REGIONAL PEDIATRIC PARENTERAL DRUG MONOGRAPH

GENERIC NAME

vancomycin

Effective Date: Nov 18 2020 **Revised Date:**	CLASSIFICATION **Antibiotic**	OTHER NAMES **Vancocin**	PAGE 1 of 2

ADMINISTRATION POLICY:

IV bolus – Not recommended
IV Infusion – May be administered by a nurse
IM Injection – Not recommended
Subcut - Not recommended

RECONSTITUTION/DILUTION/ADMINISTRATION:

Available as: 500 mg and 1000 mg single dose vial

Reconstitution: 500 mg vial with 10 mL sterile water for injection
Final Concentration: 50 mg/mL Final Volume: 10 mL

1000 mg vial with 20 mL sterile water for injection
Final Concentration: 50 mg/mL Final Volume: 20 mL

Dilution:

IV Intermittent Infusion: Dilute the dose further in a sufficient amount of compatible IV solution to a preferred final concentration of 2.5 - 5 mg/mL. Administer dose over 1-3 hours.

IV Continuous Infusion: Dilute the dose further in a sufficient amount of compatible IV solution to a preferred final concentration of 2.5 - 5 mg/mL. Administer daily over 24 hours.

Maximum IV Concentration: 5 mg/mL

Maximum IV Concentration - Fluid Restricted Patients: 10 mg/mL

DOSAGE:

Neonates:

Body Weight	Postnatal Age	Dose
Less than 1.2 kg	Less than or equal to 28 days	15 mg/kg/dose every 24 hr
1.2 kg to 2 kg	Less than 7 days	10 - 15 mg/kg/dose every 12 hr
	Greater than or equal to 7 days	10 - 15 mg/kg/dose every 8 - 12 hr
Greater than 2 kg	Less than 7 days	10 - 15 mg/kg/dose every 8 - 12 hr
	Greater than or equal to 7 days	10 - 15 mg/kg/dose every 6 - 8 hr

Infants and children: General dosing, susceptible infection: 40 - 60 mg/kg/day IV divided every 6 - 8 hr

Adolescent: 500 mg every 6-8 hr or 1000-2000 mg every 12 hr

Maximum Daily Dose: 60 mg/kg/24 hr OR 4000 mg prior to therapeutic drug monitoring

Renal Impairment: Dose adjustment for renal impairment

Maximum rate: 10 mg/minute or 60 minutes (whichever is longer)

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STABILITY/COMPATIBILITY:

Stability of reconstituted solution: 24 hours at room temperature

Stability of final admixture: 24 hours at room temperature

Compatibility: Compatible with normal saline, D5W, D10W, dextrose- saline combinations, Lactated Ringer

Caution:

- Red Man Syndrome: hypotension, nausea, feeling of warmth and tingling on upper body, tachycardia, pruritis, rash. Be prepared to decrease rate or stop infusion if syndrome occurs. If subsequent infusions are given, the rate may be reduced by 50%. May be treated with antihistamines (e.g. diphenhydramine).
- Thrombophlebitis: can be minimized by administering via CVAD but if not possible administer by a slower rate of administration, or a more dilute solution and by rotation of injection sites
- Nephrotoxicity/Ototoxicity: usually with prolonged use and/or concomitant use of aminoglycosides, other ototoxic and/or nephrotoxic agents or pre-existing auditory or renal impairment
- Hypersensitivity reactions: nausea, chills, rash, pruritis, fever
- Neutropenia: may occur with prolonged therapy (over 7 days)
- Consult pharmacy about serum level monitoring

Contraindications:

- Hypersensitivity to vancomycin or any of its components