

Piperacillin/Tazobactam

Contains a PENICILLIN		
See CUH Antimicrobial Guidelines on Eolas for further information		
Form	4.5g dry powder vial	Store below 25°C Store vials in outer carton
Reconstitution	Add 20mL WFI or sodium chloride 0.9% to 4.5g vial. Shake until dissolved. Reconstitution generally occurs within 10 minutes. To help reduce the risk of stopper fragmentation during use, it is recommended to use the following best practices: <ul style="list-style-type: none"> - Penetrate the stopper perpendicularly, avoiding any angle. - Avoid rotating the device during penetration. - Apply a steady, consistent force at a low speed. - When using an IV set, always utilize the same piercing point on the stopper. - Do not leave transfer devices or withdrawal spikes inserted into the stopper for extended periods. 	
Compatibility & Stability	Sodium Chloride 0.9% Glucose 5%	
Administration	IV Infusion Dilute reconstituted solution to a final volume of 50 or 100mL with compatible fluid. Infuse over 30 minutes. IV injection (unlicensed) Initial management of sepsis or fluid restriction: Give undiluted over at least 5 minutes. Preferably administer via a central venous access device to avoid potential venous irritation. If given peripherally, choose a large vein and monitor the injection site closely.	
Extravasation	Extravasation of undiluted preparation is likely to cause tissue damage due to the high osmolarity of the preparation.	

Information provided relates to Piperacillin/Tazobactam (Gerard, Fresenius Kabi)
Last updated 5/12/2025

*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*