

PARACETAMOL (*Panadol*) (A)

(Revised: April 2021)



TYPE: Simple analgesic / antipyretic

PRESENTATION: PO: 48mg/ml colour free liquid (oral)
IV: 1g in 100ml in collapsible plastic flask (IV)
PO: 500mg tablet (oral)

ACTIONS: 1. Antipyretic
2. Mild—moderate analgesic
Onset Oral: 30 minutes IV: 5-10 minutes

USE:	ICP	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) 3. Moderate to severe pain (IV)	AP
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ADVERSE EFFECTS: 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

CONTRA-INDICATIONS:

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:**

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

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

ICP	PO (liquid): 1month— 12 years 15mg/kg IV: >1 month 15mg/kg —over 15 minutes (via burette)	AP
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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.

MEDICATION IS NOT TO BE LEFT WITH PATIENTS FOR LATER CONSUMPTION