

Who can administer

May be administered by registered competent doctor or nurse/midwife

Important information

- **Penicillin** antibiotic
- See under 'Dose' for adjustments required in **renal** impairment
- Cholestatic jaundice may occur up to two months after treatment. Risk factors include: duration of treatment over 2 weeks and increasing age (over 50 years)
- Contains 51mg sodium per gram

Available preparations

Floxapen 250mg vial (Actavis)

Floxapen 500mg vial (Actavis)

Flucloxacillin 1g vial (Ibigen)

Flucloxacillin 2g vial (Ibigen)

Reconstitution

Water for injection

5ml per 250mg vial

10ml per 500mg vial

20ml per 1g vial

40ml per 2g vial

Infusion fluids

Sodium Chloride 0.9% or Glucose 5%

Methods of intravenous administration

Can use either method of administration- choice depends on practicalities such as time available, fluid status of patient, etc.

Slow intravenous injection (doses up to 1 g only)

- Administer over three to four minutes

Intermittent intravenous infusion (can be used for all doses)

- Add required dose to 100ml infusion fluid and administer over twenty to thirty minutes
- A 50ml infusion may be used if required (eg fluid restriction) but the residual volume in the infusion line must be flushed through at the same rate to avoid significant underdosing

Dose in adults

Depending on the severity of the infection, 500mg to 2g, repeated every four to six hours - but see below

Empiric doses in the GAPP app ^(ref 2) **are as follows:** (note- these doses may differ from those mentioned in product literature)

| | |
|--------------------------------------|--|
| Mild cellulitis | CONSIDER ORAL flucloxacillin as per guidelines |
| Moderate to severe cellulitis | 2 g IV every six hours |
| Septic arthritis | 2 g IV every six hours |
| Necrotising fasciitis | 2 g IV every four hours |

Renal impairment ^(ref 2)

- In severe renal failure, (eGFR less than 10ml/minute/1.73m²) - usual maximum 1g every six hours, but may require 2g every six hours if recommended by Micro/ID (for example for endocarditis)

Hepatic impairment

- In patients with concomitant renal impairment- use with caution or consider lower doses (ref 2)

Monitoring

- Monitor renal function and hepatic function when using prolonged and high dose therapy

Storage

- Store below 25⁰C

References

Flucloxacillin (Ibigen) 1g vial SPC Dec 2021

1. Injectable Medicines Administration Guide Medusa, downloaded 18/05/2022
2. [GUH Antimicrobial guide 2021](#)

Therapeutic classification

Penicillin