

Alternative routes of administration and preparation for Vancomycin

Usual vancomycin dose: 125mg 6 hourly (do not administer via IV route)
NB. If ileus detected: 500mg 6 hourly
Vancomycin preparation for injection is licensed for oral use.
• Reconstitute vancomycin 500mg vial with 10 ml of water for injection to give a concentration of 50 mg/ml
 Withdraw the required volume (e.g. for 125mg withdraw 2.5 ml and for 500mg withdraw 10 ml) and administer via an oral
syringe.
• This may be diluted further with 20 – 30 ml sterile water before administering.
• Vials are for single use only and any remaining volume should be disposed of immediately in accordance with the safe and secure
handling of medicine protocol
Usual vancomycin dose: 500mg 6 hourly (do not administer via IV route)
This is an unlicensed route of administration and is only recommended under the advice of Infectious Diseases/ microbiology.
 Reconstitute vancomycin 500mg vial with 10 ml of water for injection to give a concentration of 50 mg/ml
 Withdraw the total volume (10 ml) and administer via a nasogastric tube.
• This may be diluted further with 20 – 30 ml sterile water before administering.
• Flush nasogastric tube with 15 – 30 ml sterile water before and after administering vancomycin.
• Vials are for single use only and any remaining volume should be disposed of immediately in accordance with the safe and secure
handling of medicine protocol
Usual vancomycin dose: 500mg 6 hourly (do not administer via IV route)
NB. Review intra-colonic route daily and change to oral/enteral route as soon as appropriate.
This is an unlicensed route of administration and is only recommended under the advice of Infectious Diseases/microbiology.
• Reconstitute vancomycin 500mg vial with 10 ml of water for injection to give a concentration of 50 mg/ml.
• Withdraw the total volume (10 ml) and add to a 100 ml bag of sodium chloride 0.9% to give a concentration of 5 mg/ml and
distribute evenly in two 50 ml syringes.
 Lay the patient on their side and insert a lubricated, 18 – 20 gauge, short-term Foley® catheter into the rectum with care.
• Inflate the balloon with sterile water (supplied with catheter).
 Administer the vancomycin solution into the catheter (avoiding forceful administration).
• Securely plug the Foley® catheter with a green catheter plug (spigot for catheters).
 Deflate the catheter balloon after 60 minutes dwell time is completed.
Remove and discard Foley® catheter and contents via patient commode.
 Vials are for single use only and any remaining volume should be disposed of immediately in accordance with the safe and secure
handling of medicines protocol

Advice for Patients with Swallowing Difficulties prescribed Fidaxomicin

Administration via oral or NG route (unable to swallow fidaxomicin tablets but able to swallow liquids or administration via NG tube)

For patients with swallowing difficulties:

Fidaxomicin tablets can be crushed and mixed with water for oral or NG administration or mixed with apple sauce for oral administration (unlicensed). Ongoing advice regarding crushing or mixing tablets depends on the food and fluid the patient is able to swallow safely.

Adapted with kind permission from GGC Antimicrobial Utilisation Committee Guidance

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