

## PARACETAMOL (*Panadol*) (A)

(Revised: April 2021)



<b>TYPE:</b>	Simple analgesic / antipyretic		
<b>PRESENTATION:</b>	PO: 48mg/ml colour free liquid (oral) IV: 1g in 100ml in collapsible plastic flask (IV)		
<b>ACTIONS:</b>	1. Antipyretic 2. Mild—moderate analgesic		
<b>USE:</b>	<b>ICP</b>	1. Pyrexia in children who have had or may have a febrile convulsion (for ACTAS treatment, pyrexia is generally $>38^{\circ}\text{C}$ ) 2. Mild to moderate pain (oral)	<b>AP</b>
<b>ADVERSE EFFECTS:</b>	Rare – none of these side effects have been confirmed or refuted as being linked to the casual use of paracetamol: 1. dyspepsia 2. nausea 3. allergic reactions 4. haematological reactions 5. Dizziness 6. Pain at injection site		
<b>CONTRA-INDICATIONS:</b>	1. Known or suspected allergy to paracetamol 2. Previous paracetamol dose in last 4 hours (oral doses only) 3. Previous paracetamol dose in last 6 hours (IV doses only) 4. Children who do not have a sufficient gag reflex to swallow the measured dose 5. Not to be given to children $< 1$ month old 6. Diagnosed liver failure		

**continues over**

**PARACETAMOL (*Panadol*) (A) Cont.**

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**PRECAUTIONS:**

1. Impaired hepatic function
2. Impaired renal function

**DOSES:****PYREXIA IN CHILDREN****PAEDIATRIC ONLY:**

<b>ICP</b>	15mg/kg – oral liquid given (via syringe)	<b>AP</b>
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**MILD TO MODERATE PAIN****ADULT ≥ 12 years:**

<b>ICP</b>	<b>PO:</b> 2 tablets (1g) swallowed <b>IV:</b> ≥50kgs: 1g—over 15 minutes <50kgs: 15mg/kg —over 15 minutes (via burette)	<b>AP</b>
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**PAEDIATRIC:**

<b>ICP</b>	<b>PO (liquid): 1month—</b> 12 years 15mg/kg <b>IV:</b> >1 month 15mg/kg —over 15 minutes (via burette)	<b>AP</b>
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**SPECIAL NOTES:**

It is envisaged that the administration of Panadol Liquid will be for children that are post-ictal / post febrile convulsion, or who are likely to have a febrile convulsion and are not responding to non-medical treatment.

Paracetamol does not necessarily prevent febrile convulsions.

Active cooling measures should still be carried out, as well as checking for the reason for pyrexia (URTI, meningococcal disease, etc.).

As a general rule, if children are administered paracetamol, they should not be left at home.

Do not exceed 60mg/kg/24hours.

Children aged 10-12 may take a 500mg tablet if preferred.