



REGIONAL ADULT PARENTERAL DRUG MONOGRAPH

GENERIC NAME
cefTRIAxone

Effective Date: May 2013

CLASSIFICATION
Antibiotic

OTHER NAMES
Rocephin

PAGE

Revised Date: Sept 2022

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ADMINISTRATION POLICY:

- IV Bolus – May be administered by a nurse
- IV Intermittent – May be administered by a nurse
- IM – May be administered by a nurse

RECONSTITUTION/DILUTION/ADMINISTRATION:

Available as: 1 gram or 2 gram vial

IV reconstitution:

Vial	Sterile water for injection	Final volume	Final concentration
1 gram	9.6 mL	10 mL	100 mg/mL
2 grams	19.2 mL	20 mL	100 mg/mL

IV Bolus: Administer undiluted over 3 to 5 minutes

IV Intermittent: Diluted in 50 or 100 mL normal saline. For fluid restricted patients dilute the dose in 20 mL normal saline
Administer over 20 to 60 minutes

IM reconstitution:

Vial	SWFI, D5W, NS, Lidocaine 1%	Final volume	Final concentration
1 gram	2.2 mL	2.8 mL	350 mg/mL
2 grams	4.4 mL	5.6 mL	350 mg/mL

Maximum Concentration: IV: 100 mg/mL
IM: 350 mg/mL

Maximum Rate: IV Bolus: over 3 minutes
IV Intermittent: over 20 minutes

DOSAGE:

Usual: 1 to 2 grams IV bolus, intermittent or IM every 12 to 24 hours

Maximum single dose: 2 grams

Maximum daily dose: 4 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, dextrose-saline combinations

PRECAUTIONS, POTENTIAL ADVERSE REACTIONS:

- GI effects: diarrhea, nausea, vomiting, abdominal pain, ↑ liver function tests
- Hypersensitivity: rash, phlebitis
- Contraindicated in patients allergic to cephalosporins
- **USE CAUTIOUSLY IN PATIENTS ALLERGIC TO PENICILLIN**



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ADDITIONAL NOTES AND NURSING CONSIDERATIONS:

- Dosage reduction is indicated in renal and liver dysfunction
- Solutions appear yellow or amber
- Incompatible with calcium. Do not give concurrently with any calcium containing solutions including Lactated Ringer and TPN. Hold calcium-containing infusions for the duration of cefTRIAxone administration and flush line with normal saline or D5W prior to and after administrations of cefTRIAxone.