

South Australian Neonatal Medication Guidelines

# ticarcillin-clavulanate

## ticarcillin 3g with clavulanate 100mg injection

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### Note

This guideline provides advice of a general nature. This statewide guideline has been prepared to promote and facilitate standardisation and consistency of practice, using a multidisciplinary approach. The guideline is based on a review of published evidence and expert opinion.

Information in this statewide guideline is current at the time of publication.

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Health practitioners in the South Australian public health sector are expected to review specific details of each patient and professionally assess the applicability of the relevant guideline to that clinical situation.

If for good clinical reasons, a decision is made to depart from the guideline, the responsible clinician must document in the patient's medical record, the decision made, by whom, and detailed reasons for the departure from the guideline.

This statewide guideline does not address all the elements of clinical practice and assumes that the individual clinicians are responsible for discussing care with consumers in an environment that is culturally appropriate and which enables respectful confidential discussion. This includes:

- The use of interpreter services where necessary,
- Advising consumers of their choice and ensuring informed consent is obtained,
- Providing care within scope of practice, meeting all legislative requirements and maintaining standards of professional conduct, and
- Documenting all care in accordance with mandatory and local requirements

## Dose and Indications

1gram = 1000mg

Dose according to ticarcillin content

## Infection due to susceptible organisms

### Intravenous

75mg/kg/dose

Corrected Age (weeks) [Gestational Age PLUS Postnatal Age]	Postnatal age (days)	Frequency (hours)
<30	≤ 28	Every 12 hours
	>28	Every 8 hours
30 to 36	≤ 14	Every 12 hours
	>14	Every 8 hours
37 to 44	≤ 7	Every 12 hours
	> 7	Every 8 hours

Length of treatment should be guided by pathology and clinical picture; however in proven sepsis treatment should continue for a minimum of 7 days.

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South Australian Neonatal Medication Guidelines Workgroup at:  
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**ticarcillin-clavulanate****ticarcillin 3g with clavulanate 100mg injection****Preparation and Administration****Intravenous**

There are **TWO STEPS** to this process.

**STEP ONE:** Add 13mL of Water for Injection to the vial (3000mg ticarcillin) and shake gently to dissolve (to give a total volume of 15mL). The resulting solution contains 200mg/mL ticarcillin.

**STEP TWO:** Further dilute 2mL of the 200mg/mL ticarcillin solution with 2mL of compatible fluid (to a total volume of 4mL). The resulting solution contains 100mg/mL ticarcillin.

Dose	50mg	100mg	150mg	200mg	250mg	300mg
Volume	0.5mL	1mL	1.5mL	2mL	2.5mL	3mL

Infuse over at least 30 minutes. Discard remaining solution

**Compatible Fluids**

Glucose 5%, sodium chloride 0.9%

**Adverse Effects****Common**

Diarrhoea, rash.

**Infrequent**

Bronchospasm, angioedema.

**Rare**

Black tongue, electrolyte disturbances (hypernatraemia or hypokalaemia due to sodium content of high parenteral doses), neurotoxicity, transient increases in liver enzymes and bilirubin, cholestatic jaundice, bleeding abnormalities (prolonged bleeding times and altered platelet aggregation)

Anaphylactic shock is not commonly seen in the neonates.

**Monitoring**

- > Periodic liver function tests, with prolonged treatment.
- > Observe intravenous site for extravasation.

**Practice Points**

- > Piperacillin with tazobactam is the preferred monotherapy for gastrointestinal surgical conditions
- > This is a broad spectrum antibiotic and is generally used on specialist advice.

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### Version control and change history

**PDS reference:** OCE use only

Version	Date from	Date to	Amendment
1.0	November 2012	February 2013	Original version
2.0	February 2013	Current	

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