

FORMULARY DRUGS ADMINISTERED IN PRIMARY CARE THAT REQUIRE ECG MONITORING

BNF Chapter	Drug name / therapeutic class	Frequency of ECG monitoring	Further information
1	n/a		
2	For cardiology drugs, the condition treated will usually determine the frequency of ECG monitoring rather than the drug		
	Digoxin	Baseline & 6 monthly	HR and QT 2-3 weeks after starting, then at 6 monthly intervals. Condition determines frequency of ECG monitoring
	Amiodarone	Baseline & 6 monthly	
	Dronedarone	Baseline & 6 monthly	
	Disopyramide	Baseline, 2-3 weeks after initiation & dose changes, and at 6 months	HR and QT. After 6 months further monitoring only required if dose increase, interacting drugs prescribed or deterioration in condition. Condition determines frequency of ECG monitoring
	Flecainide		
	Propafenone		
	Sotalol		
	Diltiazem with beta blocker	Baseline	HR 2-3 weeks after starting. If no problems no need for further ECG monitoring
	Verapamil with beta blocker	Baseline	
	Verapamil dose above 480mg daily	For treatment of Cluster headache – at each dose increase from 480mg daily	HR 2-3 weeks after starting and then repeat 6 monthly x 3. If no problems at 18 months, monitor annually
	Ivabradine	Baseline	HR 2-3 weeks after starting
	Ranolazine	Baseline	HR and QT 2-3 weeks after starting
4	Antipsychotics (except Aripiprazole)	Baseline and at least annually (Increase to 6 monthly if risk factors exist)	
	Lithium	If risk factors identified-, check at baseline	See shared care framework
	Citalopram / Escitalopram	If risk factors identified -check at baseline, 6 monthly and if dose change	See HERPC guidelines
	Modafinil	Baseline	See shared care framework
	Retigabine	Baseline and on reaching maintenance dose	
	Methadone	If patients at risk (including all patients on > 100mg daily), check at baseline and at least annually	
	Lofexidine	If patients at risk - check at baseline	
	Donepezil	If risk factors identified -check at baseline and during treatment	See shared care framework
	Galantamine		
	Rivastigmine		

For further information always check with BNF www.bnf.org.uk or SPC (www.medicines.org.uk).

BNF Chapter	Drug name / therapeutic class	Frequency of ECG monitoring	Further information
5	Ribavirin	if risk factors identified - baseline and as advised by specialist	
6	n/a		
7	n/a		
8	<p>Fluoropyrimidines</p> <p>Protein kinase inhibitors (except everolimus)</p> <p>Tacrolimus</p> <p>Anti-lymphocyte monoclonal antibodies</p> <p>Interferon alfa Peginterferon alfa Interferon beta Interferon gamma</p> <p>Aldesleukin</p> <p>Fingolimod</p> <p>Abiraterone</p> <p>Pasireotide</p>	<p>If risk factors identified – at baseline and during treatment</p> <p>Baseline, 1 month after initiation, and after dose change</p> <p>If risk factors identified- prior to transplant and 9-12 months after transplant</p> <p>If risk factors identified -at baseline and during treatment</p> <p>If risk factors identified – at baseline and during treatment</p> <p>Baseline</p> <p>Baseline and for at least 6 hours following initial dose. Repeat if re-introduced after interruption – see SPC for details</p> <p>If risk factors identified- on baseline and during treatment, if needed</p> <p>If risk factors identified- on baseline and during treatment, if needed</p>	<p>For all drugs listed in Chapter 8 - ECG will be arranged and reviewed by specialist team</p>
9	Anagrelide	Baseline	
10	Tizanidine	If risk factors identified check at baseline and annually	
11	N/A		
12	N/A		
13	N/A		

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