

Fosfomycin

Reserve Antimicrobial See CUH Antimicrobial Guidelines on Eolas for further information					
Form	Fosfomycin 40mg/mL powder for solution fo infusion			Store below 25°C	
Reconstitution	Vial Volume Method				
	2g	20mL	Reconstitute 2g vial with 20ml diluent removed from a 50ml infusion bag. Keep 30mL infusion bag for infusion.		
	4g	20mL	Reconstitute 4g vial with 20ml diluent removed from a 100ml infusion bag. Keep 80mL infusion bag for infusion.		
	8g	40mL	Remove and discard 50mL from 250mL bag glucose. Reconstitute 8g vial with 40ml diluent removed from the 200ml infusion bag, Keep 160mL infusion bag for infusion.		
	A slight degree of warming occurs when the powder is dissolved Dilute further before administration.				
Compatibility & Stability	Glucose 5%				
Administration	IV infusion				
	 Add the reconstituted contents of 2 g vial (20mL) into the infusion bag containing 30mL glucose (total volume 50mL) and administer over at least 15 minutes. Add the reconstituted contents of 4 g vial (20mL) into the infusion 				
	bag containing 80 mL of solvent (total volume 100mL) and				
	administer over at least 30 minutes.				
	 Add the reconstituted contents of 8 g vial (40mL) into an infusion container with further 160 mL of solvent (total volume 200mL) and administer over at least 60 minutes. 				
Monitoring	Monitor electrolytes, fluid balance, full blood count (including leucocytes).				
Extravasation	Extravasation is likely to cause tissue damage due to high osmolarity.				
Additional	Assess the risk of hypernatraemia and fluid overload, especially in patients				
information	with a history of congestive heart failure or underlying comorbidities which may make them more susceptible. Fosfomycin has a high sodium content				

Information provided relates to Fomicyt® (Infectopharm)