

Levofloxacin

Form	500mg in 100mL bottle	Store above 25°C. Keep container in the outer carton in order to protect from light
Reconstitution	Already in solution Only clear solutions, free from particles, should be used. Solution may be greenish-yellow in colour.	
Compatibility & Stability	N/A	
Administration	IV Infusion Administer 250mg over at least 30 minutes and 500mg over at least 60 minutes. If a central venous access device is unavailable, administer via a large peripheral vein monitoring insertion site closely using a recognised phlebitis scoring tool. Re-site cannula at first signs of inflammation. Perforated bottles/bags should be used immediately (within 3 hours of perforation of rubber stopper/bag).	
Monitoring	Monitor blood pressure during infusion. If a noticeable drop in blood pressure occurs, the infusion must be stopped immediately.	
Extravasation	Extravasation is likely to cause tissue damage due to low pH.	
Additional Information	<ul style="list-style-type: none"> Levofloxacin has excellent bioavailability. Consider oral route from the onset, or a rapid IV to po switch as appropriate. See CUH Antimicrobial Guidelines on Eolas for further information. Fluoroquinolones (FQ) are associated with serious adverse effects affecting muscles, tendons, bones and the nervous system. See CUH Antimicrobial Guidelines on Eolas for further information and Fluoroquinolone Patient Information Leaflet. 	

Information provided relates to Tavanic® (Sanofi Aventis) and Levofloxacin (Fresenius Kabi)
Last updated 15/12/25

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