



Medication routes for rabbits	Locations	Amounts/rates	Types	Pros	Cons	Example usage
Oral (P/O)	Mouth	0.5-1ml at a time, but depends on medication	Gut stimulants and protectants, analgesia, antibiotics, probiotics, Some emergency drugs	Relatively easy and potentially pain free with careful handling, direct route for specific gut medication	Fractious rabbits, or those with painful mouths, can be a challenge to administer leading to wasted doses.	Gut stasis rabbit; typically requiring ranitidine, meloxicam, metoclopramide, buprenorphine, assisted feeding and potentially fluids
Subcutaneously (S/C)	Scruff region, mainly dorsally	10ml/kg/hour (e.g. 20ml for 2kg rabbit)	Sedation and anaesthetic drugs, Gut stimulants and protectants, analgesia, antibiotics, Crystalloids +/- Hyaluronidase	Quick and easy route, relatively slow/gentle release when rehydrating	Emergency treatment may require faster acting route, frequent administration can cause discomfort and distress	Anorexic and hypothermic rabbit: warmed crystalloids with added Hyaluronidase
Intravenously (I/V)	Marginal ear vein, Cephalic, Saphenous	Warmed fluid bolus rates; Ideally given via a drip pump, syringe driver or Springflo infuser	Crystalloids, Colloids, analgesia, gut stimulants, antibiotics, sedation and anaesthetic drugs, emergency drugs,	Rapid administration onset of effects if I/V access established,	Requires careful management to avoid infection introduction, annoyance in conscious rabbits, risk of blockages and ear necrosis	Recovering rabbit from surgery; if treatment plan prolonged it ensures that the patient is handled as little as possible for fluid, analgesia, antibiotic and gut stimulant administration
Intraosseous (I/O)	Greater trochanter of humerus, Tibial crest, Greater trochanter of femur	Fluid bolus rates; Ideally given via a drip pump, syringe driver or Springflo infuser. Very painful if given too rapidly.	Crystalloids, Colloids, analgesia, gut stimulants, antibiotics, sedation and anaesthetic drugs, emergency drugs,	Rapid administration onset of effects if I/O access established, useful when I/V access is unavailable due to condition of patient	Painful or uncomfortable once placed, Requires careful management to avoid infection introduction, not suitable for lively rabbits	Anaesthetised rabbit; especially during prolonged surgeries where and if I/V access is compromised by the condition or surgery performed
Intraperitoneal (I/P)	Caudal left ventral abdomen while in dorsal recumbency	20ml/kg/6 hours	Warmed crystalloids	Quick administration of emergency fluids for rapid absorption	Sedation or anaesthesia may be required, risk of perforating caecum or other internal organs, therefore may need an experienced handler	Collapsed rabbit; relatively large bolus of warmed fluids
Intramuscular (I/M)	Quadriceps, Epaxials	<2mls where possible due to discomfort	Sedation and anaesthetic drugs, analgesia,	Relatively quick onset of effects, can be relatively straight forward to administer.	Can be painful and difficult to give in nervous rabbits or if a large volume of medication, potential risk to damaging nervous tissue occasionally leading to paralysis	Preparation for routine procedure or surgery; initial administration of sedation to allow manipulation for minor procedures e.g. radiographs, treatment administration or for pre-anaesthetic sedation

