

## REGIONAL ADULT PARENTERAL DRUG MONOGRAPH

GENERIC NAME

## ertapenem

PAGE

Effective Date: May14-2014 CLASSIFICATION OTHER NAMES

> Antibiotic Invanz

**Revised Date:** 

1 of 1 Review Date: Jan 12 2022

**ADMINISTRATION POLICY:** 

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

- Not recommended IV bolus Subcut - Not recommended

USE RESTRICTED TO OUTPATIENT SETTINGS (i.e. ER, ITR, Homecare Clinic) and ONLY PURSUANT TO

SPECIALIST (i.e. ID, surgery, internal medicine) CONSULT

RECONSTITUTION/DILUTION/ADMINISTRATION:

Available as: 1 gram vial

**Reconstitution:** IV: Add 10 mL normal saline. Final Concentration: 100 mg/mL

> IM: Add 3.2 mL of 1% lidocaine as a diluent

> > Final Concentration: 280 mg/mL Final volume: 3.6 mL Withdraw contents of vial for 1 gram dose. For IM use only.

MINI-BAG PLUS COMPATIBLE IV intermittent:

Dilute in 100 mL of normal saline. Administer over 30 minutes.

IM: Administer by DEEP intramuscular injection into a large muscle mass (gluteal muscle or

lateral part of thigh; avoid deltoid muscle)

**DOSAGE:** 

Usual: 1 gram daily

Maximum rate: 1 gram over 30 minutes

IV: 20 mg/mL **Maximum concentration:** 

**IM**: 280 mg/mL

Maximum single dose: 1 gram Maximum daily dose: 1 gram

STABILITY/COMPATIBILITY:

**Stability of Reconstituted Solution: IV:** 6 hours at room temperature

**IM:** use within 1 hour of reconstitution

**Stability of Final Admixture:** 6 hours at room temperature

Compatibility: Compatible with normal saline

**Incompatible** with dextrose and dextrose containing solutions

## PRECAUTIONS, POTENTIAL ADVERSE REACTIONS:

GI: abdominal pain, constipation, nausea, diarrhea, vomiting

Neuro: headache

Local: injection site pain discomfort

## ADDITIONAL NOTES AND NURSING CONSIDERATIONS:

Dosage reduction required in patients with renal impairment