



ADULT MEDICATION GUIDELINE

Moxifloxacin

Scope (Staff):	All WNHS Staff
Scope (Area):	Obstetrics and Gynaecology

This document should be read in conjunction with the [Disclaimer](#).

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Medication Class

Quinolone antibiotic

Presentation

Infusion: 400 mg/250 mL

Tablet: 400 mg

Storage

Store at room temperature, below 25°C

Dose

**Severe infections (where resistance or contraindications to other agents are present),
Community acquired pneumonia**

Oral/IV:

400 mg once daily

For second line treatment of mycoplasma genitalium in patients who have failed or are contraindicated to azithromycin under the direction of a sexual health physician

Oral:

400 mg once daily (for 7 days as per eTG)

All other use requires approval from a Clinical Microbiologist or Infectious Diseases Physician.

Administration

Refer to the [Australian Injectable Drugs Handbook](#)

IV Infusion

Infuse undiluted over 60 minutes (avoid bolus or rapid infusion).

Oral:

Swallow whole. Do not take antacids, iron, magnesium, or zinc within 2 hours of oral dose as absorption may be impaired.

Monitoring

May prolong the QT interval – do not use with other medications that prolong the QT interval.

Monitor for tendon pain (especially of the Achilles tendon), signs of hepatotoxicity and blood dyscrasias.

There is an association with the rare but serious adverse event of aortic aneurysm/dissection with the use of fluoroquinolone antibiotics. Please refer to the Medication Safety Alert.

Pregnancy

1st Trimester: Consider alternative*

2nd Trimester: Consider alternative*

3rd Trimester: Consider alternative*

*Maternal use of quinolones use during the first trimester has not been associated with major birth defects or spontaneous abortion. It should not be withheld if it is the medication of choice.

For more information, please contact [KEMH Obstetric Medicines Information Service](#).

Breastfeeding

Considered safe to use

Comments

Patient should be advised to tell the doctor if experience any palpitations or fainting spells while taking moxifloxacin, or if feeling weak, have yellow skin, dark urine or a severe rash.

Related Policies, Procedures & Guidelines

HDWA Mandatory Policies:

[Medication Safety Alert - Fluoroquinolones and risk of aortic aneurysm/dissection](#)

[Formulary ONE](#)

WNHS Policies:

[Antimicrobial Stewardship](#)

WNHS Clinical Practice Guidelines:

[Gynaecology \(Non-oncological\)](#)

WNHS Pharmaceutical and Medicines Management Guidelines:

[Medication Administration](#)









References

Australian Medicines Handbook. Moxifloxacin. In: Australian Medicines Handbook [Internet]. Adelaide (South Australia): Australian Medicines Handbook; 2024 [cited 2024 May 20]. Available from: <https://amhonline.amh.net.au/>

Therapeutic Guidelines. Treatment of asymptomatic Mycoplasma genitalium infection. In: eTG complete [Internet]. West Melbourne (Victoria): Therapeutic Guidelines; 2024 [cited 2024 May 20]. Available from: <https://tgldcdp.tg.org.au>

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