Southern Sud	REGIONAL PEDIATRIC PARENTERAL DRUG MONOGRAPH						
Health	GENERIC NAME Cefotaxime						
Effective Date: Sept10-2014	CLASSIFICATION	OTHER NAMES	PAGE				
Revised Date: Jan 12 2022	Antibiotic	Claforan	1 of 2				
ADMINISTRATION POLICY:         IV bolus       - May be administered by a nurse         IV Infusion       - May be administered by a nurse         IM Injection       - May be administered by a nurse         Subcut       - May be administered by a nurse         Subcut       - Not recommended         RECONSTITUTION/DILUTION/ADMINISTRATION:         Available as:       1000 mg vial         Reconstitution:       IV: Add 9.6 mL unpreserved sterile water for injection. Shake until drug is dissolved.         Final volume: 10 mL       Final concentration: 100 mg/mL							
	<ul> <li>Add 3.6 mL unpreserved sterile water for injection. Shake until drug is dissolved. Final volume: 4 mL</li> <li>Final concentration: 250 mg/mL</li> <li>Inter concentration: 250 mg/mL</li> </ul>						
Intermittent: MI Dil	<b>NI-BAG PLUS COMPATIBLE</b> ute in normal saline and infuse over 15 to 30 minutes						
IM: Ad	minister deep into a large muscle mass						

### **DOSAGE:**

#### Neonates:

(conded)					
Post Natal Age (weight)	Less than 1200 grams	1200 to 2000 grams	Greater than 2000		
			grams		
Less than 7 days		100 mg per kg per 24	100 to 150 mg per kg per		
	100 mg per kg per 24	hours divided every 12	24 hours divided every 12		
	hours divided every 12	hours	hours		
Greater than or equal to 7	hours	150 mg per kg per 24	150 to 200 mg per kg per		
days		hours divided every 8	24hours divided every 6-8		
		hours	hours		

Children 1 month to 12 years: Meningitis:		100 to 200 mg per kg per 24 hours divided every 6 hours (maximum 8 grams in 24 hours)		
		300 mg per kg per 24 hours divided every 6 hours (maximum 12 grams in 24 hours)		
Renal Impairment:	<b>Impairment:</b> dosage adjustment required: CrCl less than 50 mL per minute per 1.73 m <sup>2</sup> , reduce dose or frequency as required			
Hepatic Impairment: no dosage adjustment required				
<b>Obesity:</b> use ideal body weight (IBW) OR adjusted body weight (AdBW = IBW + 0.3 (actual BW - IBW))				





## REGIONAL PEDIATRIC PARENTERAL DRUG MONOGRAPH

# GENERIC NAME

	corotuanne				
Effective Date: Sept10-2014	CLASSIFICATION	OTHER NAMES	PAGE		
Revised Date: Jan 12 2022	Antibiotic	Claforan	2 of 2		
Maximum concentration:	IV: 150 mg/mL IM: 330 mg/mL				
<ul> <li>DIRECT:</li> <li>INTERMITTENT: minutes</li> </ul>	Dilute to 100 mg/mL (preferred) and administer over 3-5 minutes Dilute in convenient volume of compatible IV solution, and infuse over 15-30				
<ul><li>CENTRAL, UAC:</li><li>INTRAMUSCULAR:</li></ul>	No specific considerations. Refer to DIRECT or INTERMITTENT Inject deep into a large muscle mass only (painful)				
STABILITY/COMPATIBI	LITY:				
Stability of Final Admixture	e: 12 hours at room tempera	ature / 24 hours at refrigerated temperature			
<b>Compatibility:</b> D5W1/2NS	Compatible with normal	saline, D5W, ½ normal saline, Lactated Rin	ger,		
POTENTIAL HAZARDS:					
<ul> <li>Hypersensitivity: maculopa anaphylaxis (rare)</li> <li>GI: nausea, vomiting, diarrl</li> <li>Hemat: mild reversible leuce</li> <li>Hepatic: transient elevation</li> <li>Neuro: headache, lethargy,</li> <li>Renal: transient rise in urea</li> <li>Local: phlebitis at IV site; p</li> </ul>	nea openia, granulocytopenia an s in liver function tests dizziness and serum creatinine	exfoliative dermatitis, pruritis, eosinophilia, d thrombocytopenia	fever,		
CAUTION	and impoint				

• adjust dose in patients with renal impairment

### CONTRAINDICATIONS

• allergic reactions to cephalosporin antibiotic

### **ADDITIONAL NOTES:**