**DRUG:** CEFOTAXIME

**PRESENTATION:** Vial: 1g

**ALERTS & RESTRICTIONS:** Antimicrobial Restriction: Category B ORANGE Monitored

**ACTION & INDICATION:** Third generation cephalosporin, it interferes with bacterial cell wall synthesis. For the treatment of susceptible gram negative organisms except Pseudomonas species
- Suspected meningitis
- Neonatal sepsis
- Gonococcal infection

**DOSE:**

<table>
<thead>
<tr>
<th>Postnatal Age</th>
<th>Dose</th>
<th>Frequency</th>
</tr>
</thead>
<tbody>
<tr>
<td>0-7 days</td>
<td>50 mg/kg</td>
<td>12 hourly</td>
</tr>
<tr>
<td>&gt;7-21 days</td>
<td>50 mg/kg</td>
<td>8 hourly</td>
</tr>
<tr>
<td>&gt;21 days</td>
<td>50 mg/kg</td>
<td>6 hourly</td>
</tr>
</tbody>
</table>

**PREPARATION:** IV: Use solution prepared in Pharmacy if available. If premade solution is not available, use the following process to prepare a 100mg/mL solution.
- Diluent: Water for Injections
  - Add 9.6 mL diluent to 1 g vial = 100mg/mL
- IM: Add 3.4 mL diluent to 1 g vial = 300mg/mL

**ADMINISTRATION:** IV Injection: over 3 - 5 minutes
- IM Injection: As per NCCU policy.

**ADVERSE EFFECTS:**
- Hypersensitivity, skin rashes
- Cefotaxime may result in a false-positive urine glucose test (Clinitest®) result
- Phlebitis
- Diarrhoea, leukopenia, granulocytopenia, eosinophilia

**COMMENTS:**
- Increase the dosing interval in severe renal impairment
- IV Aminoglycosides are inactivated by IV Penicillins and Cephalosporins.
- If both are prescribed, flush the line well with Sodium Chloride 0.9% before and after giving each medication.
- Discard reconstituted solution immediately after use. Cefotaxime is used instead of ceftriaxone for gram-negative septicaemia in neonates because ceftriaxone can displace bilirubin.

**REFERENCES:**
- BNF for Children 2014