

Meropenem

<p style="text-align: center;">SALAD</p> <p style="text-align: center;">Contains a PENICILLIN-LIKE structure</p> <p style="text-align: center;">May be appropriate in penicillin-allergic patient. Refer to CUH Antimicrobial Guidelines on Eolas for further information before administration</p>		
<p style="text-align: center;">Reserve Antimicrobial</p> <p style="text-align: center;">See CUH Antimicrobial Guidelines on Eolas for further information</p>		
Form	500mg and 1g vials	Store vials below 25°C
Reconstitution	Add 10mL WFI to 500mg vial Add 20mL WFI to 1g vial (Fluid restricted 10mL per 1g) The solution should be shaken before use. Use immediately after reconstitution.	
Compatibility & Stability	Sodium Chloride 0.9% Glucose 5%	
Administration	IV Injection	
	Doses up to 1g can be given as IV bolus over 5 minutes. Not recommended for dose of 2g.	
	IV Infusion	
	Add required dose to 100mL of compatible infusion fluid. If adding a 2g dose to a 100mL bag, first remove 40mL from the bag and discard. Then add dose to the remaining fluid in the bag. Infusion concentration should not exceed 20mg/mL fluid. Administer over 15 - 30 minutes.	
	Fluid Restriction: 1g can be added to 50mL (first remove 20mL from 50mL bag and discard, then add 20mL reconstituted meropenem)	
Monitoring	Manufacturer advises monitor liver function – risk of hepatotoxicity	
Additional Information	Decreases in blood levels of valproic acid have been reported when it is co-administered with carbapenem agents resulting in a 60-100 % decrease in valproic acid levels in about two days. In exceptional circumstances, where treatment options are extremely limited for a patient, following discussion with Microbiology/Infectious Diseases consultant, a carbapenem may be considered the only/best available treatment option In this case, the consultant with primary responsibility for the patient may decide to proceed with carbapenem treatment for a patient on sodium valproate treatment based on a risk/benefit analysis and following consultation with a consultant neurologist Consultant neurologist advice should be sought regarding the potential requirement for adjunct anticonvulsant therapy if the indication for valproate use is seizure control, and advice on clinical monitoring and therapeutic drug monitoring of anticonvulsant drug serum concentrations	

Information provided relates to Meropenem (Fresenius Kabi)

*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*