Patient Group Direction For The Administration Of Oral Paracetamol Or Ibuprofen To Children Awaiting Treatment For Minor Injury Or Pyrexia By Nurses Working Within NHS Grampian

Lead Author: Clinical Pharmacist, RACH
Consultation Group: See relevant page in the PGD
Approver: NHSG Medicines Guidelines and Policies Group

Identifier: NHSG/PGD/Parlbu/MGPG935
Review Date: February 2020
Date Approved: February 2018
Expiry Date: February 2021

NHS Grampian have authorised this Patient Group Direction to help patients by providing them with more convenient access to an efficient and clearly defined service within the NHS Board. This Patient Group Direction cannot be used until Appendix 1 and 2 are completed.

Uncontrolled when printed

Version 5
Revision History:

<table>
<thead>
<tr>
<th>Date of change</th>
<th>Approval date of PGD that is being superseded</th>
<th>Summary of Changes</th>
<th>Section heading</th>
</tr>
</thead>
<tbody>
<tr>
<td>November 2017</td>
<td>March 2016</td>
<td>2 Yearly update to new PGD template.</td>
<td></td>
</tr>
<tr>
<td>February 2018</td>
<td>March 2016</td>
<td>Extension of age range to &gt;3months/≥6kg as per licensing.</td>
<td></td>
</tr>
<tr>
<td>February 2018</td>
<td>March 2016</td>
<td>Addition of carer to sections where only patient was mentioned.</td>
<td></td>
</tr>
<tr>
<td>February 2018</td>
<td>March 2016</td>
<td>Oral suspension inserted as appropriate.</td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td>Addition of tacrolimus to ibuprofen drug interaction list.</td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td>Changes to consultation group and Updates to references.</td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td>Change to title to highlight oral paracetamol.</td>
<td></td>
</tr>
</tbody>
</table>

NHS Grampian Identifier: NHSG/PGD/ParIbu/MGPG935
Replaces: NHSG/PGD/ParIbu/MGPG784, Version 4
Keyword(s): PGD patient group direction paracetamol ibuprofen children pyrexia minor injury nurse

Policy Statement: It is the responsibility of individual nurses and their line managers to ensure that they work within the terms laid down in this PGD and to ensure that staff are working to the most up to date PGD. By doing so, the quality of the services offered will be maintained, and the chances of staff making erroneous decisions which may affect patient, staff or visitor safety and comfort will be reduced. Supervisory staff at all levels must ensure that staff using this PGD act within their own level of competence.

The lead author is responsible for the review of this PGD and for ensuring the PGD is updated in line with any changes in clinical practice, relevant guidelines, or new research evidence.

Review date: The review date for a PGD needs to be decided on a case-by-case basis in the interest of patient safety. The expiry date should not be more than 3 years from the date the PGD was authorised.

Document: Drafted: November 2017
Completed: February 2018
Approved: February 2018 (published – March 2018)
Patient Group Direction For Use Within NHS Grampian

Organisational Authorisation

This PGD is not legally valid until it has had organisational authorisation

<table>
<thead>
<tr>
<th>NHS Grampian</th>
</tr>
</thead>
<tbody>
<tr>
<td>Designation</td>
</tr>
<tr>
<td>Medical Director</td>
</tr>
<tr>
<td>Director of Pharmacy</td>
</tr>
<tr>
<td>Director of Nursing, Midwifery and Allied Healthcare Professionals</td>
</tr>
</tbody>
</table>

Management and Monitoring of Patient Group Direction

PGD Consultative Group

The consultative group is legally required to include a medical practitioner, a pharmacist and a representative of the professional group who will provide care under the direction

Martina Freeman  
Gareth Patton  
Victoria Nicol  
Kathryn Auchnie  
Graham Wilson  

**Lead Author**: Paediatric Pharmacist, RACH  
**Medical Practitioner**: Consultant in Emergency Medicine, Emergency Department, ARI and RACH  
**Pharmacist**: Paediatric Pharmacist, RACH  
RACH Acting Clinical Nurse Manager  
Consultant Anaesthetist, RACH
### Clinical indication to which this PGD applies

| Definition of situation/condition | This Patient Group Direction (PGD) will authorise nurses to administer a single dose of oral paracetamol or ibuprofen to individuals aged 3 months and over, who weigh >6kg, awaiting treatment for minor injury or pyrexia within NHS Grampian Hospitals. Children arriving at the Emergency Department (ED), Assessment Unit or Minor Injury Units are triaged to separate minor from major injuries or illness. Opiates are prescribed and administered as soon as possible to relieve pain caused by major injuries. However, many children having suffered minor injury arrive at ED/Assessment Units/Minor Injury Units in pain and may not have been given analgesia prior to attendance and have to wait in pain before they are treated. Similarly children suffering with pyrexia may not have been given an anti-pyretic.

