

Ceftriaxone Intramuscular Injection:

Dosing and reconstitution of vials for the preferred treatment of uncomplicated gonorrhea

Dosing

Updates to the British Columbia Gonorrhea Treatment Guidelines includes a change to the preferred treatment choice. The move toward monotherapy is driven by antibiotic stewardship and increasing rates of azithromycin resistance.

For treatment indications and alternate treatment options, refer to the BC Gonorrhea Treatment Guidelines. For Certified Practice Nurses, refer to the Gonorrhea Certified Practice Decision Support Tool.

Preferred Treatment for Uncomplicated Gonorrhea

Medication	Route	Dose	Frequency
Ceftriaxone	IM	500 mg	Single Dose

Vial Selection

- A 500 mg vial is not currently available.
- 1 g vial of ceftriaxone powder is offered on the [STI Drug Order Request form](#) and is to be used to provide the 500 mg dose. Discard remaining volume as the 1 g vial is a **single-use, preservative-free** vial.
- Alternatively, use **2** of the ceftriaxone 250 mg vials for the 500 mg dose.

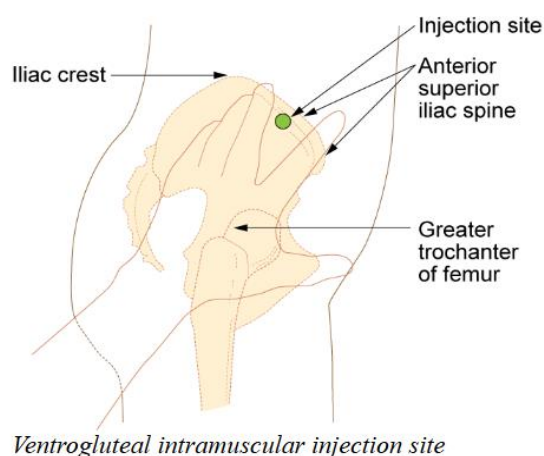
Reconstitution

Vial Size	Diluent	Diluent Volume	Approximate Available Volume	Approximate Available Volume	Amount to withdraw
1 g vial	1% lidocaine OR Sterile Water for Injection	3.3 mL	4 mL	0.25 g/mL (= 250 mg/mL)	2 mL
250 mg vial (use 2 vials)	1% lidocaine OR Sterile Water for Injection	0.9 mL per vial	1 mL per vial	0.25 g/mL (= 250 mg/mL)	1 mL from each vial (for a total dose of 2 mL)

- Reconstitute ceftriaxone powder with 1% lidocaine or Sterile Water for Injection as per table.
- Discard syringe and needle used for drawing up the diluent.
- Shake vial well until all powder is dissolved into solution.
- Withdraw reconstituted ceftriaxone to provide a 500 mg dose.
- If using a 1 g vial, discard any remaining contents of the reconstituted, single-use only vial into sharps container.
- DO NOT withdraw additional doses beyond the 500 mg dose. It is not recommended to withdraw multiple doses from a preservative-free vial.

Intramuscular Administration

- Ceftriaxone should be administered intramuscularly into the **ventrogluteal** site.
- Administer using a 1" to 1 ½" needle in order to penetrate the muscle mass.
- This muscle is accessible in the supine, prone, and side lying position.
- The left hand is used for locating the site on the right hip (shown below); the right hand is used for locating the site on the left hip
- Place heel of the hand over the greater trochanter of the client's hip with wrist almost perpendicular to the femur. Point the thumb toward the client's groin and the fingers toward the client's head. Point index finger to the anterior superior iliac spine and extend the middle finger back along the iliac crest toward the buttock. The index finger, the middle finger, and the iliac crest form a V-shaped triangle. The injection site is the centre of the triangle.



Scan the QR code to access a digital copy of this resource and the BC Gonorrhea Treatment Guidelines

