

NEONATAL Medication Monograph

FLUCLOXACILLIN

This document should be read in conjunction with this **DISCLAIMER**

Unrestricted: Any prescriber may initiate treatment

| Presentation | Vial: 500mg, 1000mg | | | | | |
|----------------------|--|------------------------|--------------------|--|--|--|
| | Oral Suspension: 250mg/5mL | | | | | |
| Description | Narrow spectrum penicillin antibacterial | | | | | |
| | Flucloxacillin is stable against beta-lactamase producing staphylococci | | | | | |
| Indications | Treatment of infections caused by Staphylococcus aureus | | | | | |
| Contraindications | Hypersensitivity to penicillins | | | | | |
| Precautions | Caution in patients with hepatic impairment | | | | | |
| Dosage | <u>IV, IM:</u> | | | | | |
| | Postnatal age (days) | Dose | Dosing interval | | | |
| | 0 – 7 days | 50mg/kg/dose | 12 hourly | | | |
| | 8 – 20 days | 50mg/kg/dose | 8 hourly | | | |
| | ≥ 21 days | 50mg/kg/dose | 6 hourly | | | |
| | Doses up to 100mg/kg/dose in staphylococcal osteomyelitis, meningitis or cerebral abscess <u>Oral:</u> | | | | | |
| | Postnatal age (days) | Dose | Dosing interval | | | |
| | 0 – 7 days | 25mg/kg/dose | 12 hourly | | | |
| | 8 – 20 days | 25mg/kg/dose | 8 hourly | | | |
| | ≥ 21 days | 25mg/kg/dose | 6 hourly | | | |
| Dosage Adjustment | Dose range may be adju | usted according to sev | erity of infection | | | |

| Adverse Reactions Interactions Compatible | Common: Diarrhoea, pain and inflammation at injection site, transient increases in liver enzymes and bilirubinSerious: Black tongue, electrolyte disturbances, neurotoxicity, bleeding, blood dyscrasias, hepatic reactions, including severe cholestatic hepatitis (especially in treatment >2 weeks).Aminoglycosides, including gentamicin, should not be mixed with flucloxacillin when both drugs are given parenterally as inactivation occurs. Ensure line is adequately flushed between antibiotics.Glucose 5%, Sodium Chloride 0.9% | | | |
|--|--|--|--|--|
| Fluids | | | | |
| Preparation | IV: Step 1: Reconstitution 500mg vial Add 4.6mL of Water for Injection to 500mg vial | | | |
| | Concentration = 100mg/mL 1000mg vial Add 9.3mL of Water for Injection to 1000mg vial Concentration = 100mg/mL | | | |
| | Step 2: Dilution Take 5mL (500mg) of the above solution and make to a final volume of 10mL Concentration = 500mg/10mL = 50mg/mL | | | |
| | IM:500mg vialAdd 2.1mL of Water for Injection to 500mg vial Concentration = 200mg/mL1000mg vialAdd 9.3mL of Water for Injection to 1000mg vial Concentration = 100mg/mL | | | |
| | Oral: Note: check brand before reconstituting mixture as instructions may differ Flucil Brand® Reconstitution Add 58mL of Water for Irrigation to powder and Shake Well | | | |

| Administration | IV Infusion (preferred): Infuse over 30-60 minutes | | | |
|------------------|--|--|--|--|
| | IV Injection: May be given as an IV injection over 3-5 minutes however infusion is preferred due to increased risk of phlebitis and pain | | | |
| | IM: Inject slowly into a large muscle such as the gluteus or lateral thigh If administering a volume greater than 1mL , administer over 2 different sites to minimise pain | | | |
| | <u>Oral:</u> Give 30 minutes before feeds to improve absorption | | | |
| Monitoring | Electrolytes, Observe intravenous site for extravasations Liver function tests if on long term therapy (>14 days) | | | |
| Storage | Vial: Store at room temperature, below 25°C Oral Powder: Store at room temperature, below 25°C Once reconstituted: Refrigerate at 2 to 8°C and discard after 14 days | | | |
| Notes | 1g of flucloxacillin sodium contains 2.2mmol of sodium ions There have been reports of severe, delayed cholestatic jaundice in adults particularly after treatment for more than 2 weeks. While this has not been recognised with neonatal use, caution would be recommended in this population. | | | |
| References | Society of Hospital Pharmacists of Australia. Flucloxacillin. In: Australian Injectable Drugs Handbook [Internet]. [St Leonards, New South Wales]: Health Communication Network; 2019 [cited 2020 Ja 21]. Available from: <u>http://aidh.hcn.com.au</u> | | | |
| | Ainsworth SB. Neonatal formulary 7: drug use in pregnancy and the first year of life. Seventh ed. Chichester (West Sussex): John Wiley & Sons Inc.; 2015. p217. | | | |
| | Flucloxacillin. In British national formulary for children Joint Formulary Committee (September 2018-19) <i>BNF 74: September</i> <i>2018-19</i> . London: Pharmaceutical Press | | | |
| | Flucloxacillin In: South Australian Neonatal Medication Guidelines 2018[cited 2020 Feb 6] | | | |
| Related policies | WNHS Policy: Antimicrobial Stewardship | | | |

| Keywords: | Flucloxacillin, fluclox, staphylex, staph aureus | | | | |
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| Standards Applicable: NSQHS Standards: 1 Covernance, 3 Infection Control, 4 Medication Safety, 8 Acute Deterioration | | | | | |
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