This PGD should be used in conjunction with the recommendations in the current British National Formulary (BNF), British National Formulary for Children (BNFC) and individual Summary of Product Characteristics (SPC). |
| Inclusion criteria | All children presenting at the Emergency Department, Assessment Unit or Minor Injury Units are triaged according to local protocol. If after the triage process they are suffering from minor injury or pyrexia and are over 3 months old and weigh ≥6kg, they may be treated with oral paracetamol or ibuprofen in accordance with the product monograph recommendations and contraindications. |
### Exclusion criteria

Patients may be administered oral **paracetamol** under this PGD unless:

- aged under 3 months old
- under 6kg in weight
- has hepatic impairment
- has renal impairment
- has hypersensitivity to any of the ingredients
- has been administered paracetamol (Oral/IV/PR) within last 4 hours – do not give more paracetamol until at least 4 hours after last dose
- has already taken the maximum dose of paracetamol in the last 24 hours (consider ibuprofen).

Patients may be administered **oral Ibuprofen** under this PGD unless:

- aged under 3 months old
- under 6kg in weight
- has taken ibuprofen within the last 6 hours – do not give more ibuprofen until at least 6 hours after last dose
- has already taken the maximum dose of ibuprofen in the last 24 hours (consider paracetamol)
- is asthmatic
- has bleeding disorders
- has renal impairment
- has had previous sensitivity to aspirin or other non steroidal anti-inflammatories (NSAIDs)
- have gastro intestinal problems.

### Precautions and special warnings

The products listed for use under this PGD should only be used for the specific condition and age groups specified. Patients who are suffering from a condition outwith the PGD specifications should be seen by medical staff.

Medicines included in the PGD should not be used for treatment of patients who have a known or suspected hypersensitivity to the product or any of its ingredients.

In the event that a patient suffers an adverse reaction medical help should be sought immediately.

### Referral criteria

Patients who fall into the categories detailed in the exclusion criteria.
### Action if excluded from treatment

Medical advice should be sought – refer to Consultant (relevant medical practitioner).

The reason why the patient was excluded under the PGD will be documented in the appropriate patient record.

### Action if patient/parent/guardian or person with parental responsibility declines treatment

The patient/parent/guardian or person with parental responsibility should be advised of the risks and consequences of not receiving treatment.

Refer to Consultant (relevant medical practitioner).

Record outcome in Patient Medication Record if appropriate, or relevant patient record.

### Consent

Prior to the administration of the drug, valid consent must be obtained. Consent must be in line with current NHSG consent policy.

### Description of treatment available under the PGD for Paracetamol

| Name of medicine | Paracetamol oral suspension 120mg in 5mL and 250mg in 5mL.  
|                  | Paracetamol 500mg tablets and soluble tablets. |
| Legal status     | Paracetamol liquid oral suspension 120mg in 5mL and 250mg in 5mL is a Pharmacy-only Medicine (P) or General Sales List Medicine (GSL). Paracetamol 500mg tablets and soluble tablets are GSL/P or Prescription-only Medicines (PoM) dependent on pack size. |
| Form/Strength    | Oral suspension or tablets.  
|                  | Each 5mL of oral suspension contains 120mg or 250mg of paracetamol.  
|                  | Each tablet/soluble tablet contains 500mg of paracetamol. |
Route/Method of administration

Route of administration is oral.

For the oral suspension it is important to **shake the bottle** for at least 10 seconds before use.

