

ONDANSETRON (Zofran)

ACTION: Anti-Emetic

- Selective antagonism of the serotonin 5-HT₃ receptor resulting in decreased nausea and vomiting

INDICATIONS:

- Nausea and Vomiting

CONTRAINDICATIONS:

- History of hypersensitivity to similar drugs: Dolasetron (Anzemet), Granisetron (Kytril), or Palonosetron (Aloxi) or to ondansetron (Zofran).
- Taking Apomorphine (Apokyn, Ixense, Spontane, Uprima), an injectable drug for Parkinson's Disease, or rarely used for erectile dysfunction.
- Do not give oral tablet or solution to known phenylketonurics (contains phenylalanine).
- Patient has a prolonged QT interval (>440 ms in males or greater than 460 ms in females).

POTENTIAL SIDE EFFECTS

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| • Hypotension | • Dizziness |
| • Syncope | • Anaphylaxis |
| • QT prolongation | • Flushing |
| • Headache | • Rash |
| • Diarrhea | |

ADULT DOSE/ROUTE:

4 mg slow IVP/IM or 4mg tablet ODT (dissolved on the tongue). May repeat in 20min for continued nausea up to 8 mg.

PEDIATRIC DOSE/ROUTE:

ODT **preferred** for children if appropriate.

6 months – 12 years old or <40kg: 0.1mg/kg slow IVP/IO (max 4mg)

For patients ≥ 8kg and < 15 kg, give 2mg ODT (half tab). For patients ≥ 15kg, give 4mg ODT.

For patients < 8kg, defer ondansetron until evaluated by physician.

≥40kg (or ≥ 12 years of age): 4mg slow IVP/IO. May repeat in 20min for continued nausea up to 8mg

NOTES:

- Should be administered IV over 2-5 minutes. Rapid administration has been associated with increased incidence of side effects including syncope.
- Oral disintegrating tablets (ODT's) can be placed on tongue and do not need to be chewed. Medication will dissolve and be swallowed with saliva.
- Ondansetron can be used in pregnancy and breast-feeding mothers (pregnancy class B).

Effective: 4/1/26
Supersedes: 11/01/17