



REGIONAL ADULT PARENTERAL DRUG MONOGRAPH

GENERIC NAME
ceFAZolin

Effective Date: May 2013

CLASSIFICATION
Antibiotic

OTHER NAMES
Ancef

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Revised Date: March 2024

ADMINISTRATION POLICY:

IV Bolus –May be administered by a nurse

IV Intermittent - May be administered by a nurse **MINI-BAG PLUS COMPATIBLE**

IM Injection - May be administered by a nurse

RECONSTITUTION/DILUTION/ADMINISTRATION:

Available as: 1 gram and 2gram vials

Reconstitution:

Strength	Volume of sterile water for injection*	Final concentration	Final volume
1 gram	9.5 mL	100 mg/mL	10 mL
2 gram	19 mL	100 mg/mL	20 mL

IV Bolus: Further dilution not required. Administer over 3 to 5 minutes

IV Intermittent:

Administer over 30 to 60 minutes

Dose	Dose Preferred Diluent Volumes Bag size NaCl 0.9% or D5W MINI BAG PLUS COMPATIBLE
1gram	50mL or 100mL
2gram	50mL or 100mL

IM Injection: Reconstitute 1 gram vial with 2.5 mL sterile water for injection
Final concentration: 334 mg/mL Final Volume: 3mL
Administer deep IM into large muscle mass

Maximum rate: IV Bolus: 3 gram over 3 minutes
IV Intermittent: 3 gram over 30 minutes

Maximum concentration: IV: 100 mg/mL
IM: 334 mg/mL

DOSAGE:

Usual: 1 to 2 grams IV/IM every 8 hours

Maximum single dose: 3 grams

Maximum daily dose: 12 grams

STABILITY/COMPATIBILITY:

Stability of Reconstituted Solution: 24 hours at room temperature

Stability of Final Admixture: 24 hours at room temperature

Compatibility: Compatible with D5W, normal saline, combination dextrose-saline solutions, Ringer’s Lactate



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PRECAUTIONS, POTENTIAL ADVERSE REACTIONS:

- Contraindicated in patients allergic to cephalosporins
- Use cautiously in patients allergic to penicillin
- Hypersensitivity reactions including: rash, pruritus
- Local reactions including phlebitis, pain

ADDITIONAL NOTES AND NURSING CONSIDERATIONS:

- Dosage reduction is indicated in renal dysfunction.
- IM injection may be painful