<table>
<thead>
<tr>
<th>Dosage/Total Dose</th>
<th>Table 1 – Oral Paracetamol Doses</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Age</strong></td>
<td><strong>Weight</strong></td>
</tr>
<tr>
<td>3-6 months</td>
<td>6-7kg</td>
</tr>
<tr>
<td>6-24 months</td>
<td>8-11 kg</td>
</tr>
<tr>
<td>2-4 years</td>
<td>12-16 kg</td>
</tr>
<tr>
<td>4-6 years</td>
<td>17-20 kg</td>
</tr>
<tr>
<td>6-8 years</td>
<td>21-24 kg</td>
</tr>
<tr>
<td>8-10 years</td>
<td>25-31 kg</td>
</tr>
<tr>
<td>10-12 years</td>
<td>32-39 kg</td>
</tr>
<tr>
<td>12-18 years</td>
<td>40-50 kg</td>
</tr>
<tr>
<td>12-18 years</td>
<td>&gt;50kg</td>
</tr>
</tbody>
</table>

If patient is underweight for their age use dose for appropriate weight band.

If patient is overweight for their age use dose for appropriate age band.

A maximum of 4 doses (see Table 1) can be given in 24 hours. A minimum of 4 hours is required in between doses.

Doses based on BNF for children and MRHA guidance 2011.

Duration of treatment

A maximum of 4 doses only can be given in 24 hours, but only a single dose can be administered under this PGD.

Storage requirements

For tablets store in the original package.

For oral suspension store below 25°C. Protect from light. Store in the original package.
### Follow-up (if applicable)

Patient/parent/guardian or person with parental responsibility may be advised to use paracetamol as detailed above. The directions on the bottle/packet should be followed. If more serious adverse or persistent effects occur, the patient/parent/guardian or person with parental responsibility should be advised to contact their GP/NHS 24 or return to the Emergency Department or Assessment Unit.

### Advice to patient/carer (Verbal)

Advice should be given on what to expect and what to do for major and minor reactions.

The patient/parent/guardian or person with parental responsibility should be advised that they should not take any other paracetamol containing products at the same time. A maximum of 4 doses can be given in any 24 hour period at 4-6 hourly intervals, i.e. if the patient has been given a dose in the Emergency department, Assessment Unit or Minor Injuries Unit they need to wait at least 4 hours before re-dosing. If maximum dose is exceeded they should seek medical advice.

The patient/parent/guardian or person with parental responsibility should be told to inform the nursing staff of any adverse effects experienced while waiting for treatment.

### Advice to patient/parent/guardian or person with parental responsibility (Written)

The Patient Information Leaflet (PIL) contained in the medicine(s) should be made accessible to the patient/parent/guardian or person with parental responsibility. Where this is unavailable, or unsuitable, sufficient information should be given in a language that they can understand.

Copies of PIL and SPCs for medicines can be found at [http://www.medicines.org.uk](http://www.medicines.org.uk) or [http://www.mhra.gov.uk/spc-pil/index.htm](http://www.mhra.gov.uk/spc-pil/index.htm)

### Concurrent Medications/Drug Interactions

The speed of absorption of paracetamol may be increased by metoclopramide or domperidone and absorption reduced by colestyramine.

### Identifying and managing possible adverse reactions

Adverse effects of paracetamol are rare but hypersensitivity including skin rash may occur.

This list is not exhaustive. Please also refer to current BNF/BNFC and manufacturers SPC for details of all potential adverse reactions.
<table>
<thead>
<tr>
<th><strong>BNF:</strong></th>
</tr>
</thead>
<tbody>
<tr>
<td><a href="https://www.medicinescomplete.com/mc/bnf/current/">https://www.medicinescomplete.com/mc/bnf/current/</a></td>
</tr>
<tr>
<td><a href="https://www.medicinescomplete.com/mc/bnfc/current/">https://www.medicinescomplete.com/mc/bnfc/current/</a></td>
</tr>
</tbody>
</table>

**SPCs/PILs and risk minimisation materials:**

<table>
<thead>
<tr>
<th>Link</th>
</tr>
</thead>
<tbody>
<tr>
<td><a href="https://www.medicines.org.uk/emc/">https://www.medicines.org.uk/emc/</a></td>
</tr>
<tr>
<td><a href="http://www.medicines.org.uk/emc/medicine/22894#rmm">http://www.medicines.org.uk/emc/medicine/22894#rmm</a></td>
</tr>
</tbody>
</table>

If an adverse reaction does occur give immediate treatment and inform relevant medical practitioner as soon as possible.

