**Ondansetron** (Zofran)

**Indication(s):** Nausea and vomiting associated with symptoms or treatment of Pain Management, Gastroenteritis, or Acute Mountain Sickness.

**Contraindications:** Hypersensitivity to ondansetron. Avoid ondansetron in patients with congenital long QT syndrome.

**Precautions:** Ondansetron is known to increase large bowel transit time, patients with signs of subacute intestinal obstruction should be monitored following administration. Ondansetron is not recommended in either pregnancy or breastfeeding.

**Drug Interactions:** Ondansetron causes QTc Prolongation. Be aware of cumulative risk when combining with other QTc prolonging agents (e.g. fluconazole) (Avoid if possible/Monitor). Theoretic increased risk for serotonin syndrome when used with other serotonergic drugs (e.g. SSRIs, SNRIs) (Monitor).

**Adverse effects:** (≥1%) Headache (11%); Constipation (4%); Rash (1%). (<1%) Weight gain and/or increased appetite (15%); dizziness (2–11%); flushing (2–8%); (2–7%); fatigue (4–6%); nausea (2–5%). (<1%) Sensations of flushing or warmth; tachycardia, angina (chest pain), bradycardia, hypotension, syncope and electrocardiographic alterations; Rare reports of seizures, blurred vision and dyskinesia.

**Pharmacology:** Ondansetron is a selective antagonist of the serotonin receptor subtype, 5-HT3. Its precise mode of action in the control of chemotherapy induced nausea and vomiting is not known. It’s half-life after either an 8 mg oral or intravenous dose is approximately 3-4 hours.

**Dosage and Administration:**
- **Pain Management** – Children: Ondansetron 2 to 4mg PO or 0.1mg/kg IV, q 8hr prn. **Adults:** Ondansetron 8mg PO/IV/IM q 8hr prn.
- **Gastroenteritis** – Ondansetron 8mg PO/IV/IM q 8hr prn.
- **Acute Mountain Sickness** – 4mg IV/IM or 8mg PO BID for nausea.