

## NEONATAL MEDICATION PROTOCOLS

**CEFTAZIDIME**  
Created by: NCCU  
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NCCU Clinical Guidelines  
KEMH/PMH  
Perth, Western Australia

<b>DRUG:</b>	<b>CEFTAZIDIME</b>
<b>PRESENTATION:</b>	Vial: 1g
<b>ACTION &amp; INDICATION:</b>	Third generation cephalosporin antibiotic Used to treat infections caused by susceptible organisms with suspected resistance to other antimicrobials  Treatment of pseudomonas organisms resistant to, or as an alternative to, aminoglycosides
<b>DOSE:</b>	< 7 days 30mg/kg/dose 12 hourly ≥ 7 days 30mg/kg/dose 8 hourly  <u>Severe infection:</u> < 7 days 50mg/kg/dose 12 hourly ≥ 7 days 50mg/kg/dose 8 hourly
<b>PREPARATION:</b>	<b>Use solution prepared in Pharmacy if available</b>  Diluent: Water for Injections  Intravenous: Add 8.9mL diluent to vial = 100mg/mL  Intramuscular: Add 3mL Water for Injections or 1% lignocaine to a vial = 260mg/mL
<b>ADMINISTRATION:</b>	Intramuscular: As per NCCU policy.  Intravenous: over 3-5 minutes.
<b>ADVERSE EFFECTS:</b>	Hypersensitivity, rash  Renally excreted – reduce dose in renal impairment Colitis – colonisation with <i>C. difficile</i> . Phlebitis Angioedema Anaphylaxis  Diarrhoea  Positive Coomb's test (approx. 5% patients), which may interfere with blood cross matching
<b>COMMENTS:</b>	NB: CO <sub>2</sub> bubbles, which develop in solution, must be expelled from syringe.  Discard reconstituted solution immediately after use
<b>REFERENCES:</b>	Neofax 2012  Paediatric Pharmacopoeia 13 <sup>th</sup> Ed Royal Children's Hospital Melbourne  BNF for Children 2013  Australian Injectable Drugs Handbook 5 <sup>th</sup> Ed 2011
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