DEPARTMENT: Poudre Valley Hospital Emergency Medical Services	POLICY DESCRIPTION: Zofran (ondansetron)
PAGE: 1	REPLACES POLICY DATED: 8/12/2014
APPROVED: 10/1/2014	RETIRED:
EFFECTIVE DATE: 10/13/2014	REFERENCE NUMBER: 5350

Zofran (Ondansetron)

SCOPE:

Poudre Valley Hospital EMS and represented Northern Colorado services [See page 1]

PURPOSE:

To define the use of Zofran (Ondansetron)

INDICATIONS:

A. Nausea and vomiting.
B. ODT administration should be considered if establishing an IV is otherwise contraindicated or unobtainable.

CONTRAINDICATIONS:

A. Age less than 6 months.
B. Known hypersensitivity to any ingredient in the product.

PROCEDURE AND GUIDELINES:

A. May be used in pregnancy (Class B).
B. Side effects include headache, dizziness, fever, urinary retention, rash, agitation, altered mentation, respiratory depression, and seizures.
C. Limit to one dose (4 mg) in patients with known liver impairment.
D. Pharmacology and action: Centrally acting antiemetic with serotonin receptor antagonist properties.

Drug Protocol: Zofran (Ondansetron)	**EMT**	**EMT-IV**	**EMT-I**	**EMTP**
Adult IV dose: 4mg over 1-2 minutes. May repeat twice at 10 minute intervals to 12 mg.			SO	SO
Adult ODT: 4mg tablet placed on tongue. Single Dose Only.	DO	DO	SO	SO
Adult ODT: Repeat Doses: at 10 minute intervals to 12 mg.	DO	DO	SO	SO
Pediatric IV/ODT/suspension dose [>6 months old]: 0.1 mg/kg IV over 1- 2 minutes [maximum single dose of 4mg]. Call for repeat doses in children.			SO	SO
Any higher dosing than above.			DO	DO

REFERENCES: