

CefTAZidime

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Contains a PENICILLIN-like structure

May be appropriate in penicillin-allergic patient. Refer to CUH Antimicrobial Guidelines on Eolas for further information before administration

Restricted Antimicrobial

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Form	500mg, 1g and 2g dry powder vial					
Reconstitution	Vial	IV Injection	IM Injection			
	500mg	Add 5mL WFI	Add 1.5mL WFI			
	1g	Add 10mL WFI	Add 3mL WFI			
	2g	Add 10mL WFI	N/A			
	After adding WFI (which may be pulled in by the vacuum in the vial), remove the syringe needle and shake the vial. Carbon dioxide is released and a clear, light yellow to amber solution will be obtained in 1 - 2 minutes.					
Compatibility & Stability	Sodium Chloride 0.9% Glucose 5%					
	 From a microbiological point of view, should be used immediately; however: Reconstituted vials may be stored 2–8°C for 24 hours. Prepared infusions may be stored at 2–8°C and infused (at room temperature) within 24 hours. 					
Administration	Solutions range in colour from light yellow to amber depending on concentration, diluents and storage conditions used. Product potency is not adversely affected by such colour variations. IV Injection Invert the vial. With the syringe piston depressed, insert the needle into the solution. Withdraw the total volume of solution into the syringe, ensuring needle remains in solution. Does not require further dilution. Give required dose by slow IV injection over 3 - 5 minutes. IV Infusion After reconstitution, insert a second needle to relieve internal pressure in the vial. Withdraw the required dose and dilute further in 50 - 100mL of compatible infusion fluid. Mix well and infuse over 20 - 30 minutes. IM Injection Invert the vial. With the syringe piston depressed, insert the needle into the solution. Withdraw the total volume of solution into the syringe, ensuring needle remains in solution. Does not require further dilution. Give by IM injection into a large muscle such as the gluteus or the lateral aspect of the thigh. Rotate injection sites for subsequent injections.					
Additional Information	Intramuscular administration should only be considered when the intravenous route is not possible or less appropriate for the patient. May be reconstituted with Lidocaine 0.5% or 1% for IM administration.					

Information provided relates to CefTAZidime manufactured by Wockhardt and GlaxoSmithKline.

This information has been summarised to act as a guide for those administering IV medication. The monograph should be used in conjunction with the drug data sheet and BNF for information on dose, adverse effects, cautions and contra-indications.

Further information is available from Pharmacy on 22146 or 22542