

## Digoxin

<b>CAUTION: High Administration Risk Rating</b>	
<b>Form</b>	500 micrograms per 2mL ampoule
<b>Reconstitution</b>	Already in solution <ul style="list-style-type: none"> <li>• <b>Draw up using a 5 micron filter needle</b></li> <li>• <b>Use gloves when opening ampoules</b></li> </ul>
<b>Compatibility &amp; Stability</b>	Sodium Chloride 0.9% Glucose 5%
<b>Administration</b>	<p><b>IV Infusion</b> Add required dose to 50 - 100mL infusion fluid. (Maximum concentration of 62.5 micrograms/mL). Digoxin has a high osmolarity and may cause venous irritation and tissue damage in cases of extravasation. If a central venous access device is unavailable, administer via a large peripheral vein monitoring insertion site closely.</p> <p><b>Loading dose</b> As a single dose: Infuse over at least 2 hours.</p> <p>As divided doses: Give half the total dose as the first dose and further fractions (e.g. 25%, 25%) of the total dose at intervals of 4 - 8 hours. Give each dose over a minimum of 20 minutes.</p> <p><b>Maintenance dose</b> Infuse over at least 2 hours.</p>
<b>Antidote</b>	An antidote (Digifab) is available for suspected toxicity, information can be obtained via TOXBASE.
<b>Monitoring</b>	<ul style="list-style-type: none"> <li>• Digoxin therapeutic drug monitoring: Take the sample at least six hours after the dose.</li> <li>• Monitor heart rate, blood pressure and ECG.</li> <li>• Monitor serum K<sup>+</sup></li> </ul>
<b>Extravasation</b>	Extravasation is likely to cause tissue damage.
<b>Additional Information</b>	<ul style="list-style-type: none"> <li>• Dose needs to be reduced by 33% when converting from the oral to IV route.</li> <li>• IM and SC routes should not be used as absorption is erratic and can cause severe local irritation.</li> <li>• Digoxin is often administered as a <b>loading dose</b> followed by a smaller <b>maintenance dose</b>.</li> </ul>

**Information provided relates to Lanoxin® manufactured by Aspen.**

*This information has been summarised to act as a guide for those administering IV medication. The monograph should be used in conjunction with the drug data sheet and BNF for information on dose, adverse effects, cautions and contra-indications. Further information is available from Pharmacy on 22146 or 22542*