

Be Aware of Nuances With Preparing Ceftobiprole

We're getting **questions about preparing ceftobiprole medocaril (Zevtera)**...a new IV antibiotic that targets resistant *Staph* bacteria.

Ceftobiprole has been used in Europe for over a decade and is similar to ceftaroline. It's FDA-approved for *Staph* in the blood, bacterial skin infections, and community-acquired pneumonia (CAP).

But don't expect it to be added to your formulary right away.

Studies comparing ceftobiprole to ceftaroline show similar mortality and side effect rates.

And its costs and workload can be higher than ceftaroline. For example, it's typically given Q8H at \$700/day for CAP...but ceftaroline is only Q12H and \$500/day.

Know how to prep ceftobiprole in rare cases where patients have bacterial resistance...or severe side effects...to other antibiotics.

In adults, it's typically given as 667 mg Q8H for pneumonia or skin infections...and initially Q6H if there's bacteria in the blood. And kids from 3 months through 17 years will need weight-based doses.

During prep, reconstitute each 667 mg vial in 10 mL of sterile water or dextrose 5% (D5W)...NOT saline...to make a 66.7 mg/mL solution.

Shake the vial vigorously for up to 10 minutes until the solution is clear. Give your arms a break by using a vial-shaker device if your IV room has one. Wait for any foam to disappear after shaking.

Then confirm the patient's age before making your final dilution...it determines the diluent AND concentration.

For patients 12 years and up, prep a 2.67 mg/mL solution (667 mg in 250 mL, etc) in saline OR D5W. On the other hand, younger patients need 5.33 mg/mL in ONLY D5W.

Work with your pharmacists and IT to have your EHR automatically pick the right final concentration and diluent based on the patient's age to streamline compounding and prevent mix-ups.

After final dilution, gently flip over the bag or syringe 5 to 10 times to mix the drug and avoid foaming.

Then protect prepped doses from light and store in the fridge. Its room temp stability is very short...only 4 to 6 hours.

But know that ceftobiprole does NOT need light protection during admin. Ask your pharmacist to specify this in the order's instructions to clarify for nurses and limit phone calls to pharmacy.

Keep in mind that each infusion must run over 2 hours. Apply "Not for IV push" stickers to pediatric syringes to prevent rapid admin.

Check out and share our ceftobiprole quick skim graphic for a snapshot view of dosing, administration, side effects, and more.

Key References:

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