



REGIONAL ADULT PARENTERAL DRUG MONOGRAPH

GENERIC NAME
cefTAZidime

Effective Date: May 2013

CLASSIFICATION
Antibiotic

OTHER NAMES
Fortaz

PAGE
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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
 Subcut - Not recommended

RECONSTITUTION/DILUTION/ADMINISTRATION:

Available as: 1 gram and 2 gram vial

Strength	Volume of sterile water for injection*	Final concentration	Final volume
1 gram	9.4 mL	100 mg/mL	10 mL
2 gram	18.8 mL	100 mg/mL	20 mL

IV Bolus: No further dilution required and administer over 3 to 5 minutes

IV Intermittent: Administer over 15 to 30 minutes

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

IM Injection: Reconstitute 1g vial with 3 mL sterile water for injection (or 1% lidocaine)
Final Volume: 3.6 mL Final Concentration: 280 mg/mL
 Administer deep IM into large muscle

Maximum rate: **IV Bolus:** 2 grams over 3 minutes
IV Intermittent: 2 grams over 15 minutes

Maximum concentration: **IV:** 100 mg/mL
IM: 280 mg/mL

DOSAGE:

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

Maximum single dose: 2 grams

Maximum daily dose: 6 grams

STABILITY/COMPATIBILITY:

Stability of Reconstituted Solution: 12 hours at room temperature

Stability of Final Admixture: 12 hours at room temperature

Compatibility: Compatible with D5W, normal saline, combination dextrose-saline solutions and Ringers Lactate



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PRECAUTIONS, POTENTIAL ADVERSE REACTIONS:

- Contraindicated in patients allergic to cephalosporins
- Use cautiously in patients allergic to penicillins
- Hypersensitivity reactions include rash, pruritus

Local reactions including phlebitis, pain

ADDITIONAL NOTES AND NURSING CONSIDERATIONS:

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