

**Recommended dosing regimens of Cefepime, produced by Kraspharma OJSC,  
in patients with normal renal function**

Indication	Daily dose regimen	Way of administration	Duration of treatment
Bacterial meningitis in children over 2 mon.	50 mg/kg every 8 hours	IV	Dependent on the pathogen: <i>N. meningitidis</i> – 4 days; <i>H. influenzae</i> – 6 days; <i>S. pneumoniae</i> – 7 days
Severe community-acquired pneumonia	Adults: 1-2 g every 12 hours +/- azithromycin 500 mg <i>or (oral route of administration is preferably)</i>	IV	7-10 days
	+/- azithromycin 500 mg	orally	3 days
	Children*: 50 mg/kg every 12 hours	IV	Not more than 5 days 7-10 days
Nosocomial pneumonia, including ventilator-associated pneumonia	Adults: 2 g every 12 hours +/- amikacin 15-20 mg/kg/day in 1-2 injections <i>If MR staphylococci suspected</i>	IV or IM	14-21 days
	+ vancomycin 500 mg every 6 hours	IV or IM	(up to 42 days in cases of pneumonia caused by <i>Pseudomonas</i> )
	Children*: 50 mg/kg every 12 hours	IV	
	+/- amikacin 15-20 mg/kg/day in 1-2 injections <i>If MR staphylococci suspected</i>	IV or IM	
	+ vancomycin 15 mg/kg every 6 hours	IV	

Intra-abdominal infections, including post-operative peritonitis	Adults: 2 g every 12 hours + metronidazole 0.5 g every 8 hours Children*: 50 mg/kg every 12 hours + metronidazole 7.5 mg/kg every 8 hours	IV or IM IV IV or IM IV	7-10 days
Gynecological infections (septic abortion, endometritis, including post-partum endometritis)	1-2 g every 12 hours + metronidazole 500 mg every 8 hours +/- doxycycline 100 mg every 12 hours	IV or IM IV or per os IV or per os	7-10 days
Acute pyelonephritis Post-operative UTI	Adults: 1-2 g every 12 hours Children*: 50 mg/kg every 12 hours	IV or IM	10-14 days
Sepsis (empiric therapy)	Adults: 2 g every 12 hours +/- amikacin 15-20 mg/kg/day in 1-2 injections <i>If a resistant Staphylococcus infection is suspected</i> + vancomycin 500 mg every 6 hours Children*: 50 mg/kg every 12 hours +/- amikacin 15-20 mg/kg/day in 1-2 injections <i>If a resistant Staphylococcus infection is suspected</i> + vancomycin 15 mg/kg every 6 hours	IV or IM IV or IM IV IV or IM IV or IM IV	10-21 days

Febrile neutropenia	Adults: 2 g every 8	IV	7-10 days, or till neutropenia is resolved
	hours +/- vancomycin	IV	
	500 mg every 6 hours		
	Children*: 50 mg/kg	IV	
	every 8 hours +/-		
	vancomycin 15 mg/kg	IV	
	every 6 hours		

\* – for children over 2 mon.