

cephazolin

1g injection

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Synonyms

Cefazolin

Dose and Indications

1g = 1000mg

Infection due to susceptible organisms

Intravenous

25mg/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.

Preparation and Administration

Intravenous

Vial Strength (mg)	Volume of Water for Injection to add (mL)	Final Concentration of cephazolin (mg/mL)
1000mg	9.5mL	100mg/mL

Dose	25mg	50mg	75mg	100mg	125mg	150mg
Volume	0.25mL	0.5mL	0.75mL	1mL	1.25mL	1.5mL

Administer as a push over at least 3 minutes or infuse over 30 minutes

The reconstituted solution is stable for 24 hours stored under refrigeration – check with local policy about re-accessing vial for the same patient.

Compatible Fluids

Glucose 5%, glucose 10%, glucose/sodium chloride solutions, sodium chloride 0.9%

Adverse Effects

Common

Diarrhoea, vomiting, pain and inflammation at injection site, rash, *Clostridium difficile*-associated disease, superinfection

Infrequent

Neurotoxicity (seizures, encephalopathy) particularly with high doses and/or renal impairment, blood dyscrasias, (neutropenia related to dose and treatment duration, thrombocytopenia)

Anaphylactic shock is not commonly seen in the neonates

Practice Points

- > Refrigeration of reconstituted solutions may result in crystal formation
- > Solutions of cephazolin sodium reconstituted with sodium chloride 0.9% (rather than water for injection) may form crystals. For this reason, water for injection is the preferred diluent
- > The crystals can be dissolved by hand warming the vials and the clear solution will then be suitable for use.

Version control and change history

PDS reference: OCE use only

Version	Date from	Date to	Amendment
1.0	November 2012	current	Original version