

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 500mg vial

Ceftazidime 1g vial

Ceftazidime 2g vial

Reconstitution

Water for injection

5mL per 500mg

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/1.73m²)	Dose	Frequency
31 to 50	1 to 2g	every 12 hours
16 to 30	1 to 2g	every 24 hours
6 to 15	500mg to 1g	every 24 hours
less than 5	500mg to 1g	every 48 hours
Renal replacement therapy	Consult pharmacy or specialist literature	

Storage

Store below 25°C

References

SPC (Fortum) December 2024

1: GUH Antimicrobial Guidelines

Therapeutic classification

Cephalosporin antibiotic