

This patient group direction (PGD) must only be used by registered health professionals who have been named and authorised by their organisation to practice under it. The most recent and in date final signed version of the PGD should be used.

Patient Group Direction (PGD)

For the administration or supply of

Paracetamol Oral solution, tablets, dispersible tablets, rectal and intravenous

By registered health care professionals for

Pyrexia with discomfort

Throughout the Manx Care and those contracted by the Manx Care where appropriate within practice

PGD NUMBER 57

1. Change history

Version number	Change details	Date
1	Original PGD ratified	June 2021
2	Minor word changes to ensure clarify of PGD and links added to Cautions and Adverse Effects, and reference to Manx Care Policy for Capacity added. Plus: <ul style="list-style-type: none"> • Added dosing for post-immunisation Pyrexia in children 2-3 months • Maximum dosing added • Exclusion as to Children's ages amended • Cautions updated as to body weight • Off label use updated 'For use as prophylaxis of post immunisation Pyrexia following immunisation with Meningococcal Group B vaccine 	March 2023

2. Medicines practice guideline 2: *Patient group directions*

Refer to the relevant sections of NICE medicines practice guideline 2: *Patient group directions* as stated in the blank template notes. For further information about PGD signatories, see the NHS and Manx Care [PGD website FAQs](#)

3. PGD development

Refer to the [NICE PGD competency framework for people developing PGDs](#)

Job Title & organisation	Name	Signature	Date
Author of the PGD			
Member of the PGD working group			

4. PGD authorisation

Refer to the [NICE PGD competency framework for people authorising PGDs](#)

Pre Signatures			
Job Title	Name	Signature	Date
Chief Pharmacist			
Head of Ambulance Services			
GP Adviser			
Senior Microbiologist (if PGD contains antimicrobials)	N/A	N/A	N/A
Final signatures			
Medical Director			
Director of Nursing			

5. Training and competency of registered healthcare professionals, employed or contracted by the Manx Care, GP practice or Hospice

Refer to the [NICE PGD competency framework for health professionals using PGDs](#)

	Requirements of registered Healthcare professionals working under the PGD
Qualifications and professional registration	<ul style="list-style-type: none"> Registered healthcare professionals, working within or contracted by the Manx Care, GP practice or Hospice who are permitted staff groups outlined within the current PGD policy Pharmacists must be practising in Manx Care authorised premises i.e. contracted pharmacy premises
Initial training	<ul style="list-style-type: none"> Knowledge of current guidelines and the administration of the drug specified in this PGD/BNF and of the inclusion and exclusion criteria Training which enables the practitioner to make a clinical assessment to establish the need for the medication covered by this PGD Local training in the use of PGDs
Competency assessment	Staff will be assessed on their knowledge of drugs and clinical assessment as part the competency framework for registered health professionals using PGDs
Ongoing training and competency	The registered health care professionals should make sure they are aware of any changes to the recommendations for this medication; it is the responsibility of the registered health care professionals to keep up to date with continuing professional development. PGD updates will be held every two years

6. Clinical Conditions

Clinical condition or situation to which this PGD applies	Pyrexia with discomfort
Inclusion criteria	<ul style="list-style-type: none"> Patients over 3 months of age Reduction of Pyrexia due to discomfort Children 2-3 months for use as prophylaxis of post immunisation Pyrexia following immunisation with Meningococcal Group B vaccine
Exclusion criteria	<ul style="list-style-type: none"> Children under 2 months Children under 3 months by rectum Intravenous infusion not for use in children and neonates with body-weight under 10-kg Patients taking medication containing paracetamol, e.g. cold and influenza remedies Hypersensitivity to paracetamol Alcohol dependency Sever hepatic and renal impairment

Cautions (including any relevant action to be taken)	<ul style="list-style-type: none"> • Body weight under 50kg may need reduced dose • Co-administration of enzyme-inducing antiepileptic medications may increase toxicity; doses should be reduced. • Colestyramine may reduce absorption if given one hour before • Metoclopramide and domperidone (to treat nausea and vomiting) accelerates the absorption of paracetamol and enhances its effects • Acute Pancreatitis <p>A detailed list of cautions is available in the SPC, which is available from the electronic Medicines Compendium website: www.medicines.org.uk and BNF https://bnf.nice.org.uk</p>
Arrangements for referral for medical advice	Patient should be referred to a more experienced clinical practitioner for further assessment
Action to be taken if patient excluded	Patient should be referred to a more experienced clinical practitioner for further assessment
Action to be taken if patient declines treatment	<ul style="list-style-type: none"> • A verbal explanation should be given to the patient on: the need for the medication and any possible effects or potential risks which may occur as a result of refusing treatment • This information must be documented in the patients' health records • Any patient who declines care must have demonstrated capacity to do so (see the Manx Care Policy for Capacity, Best Interests Decisions and Deprivation of Liberty) • Where appropriate care should be escalated