Report the reaction to the MHRA using the Yellow Card System. [https://yellowcard.mhra.gov.uk/](https://yellowcard.mhra.gov.uk/)
Description of treatment available under the PGD for Ibuprofen

<table>
<thead>
<tr>
<th>Name of medicine</th>
<th>Ibuprofen 100mg in 5mL oral suspension.</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Ibuprofen 200mg or 400mg tablet.</td>
</tr>
</tbody>
</table>

**Legal status**

Ibuprofen available as a 100mg in 5mL oral suspension and a 200mg or 400mg tablet can be a GSL/P/PoM, dependent on pack size.

**Form/Strength**

Each 5mL of oral suspension contains 100mg of Ibuprofen.

Each 200mg tablet contains 200mg of ibuprofen and each 400mg tablet contains 400mg of ibuprofen.

**Route/Method of administration**

Route of administration is oral.

For the oral suspension it is important to **shake the bottle** well before use.

**Dosage/Total Dose**

**Table 2 – Oral Ibuprofen Doses**

<table>
<thead>
<tr>
<th>Age</th>
<th>Weight</th>
<th>Dose (max 3 doses in 24 hours)</th>
</tr>
</thead>
<tbody>
<tr>
<td>3-6 months</td>
<td>6-7kg</td>
<td>50mg</td>
</tr>
<tr>
<td>6-12 months</td>
<td>8-10kg</td>
<td>50mg</td>
</tr>
<tr>
<td>1-4 years</td>
<td>11-16kg</td>
<td>100mg</td>
</tr>
<tr>
<td>4-7 years</td>
<td>17-22kg</td>
<td>150mg</td>
</tr>
<tr>
<td>7-10 years</td>
<td>23-31kg</td>
<td>200mg</td>
</tr>
<tr>
<td>10-12 years</td>
<td>32-39kg</td>
<td>200mg (tablet) or 300mg (suspension)</td>
</tr>
<tr>
<td>12-18 years</td>
<td>Over 40 kg</td>
<td>200 mg – 400 mg</td>
</tr>
</tbody>
</table>

**If patient is underweight for their age use dose for appropriate weight band.**

**If patient is overweight for their age use dose for appropriate age band.**

A maximum of 3 doses (see Table 2) can be given in a 24 hour period.
<table>
<thead>
<tr>
<th>Duration of treatment</th>
<th>A maximum of 3 doses can be given in a 24 hour period, but only a single dose can be administered under this PGD.</th>
</tr>
</thead>
</table>
| Storage requirements  | Store in original package.  
The oral suspension should be stored below 25°C. |
| Follow-up (if applicable) | Patient/parent/guardian or person with parental responsibility may be advised to use ibuprofen as detailed above. The directions on the bottle/packet should be followed. If more serious adverse or persistent effects occur, the patient/parent/guardian, or person with parental responsibility should be advised to contact their GP/NHS 24 or nearest Emergency Department. |
| Advice to patient/parent/guardian or person with parental responsibility (Verbal) | Advice should be given on what to expect and what to do for major and minor reactions.  
The patient/parent/guardian or person with parental responsibility should be advised that the maximum of 3 doses of ibuprofen in 24 hours should not be exceeded. They should also wait at least 6 hours before giving a further dose. To minimise the incidence of GI upset, ibuprofen is best taken with or just after food if not being fasted.  
The patient/parent/guardian or person with parental responsibility should be told to inform the nursing staff of any adverse effects experienced while waiting for treatment. |
| Advice to patient/parent/guardian or person with parental responsibility (Written) | The Patient Information Leaflet (PIL) contained in the medicine(s) should be made accessible to the patient/parent/guardian or person with parental responsibility. Where this is unavailable, or unsuitable, sufficient information should be given in a language that they can understand.  
Copies of PIL and SPCs for medicines can be found at http://www.medicines.org.uk or http://www.mhra.gov.uk/spc-pil/index.htm |
### Concurrent Medications/Drug Interactions

Ibuprofen should not be given if the patient is taking:
- Anticoagulants
- Aspirin or other NSAIDs
- Ciclosporin or tacrolimus
- Methotrexate
- Ciprofloxacin and other quinolone antibiotics
- Lithium.

### Identifying and managing possible adverse reactions

Gastrointestinal upset is the most common side effect of ibuprofen. Bleeding disorders, exacerbation of asthma symptoms and cardiovascular side-effects may occur.

