

PARACETAMOL (*Panadol*) (A)

(Revised: December 2013)



TYPE:	Simple analgesic / antipyretic		
PRESENTATION:	48mg/ml colour free liquid		
ACTIONS:	<ol style="list-style-type: none">1. Antipyretic2. Mild analgesic		
USE:	ICP	Pyrexia in children who have had or may have a febrile convulsion (for ACTAS treatment, pyrexia is generally >38°C)	AP
ADVERSE EFFECTS:	Rare – none of these side effects have been confirmed or refuted as being linked to the casual use of paracetamol: <ol style="list-style-type: none">1. dyspepsia2. nausea3. allergic reactions4. haematological reactions		
CONTRA-INDICATIONS:	<ol style="list-style-type: none">1. Known or suspected allergy to paracetamol2. Previous paracetamol dose in last 4 hours3. Children who do not have a sufficient gag reflex to swallow the measured dose4. Not to be given to children < 1 month old		
PRECAUTIONS:	<ol style="list-style-type: none">1. Impaired hepatic function2. Impaired renal function		

continues over

PARACETAMOL (*Panadol*) (A) – cont.



DOSE:

ADULT:

Not used

PAEDIATRIC:

ICP 15mg/kg – given orally via syringe

AP

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.