

PARACETAMOL (*Panadol*) (A)

(Revised: December 2013)



TYPE:	Simple analgesic / antipyretic
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PRESENTATION:	48mg/ml colour free liquid
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ACTIONS:	<ol style="list-style-type: none">1. Antipyretic2. Mild analgesic
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USE:	ICP Pyrexia in children who have had or may have a febrile convulsion (for ACTAS treatment, pyrexia is generally >38°C)	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: <ol style="list-style-type: none">1. dyspepsia2. nausea3. allergic reactions4. haematological reactions
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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
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PRECAUTIONS:	<ol style="list-style-type: none">1. Impaired hepatic function2. Impaired renal function
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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.