This list is not exhaustive. Please also refer to current BNF/BNFC and manufacturers SPC for details of all potential adverse reactions.

**BNF:**
- [https://www.medicinescomplete.com/mc/bnf/current/](https://www.medicinescomplete.com/mc/bnf/current/)
- [https://www.medicinescomplete.com/mc/bnfc/current/](https://www.medicinescomplete.com/mc/bnfc/current/)

**SPCs/PILs and risk minimisation materials:**
- [https://www.medicines.org.uk/emc/](https://www.medicines.org.uk/emc/)
- [http://www.medicines.org.uk/emc/medicine/22894#rmm](http://www.medicines.org.uk/emc/medicine/22894#rmm)

If an adverse reaction does occur give immediate treatment and inform relevant medical practitioner as soon as possible.

Report the reaction to the MHRA using the Yellow Card System: [https://yellowcard.mhra.gov.uk/](https://yellowcard.mhra.gov.uk/).

### Facilities and supplies required

The following should be available at sites where the medication is to be administered:

- Appropriate storage facilities.
- An acceptable level of privacy to respect patient’s right to confidentiality and safety.
- Resuscitation equipment.
- Immediate access to Adrenaline (Epinephrine) 1 in 1000 injection.
- Access to medical support (this may be via the telephone).
Characteristics of staff authorised to administer medicine under PGD

<table>
<thead>
<tr>
<th>Professional qualifications</th>
<th>Registered Nurses as recognised by the Nursing and Midwifery Council (NMC).</th>
</tr>
</thead>
<tbody>
<tr>
<td>Specialist competencies</td>
<td>Approved by the organisation as;</td>
</tr>
<tr>
<td></td>
<td>Competent to assess the patient/parent/guardian or person with parental responsibility capacity to understand the nature and purpose of the administration in order for the patient/parent/guardian or person with parental responsibility to give or refuse consent.</td>
</tr>
<tr>
<td></td>
<td>Having undertaken appropriate training to carry out clinical assessment of patients leading to a diagnosis that requires treatment according to the indications listed in the PGD.</td>
</tr>
<tr>
<td></td>
<td>Aware of current treatment recommendations and be competent to discuss issues about the drug with the patient/parent/guardian or person with parental responsibility.</td>
</tr>
<tr>
<td></td>
<td>Competent in the administration of the drug.</td>
</tr>
<tr>
<td></td>
<td>Please add any specific or specialist national, regional, or local training/qualifications relevant to the practitioner working under the PGD – as detailed above.</td>
</tr>
</tbody>
</table>

| Ongoing training and competency | All professionals working under this PGD must;                                  |
|                                 | Have attended basic life support training which is required to be updated annually. |
|                                 | Have undertaken the NHS e-anaphylaxis training session or equivalent (including annual updates) which covers all aspects of the identification and management of anaphylaxis. This can be accessed via eKSF, or the AT Learning® tool / LearnPro. |
Maintain their skills, knowledge and their own professional level of competence in this area according to their individual Code of Professional Conduct.

Must be familiar with the SPC for all medicines administered in accordance with this PGD.

**Professional managers/Lead Nurses will be responsible for:**

Ensuring that the current PGD is available to staff providing care under this direction.

Ensuring that staff have received adequate training in all areas relevant to this PGD and meet the requirements above.

Maintain up to date record of all staff authorised to administer drug specified in PGD.

**Documentation**

**Authorisation of administration**

Nurses working within NHS Grampian can be authorised to administer the drug specified in this PGD by their Clinical Nurse Manager, Emergency Care Unit.

All authorised staff are required to read the PGD and sign the Agreement to administer Medicines Under PGD (*Appendix 1*).

This should be held in the individual practitioners records, or as agreed locally.

A Certificate of Authorisation (*Appendix 2*) signed by the authorising doctor/manager and staff working to the PGD, should be held as agreed locally.

**Record of administration/supply**

An electronic or paper record for recording the screening of patients and the subsequent administration of the drug specified in this PGD must be completed in order to allow audit of practice. This should include as a minimum:

- Date and time of supply/administration
- Patients name
- Patient date of birth and/or CHI if available
- Details of parent/guardian or person with parental responsibility where applicable
- Exclusion criteria, record why the drug was not administered
- Consent to the administration (if not obtained elsewhere)
- Drug manufacturer, batch number and expiry date (for injectable medicines)
- Site where drug administered, dose and route of administration
- Signature and name in capital letters of practitioner who administered the drug
- Record of any adverse effects (advise patient’s doctor).

