

## Who can administer

May be administered by registered competent doctor or nurse/midwife

## Important information

- **If documented immediate, or severe delayed hypersensitivity reaction to penicillin - DO NOT GIVE THIS DRUG**
- **Reserve antimicrobial** Restricted for indications in the antimicrobial prescribing guidelines, or following approval by microbiology/infectious diseases
- See under 'Dose' for adjustments required in **renal** impairment

## Available preparations

Ceftazidime 1g vial

Ceftazidime 2g vial

Due to shortages of licensed products, these products (unlicensed) from US are kept in stock: Sagent and WG critical care

## Reconstitution

### Water for injection

10ml per 1g

10ml per 2g

## Infusion fluids

Sodium chloride 0.9% or Glucose 5%

## Methods of intravenous administration

### Intermittent intravenous infusion (may be used for all doses)

- Add required dose to 100ml and administer over 15 to 30 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

### Slow intravenous injection (doses less than 2g)

- Administer over 3 to 5 minutes

## Dose in adults

### Usual dose

- Give 1 to 2g every eight hours (elderly patient aged over 80 years, usual max 3g daily)

**Severe infections (meningitis, septicaemia, hospital-acquired pneumonia, febrile patients with**

## neutropenia)

- Give 2g every eight hours (elderly patient aged over 80 years, usual max 3g daily- but discuss with microbiology before reducing dose in severe infections)

## Complicated urinary tract infection

- Give 1 to 2g every eight to twelve hours (elderly patient aged over 80 years, usual max 3g daily)

## Cystic fibrosis

- Doses may be increased to 100 to 150mg/kg daily, in three divided doses (ie up to 9g daily)

## Renal impairment (ref 1)

eGFR (ml/minute/1.73m <sup>2</sup> )	Dose	Frequency
<b>31 to 50</b>	1 to 2g	every 12 hours
<b>16 to 30</b>	1 to 2g	every 24 hours
<b>6 to 15</b>	500mg to 1g	every 24 hours
<b>less than 5</b>	500mg to 1g	every 48 hours
<b>Renal replacement therapy</b>	Consult pharmacy or specialist literature	

## Storage

Store below 25°C

## References

SPC (Fortum) 25th Oct 2021

[1: GUH Antimicrobial Guidelines](#)

## Therapeutic classification

Cephalosporin antibiotic