of 0.75 mg/ml)

If CrCl > 50ml/min: 2 mcg/kg/min = \_\_\_\_\_ ml/hr

If CrCl < 50ml/min: 1 mcg/kg/min = \_\_\_\_\_ ml/hr

If ESRD: DO NOT USE

Physician's signature: \_\_\_\_\_