Digoxin

CAUTION: High Administration Risk Rating	
Form	500 micrograms per 2mL ampoule
Reconstitution	Already in solution
Compatibility & Stability	Sodium Chloride 0.9% Glucose 5%
Administration	**IV Infusion** 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. **Loading dose** As a single dose: Infuse over at least 2 hours. 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. **Maintenance dose** Infuse over at least 2 hours.
Antidote	An antidote (Digifab) is available for suspected toxicity, information can be obtained via TOXBASE.
Monitoring	• Digoxin therapeutic drug monitoring: Take the sample at least six hours after the dose. • Monitor heart rate, blood pressure and ECG. • Monitor serum K^+
Extravasation	Extravasation is likely to cause tissue damage.
Additional Information	• Dose needs to be reduced by 33% when converting from the oral to IV route. • IM and SC routes should not be used as absorption is erratic and can cause severe local irritation. • Digoxin is often administered as a **loading dose** followed by a smaller **maintenance dose**.

Information provided relates to Lanoxin® manufactured by Aspen.