These records should be retained:

**For children and young people**, retain until the patient's 25th birthday or 26th if the young person was 17 at the conclusion of treatment.

**For 17 years and over** retain for 6 years after last date of entry, for 3 years after death, or in accordance with local policy, where this is greater than above.

### Audit

All records of the drug(s) specified in this PGD will be filed with the normal records of medicines in each practice/service. A designated person within each H&SCP/practice/service will be responsible for auditing completion of drug forms and collation of data.

### References

Electronic Medicines Compendium  
http://www.medicines.org.uk  
https://www.medicines.org.uk/emc/product/260 Paracetamol (Calpol) – Date of revision of text 20/01/16, accessed 18/01/18  
https://www.medicines.org.uk/emc/product/396 Ibuprofen (Nurofen) - Date of revision of text 02/10/14, accessed 18/01/18

British National Formulary for Children  
Appendix 1

Health Care Professional Agreement to Administer Medicines Under Patient Group Direction

I: ____________________________________________ (Insert name)

Working within: __________________________________ e.g. H&SCP, Practice

Agree to administer medicines under the direction contained within the following Patient Group Direction

Patient Group Direction For The Administration Of Oral Paracetamol Or Ibuprofen To Children Awaiting Treatment For Minor Injury Or Pyrexia By Nurses Working Within NHS Grampian

I have completed the appropriate training to my professional standards enabling me to administer medicines under the above Patient Group Direction. I agree not to act beyond my professional competence nor out with the recommendations of the Patient Group Direction.

Signed: ____________________________________________

Print Name: ____________________________________________

Date: ____________________________________________

Professional Registration No: ____________________________________________
# Health Professionals Authorisation to Administer Medicines Under Patient Group Direction

The lead nurse/professional of each clinical area is responsible for maintaining records of their clinical area where this PGD is in use, and to whom it has been disseminated.

The manager who approves a healthcare professional to supply and/or administer medicines under the patient group direction, is responsible for ensuring that he or she is competent, qualified and trained to do so and for maintaining an up-to-date record of such approved persons in conjunction with the Head of Profession.

The healthcare professional who is approved to supply and/or administer medicines under the direction is responsible for ensuring that he or she understands and is qualified, trained and competent to undertake the duties required. The approved person is also responsible for ensuring that administration or supply is carried out within the terms of the direction, and according to his or her code of professional practice and conduct.

### Patient Group Direction For The Administration Of Oral Paracetamol Or Ibuprofen To Children Awaiting Treatment For Minor Injury Or Pyrexia By Nurses Working Within NHS Grampian

Local clinical area(s) where these healthcare professionals will operate under this PGD:

<table>
<thead>
<tr>
<th>Name of Healthcare Professional</th>
<th>Signature</th>
<th>Date</th>
<th>Name of Manager</th>
<th>Signature</th>
<th>Date</th>
</tr>
</thead>
</table>
Patient Group Direction For The Administration Of Oral Paracetamol Or Ibuprofen To Children Awaiting Treatment For Minor Injury Or Pyrexia By Nurses Working Within NHS Grampian

Local clinical area(s) where these healthcare professionals will operate under this PGD:

<table>
<thead>
<tr>
<th>Name of Healthcare Professional</th>
<th>Signature</th>
<th>Date</th>
<th>Name of Manager</th>
<th>Signature</th>
<th>Date</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
Appendix 4 - Nurse Administration Of Analgesia To Pyrexic Patients

CHILD PYREXIC

TEMP >37.5C

Ask name, dose & time of any medicine given in last 4 to 6 hours

Ibuprofen given in last 6 hours

None Given

Paracetamol given in last 4 hours

Refer to DOCTOR for assessment

Triage nurse asks if child asthmatic, has any bleeding disorders or renal impairment or is taking any contraindicating medication

Medicine taken includes:
- Analgesic other than Ibuprofen or Paracetamol
- A paracetamol containing product

Nurse to give Paracetamol

No MORE ANALGESIA UNTIL DISCUSSED WITH DOCTOR

Nurse to give Ibuprofen

YES

NO