<table>
<thead>
<tr>
<th><strong>TYPE:</strong></th>
<th>Simple analgesic / antipyretic</th>
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<td><strong>PRESENTATION:</strong></td>
<td>48mg/ml colour free liquid</td>
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| **ACTIONS:** | 1. Antipyretic  
2. Mild analgesic |
| **USE:** | ICP  
Pyrexia in children who have had or may have a febrile convolution (for ACTAS treatment, pyrexia is generally >38°C) |
| **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 |
| **CONTRA-INDICATIONS:** | 1. Known or suspected allergy to paracetamol  
2. Previous paracetamol dose in last 4 hours  
3. Children who do not have a sufficient gag reflex to swallow the measured dose  
4. Not to be given to children < 1 month old |
| **PRECAUTIONS:** | 1. Impaired hepatic function  
2. Impaired renal function |
DOSE:

**ADULT:**

Not used

**PAEDIATRIC:**

| ICP | 15mg/kg – given orally via syringe |

**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.