



## ADULT MEDICATION GUIDELINE

# AMOXICILLIN + CLAVULANIC ACID

**Scope (Staff):** All WNHS Staff

**Scope (Area):** Obstetrics and Gynaecology

This document should be read in conjunction with the [Disclaimer](#).

## Quick Links

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## Restrictions

[Formulary: Restricted](#)



This is a penicillin. If the patient has a history of hypersensitivity to penicillins, confirm antibiotic choice with the treating team.

## Medication Class

Penicillin antibacterial with beta-lactamase inhibitor

## Presentation

**Tablet:** 875 mg + 125 mg

**Oral liquid:** 400 mg/ 5 mL + 57 mg/ 5 mL

**Vial:** 1 g + 200 mg (1.2 g)

(1.2 g vial contains 2.7 mmol of sodium and 1 mmol of potassium.)

## Storage

**Tablet, vial:** Store at room temperature, below 25°C, protect from light.

**Oral liquid:** Once reconstituted the suspension should be used within 7 days and stored at 2°C - 8°C.

## Dose

### Cystitis

#### Oral:

875 + 125 mg 12 hourly for 5 to 7 days.

### Pelvic Inflammatory Disease

#### Oral:

875 + 125 mg 12 hourly for 2 to 4 weeks (once on oral therapy).

### Non-severe postpartum endometritis

*For less unwell patients where oral antibiotics are deemed sufficient or for empiric step down therapy.*

#### Oral:

875 + 125 mg 12 hourly for 7 days.

### Prophylaxis for operative vaginal delivery

*To minimise neonatal exposure, only administer AFTER cord clamping.*

#### IV:

1.2 g (as a single dose) within 6 hours of delivery.

#### Oral (only if IV access not achieved):

875 + 125 mg (as a single dose) within 6 hours of delivery.

## Administration

### Oral:

To be taken immediately before food, to maximise absorption.

### IV injection:

**Step 1 reconstitution:** Reconstitute the 1.2 g vial with 20 mL of water for injections.

**Step 2 administration:** Inject SLOWLY over 3 to 4 minutes.

## Monitoring

Monitor complete blood count and renal and hepatic function during prolonged high-dose treatment (>10 days).

## Pregnancy

**1<sup>st</sup> Trimester:** Safe to use.

**2<sup>nd</sup> Trimester:** Safe to use.

**3<sup>rd</sup> Trimester:** Safe to use.

**NOTE:** Should be avoided in women with preterm rupture of membranes due to a possible increased risk of neonatal necrotising enterocolitis (NEC).  
When used for operative vaginal delivery prophylaxis, only administer AFTER cord clamping, to minimise neonatal exposure.

## Breastfeeding

Safe to use.

## Comments

This is a penicillin. If the patient has a history of hypersensitivity to penicillins, confirm antibiotic choice with the treating team.

## Related Policies, Procedures & Guidelines

### HDWA Mandatory Policies:

[Formulary one](#)

[Antimicrobial Stewardship](#)

### WNHS Clinical Practice Guidelines:

[Operative vaginal birth](#)

[Infections: Urinary tract infection in pregnant women](#)

[Gynaecology \(Non-oncological\)](#)

[Infections in obstetrics: Diagnosis and Management](#)

### WNHS Pharmaceutical and Medicines Management Guidelines:

[Medication Administration](#)

## References

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