# CEFOTAXIME SODIUM INJECTION

**CEFOTAXIME SODIUM INJECTION USP (vial)**
**Sterile Cefotaxime USP**
**eq. to Cefotaxime base 250 mg**

**Indications and Usage :**

Treatment of infections of lower respiratory tract including pneumonia, urinary tract, skin and skin structures, bone and joints; treatment of bacteremia/septicemia, CNS infections, intra-abdominal infections including peritonitis, gynecological infections including pelvic inflammatory disease, endometritis and pelvic cellulitis caused by susceptible strains of specific microorganisms; perioperative prophylaxis.

**Contraindications :**

Hypersensitivity to cephalosporins.

**Dosage and Administration :**

Infection

Adults

IV/IM Up to 12 g/day in divided doses (from every 4 h for septicemia to every 12 h for uncomplicated infection) usually for 7 to 10 days. IV route is preferable for severe infections.

**Children 1 mo to 12 yr of age (weighing less than 50 kg)**

IV/IM 50 to 180 mg/kg/day in 4 to 6 divided doses.

**Children 1 mo to 12 yr of age (weighing more than 50 kg)**

Usual adult dose (max, 12 g/day).

**Infants 1 to 4 wk of age**

IV 50 mg/kg every 8 h.

**Newborns younger than 1 wk of age**

IV 50 mg/kg every 12 h.

**Gonococcal Urethritis/Cervicitis in Men and Women**

**Adults**

IM 0.5 g as single dose.

**Rectal Gonorrhea**

**Adults**

IM 0.5 g as single dose (women); 1 g as single dose (men).

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**Perioperative Prophylaxis**
**Adults**
IV/IM 1 g 30 to 90 min prior to surgery.

**Cesarean Section**
**Adults**
IV 1 g as soon as umbilical cord is clamped; second and third dose IV/IM at 6- and 12-h intervals after first dose.

**Dosage Adjustment for Renal Function Impairment**
Reduce dose 50% in patients with Ccr less than 20 mL/min.

**General Advice :**
* For IM or IV administration only. Not for intradermal, subcutaneous, or intra-arterial administration.
* IV route preferred for severe or life-threatening infections, or for patients who may be poor risks because of lowered resistance.
* Follow manufacturer's guidelines for reconstitution of sterile powder with respect to diluent volume, withdrawable volume, and approximate final concentration.
* For IM administration, reconstitute vials with sterile water for injection or bacteriostatic water for injection.
* For IV administration, reconstitute vials with at least 10 mL sterile water for injection; reconstitute infusion bottles with 50 or 100 mL sodium chloride 0.9% injection or dextrose 5% injection.
* Shake to dissolve.
* Thaw premixed frozen injection at room temperature or under refrigeration (at or below 41°F). Do not force thaw by immersion in water baths or microwave irradiation. Check container for minute leaks by squeezing container firmly. Discard container if leaks are detected. Do not use plastic containers in series connections because of risk of air embolism.
* Reconstituted or thawed solution should be clear and pale to light yellow in color. Do not use if discolored, cloudy, or contains particulate matter.
* Intermittent IV administration: solution containing 1 or 2 g cefotaxime in 10 mL sterile water for injection can be injected over a period of 3 to 5 min. Do not administer over a period of less than 3 min. Can also be administered via infusion system over longer period of time; temporarily discontinue administration of other solutions at same site during infusion of cefotaxime.
* For continuous IV infusion, add solution of cefotaxime to IV bottles containing compatible fluids (sodium chloride 0.9% injection, dextrose 5% or 10% injection, dextrose 5% and sodium chloride 0.9%, 0.45%, or 0.2% injection, Ringer's lactate solution, sodium lactate injection, invert sugar 10% solution, Travasol 8.5% amino acid injection without electrolytes.
* For IM administration. Dose of 2 g may be given if dose is divided and administered at different sites.

**Storage/Stability :**
Store vials and bottles of dry powder below 86°F. Protect from light and excessive temperature. Refer to manufacturer's guidelines for storage and stability recommendations for reconstituted solutions. Store premixed frozen injection in freezer capable of maintaining temperature of - 4°F. Thawed solution is stable for 10 days under refrigeration (at or below 41°F) or 24 h at or below 72°F. Do not refreeze thawed antibiotics.

## For Information about Generic Medicines : **genericmedicines@tajpharma.com**

**Note :** This product information is intended only for residents of the India. Taj Pharmaceuticals Limited, medicines help to treat and prevent a range of conditions—from the most common to the most challenging—for people around the world. The Price of the drugs indicated above may not match the actual price at which they are sold. Prices can change depending on many factors, including local taxes. These are only approximate indicative prices of the drug. The products discussed herein may have different product labelling in different countries. The product information provided in this site is intended only for the residents of India.

Information for Health Care Professionals

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According to the Indian Trade Mark the company owns about 450 brands and 4600 generic manufacturing permissions in India. According to the export data analysis the company was the largest exporter of generic medicines to the Europe and Middle East countries.
www.tajpharma.com

The company medicines are present in France, Georgia, Egypt and CIF countries.

Taj Pharmaceuticals Limited
Working For Healthier World™ INDIA



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