CEFAZOLIN

Trade Name	Cefazolin-AFT				
Class	Antibiotic - first generation cephalosporin				
Mechanism of Action	Inhibition of bacterial cell wall synthesis through binding to essential proteins.				
Indications	Cardiac, upper GI, biliary, and neurological surgical antibiotic prophylaxis Likely pathogens: anaerobic bacteria, streptococci, gram-negative bacilli, entercoccus faecalis, staphyloccus aureus, coagulase negative staphylococcus				
Contraindications	Known hypersensitivity to cephazolin or other cephalosporins. Caution in patients with a known penicillin allergy.				
Supplied As	1g vial				
Dilution	Drug	Water Added 2.5mL	Final Volume 3.0mL	Concentration 330mg/mL	
	This is the maximum allowed concentration				
Dosage Interval	Prophylaxis: 50mg/kg at induction of anaesthetic Extended prophylaxis: 15mg/kg/dose Mild infection: 15mg/kg/dose Severe infection: 50mg/kg/dose Postnatal Age Interval				
		(days)	(hourly)		
	_	0-14	12		
		>14	8		
Administration	IV slow push over 3-5 minutes				
Compatible With	In solution: sodium chloride 0.9% dextrose 5% and 10% dextrose saline, ringers solution, lactated ringers. Y-site Compatibility Acyclovir, alprostadil, amikacin, aztreonam, calcium gluconate, clindamycin, enalaprilat, esmolol, famotidine, fluconazole, heparin, insulin, lidocaine, linezolid, lipid, magnesium sulfate, midazolam, milrinone, morphine, metronidazole, multivitamins, nicardipine, pancuronium bromide, potassium chloride, propofol, prostaglandin E ₁ , ranitidine, remifentanil, TPN, and vecuronium.				
	E₁, ranit	idine, remifentanil, TP	'N, and vecuroniu	ım.	
Incompatible With		idine, remifentanil, TP rone, caspofungin, cin	·		

Stability	Discard remaining solution in vial after reconstitution		
	Use a new vial for each dose		
	Vials are not designed for multidosing		
Storage	Room temperature for powder vials. Protect from light.		
Adverse Reactions	Thrombophlebitis may occur following IV injection.		
	Hypersensitivity: rashes, pruritis and fever.		
	Gastrointestinal: diarrhoea, nausea and vomiting.		
	Eosinophilia		
	Transient elevation of liver enzymes		
Metabolism	90% renally excreted as unchanged drug		
	Half life in neonates approx 3 – 5 hours.		
Comments	Modify dose in patients with severe renal impairment.		
	Sodium content = 48.3mg (2.1mmol) per gram		
	False positive direct and indirect Coombs' test results have occurred in neonates exposed to cephazolin. (Both neonatal antibiotic treatment and exposure via maternal treatment with cephalosporins have been implicated.)		
References	 Shann F., Drug Doses, 11th edition. 2001. Neofax 2005 Paediatric Dosage Handbook, 8th edition. 2001-2002. NZHPA Notes on Injectable Drugs, 5th edition. Trissel LA, Handbook on Injectable Drugs, 12th Ed, 2003 Cefazolin-AFT Data Sheet AFT Pharmaceuticals 2011 CDHB Antibiotic Guidelines ("Pink Book") 11th Ed, 2007 www.seslhd.health.nsw.gov.au 		
Updated By	A Lynn, Barbara Robertshawe June 2007 A Lynn, B Robertshawe, F Robertson May 2009 (new pumps)\ A Lynn, B Robertshawe Nov 2012 (re-order profile, discard vial) M Wallenstein, B Robertshawe, A Lynn, September 2020 (update)		