## Prescriptions for intravenous injections



## Purpose of this procedure:

The intravenous injection route is more hazardous than other routes of administration of medicines. Medicines should be prescribed by intravenous injection only if no other route is suitable. For example:

- the medicine is not available for administration by another route, and there is no therapeutically equivalent medicine that could be used by another route, or
- the oral, naso-gastric, rectal or other possible route is not suitable due to the clinical condition of the patient, or
- the medicine needs to be administered by injection to achieve immediate effect, or the required therapeutic level

Prescribe intravenous injections by bolus wherever possible, and only by infusion in the following circumstances:

- constant plasma concentrations are needed, or
- immediate control of plasma concentrations is needed, or
- a minimum administration time is required, or
- a more concentrated solution would be harmful, or
- the volume required for bolus, due to the dose required, is excessive

## The Procedure:

- 1.0 If an injection needs to be prescribed, a specific finishing date must be on the prescription, or the prescription must be reviewed every 24 hours and changed to a less hazardous route at the earliest opportunity.
- 2.0 For antibiotics, consider changing from IV to oral when the patient fulfils the following criteria:
  - temperature below 38°C for 48 hours, and
  - patient clinically improved and there are no longer clinical indications for IV therapy,
    and
  - oral fluids/food are tolerated and there is no reason to believe that oral absorption of antibiotics may be poor, and
  - there is a suitable oral alternative available

## Associated materials/references:

The Safe Use of Medicines Policy

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