7. Details of the medicine

Name, form and strength of medicine	Paracetamol <ul style="list-style-type: none"> • Oral suspension: 120mg/5mls, 250mg/5mls • Tablets : 500mg • Dispersible tablets: 500mg • Rectal suppository: 60mg, 80mg, 120mg, 125mg, 240mg, 250mg, 500mg, 1g • Intravenous: 100mg/10ml solution for infusion, 1g/100ml infusion bottle, 500mg/50mls solution for infusion
Legal category	General Sales List (GSL), Pharmacy (P), Prescription Only Medicine (POM) depending on preparation
Indicate any <u>off-label use</u> (if relevant)	For use as prophylaxis of post immunisation Pyrexia following immunisation with Meningococcal Group B vaccine
Route/method of administration	<ul style="list-style-type: none"> • Oral • Intravenous • Rectal

<p>Dose and frequency</p>	<p>For administration</p> <p>By mouth:</p> <ul style="list-style-type: none"> • Child 2-3 months: 60mg for one dose, then 60mg after 4-6 hours if required; maximum 60mg/kg per day • Child 3-5 months: 60mg every 4-6 hours • Child 6-23 months: 120mg every 4-6 hours • Child 2-3 years: 180mg every 4-6 hours • Child 4-5 years: 240mg every 4-6 hours • Child 6-7 years: 240-250mg every 4-6 hours • Child 8-9 years: 360-375mg every 4-6 hours • Child 10-11 years: 480-500mg every 4-6 hours • Child 12-15 years: 480-750mg every 4-6 hours • Child 16-17 years: 0.5-1g every 4-6 hours • Adult: 0.5-1g every 4-6 hours <p>Maximum dose for patient 3 months and over – 4 doses in any 24 hour period</p> <p>By rectum:</p> <ul style="list-style-type: none"> • Child 3-11 months: 60-125mg every 4-6 hours • Child 1-4 years: 125-250mg every 4-6 hours • Child 5-11 years: 250-500mg every 4-6 hours • Child 12-17 years: 500mg every 4-6 hour • Adult: 0.5-1g every 4-6 hours <p>Maximum dose for patient 3 months and over – 4 doses in any 24 hour period</p> <p>By intravenous infusion:</p> <ul style="list-style-type: none"> • Children and Adults (body-weight up to 50-kg): 15-mg/kg every 4-6 hours, dose to be administered over 15 minutes; maximum 60-mg/kg per day • Adult (body-weight 50 kg and above): 1-g every 4-6 hours, dose to be administered over 15 minutes; maximum 4-g per day
<p>Quantity to be administered and/or supplied</p>	<p>Administered:</p> <ul style="list-style-type: none"> • Tablets as per dose • Oral suspension as per dose • Dispersible tablets as per dose • Rectal as per dose • Intravenous as per dose <p>Supplied:</p> <ul style="list-style-type: none"> • Tablets 1 original pack (maximum 32 tablets) • Oral suspension 1 original pack (maximum 100ml) • Dispersible tablets 1 original pack (maximum 24 tablets) • Rectal 2 original packs (maximum 20 suppositories)

Maximum or minimum treatment period	Maximum administration 48 hours treatment Maximum supply <ul style="list-style-type: none"> • Tablets 1 original pack (maximum 32 tablets) • Oral suspension 1 original pack (maximum 100ml) • Dispersible tablets 1 original pack (maximum 24 tablets) • Rectal 2 original packs (maximum 20 suppositories)
Storage	Room temperature
Adverse effects	<ul style="list-style-type: none"> • Acute generalised exanthematous pustulosis • Malaise • Skin reactions • Steven Johnson syndrome • Toxic epidermal necrolysis • Blood disorders • Leucopenia • Neutropenia • Thrombocytopenia <p>A detailed list of adverse reactions is available in the SPC, which is available from the electronic Medicines Compendium website: www.medicines.org.uk and BNF https://bnf.nice.org.uk</p>
Records to be kept	The administration of any medication given under a PGD must be recorded within the patient's medical records

8. Patient information

Verbal/Written information to be given to patient or carer	<ul style="list-style-type: none"> • Verbal information must be given to patients and or carers for all medication being administered under a PGD • Where medication is being supplied under a PGD, written patient information leaflet must also be supplied • A patient information leaflet is available on request
Follow-up advice to be given to patient or carer	If symptoms do not improve or worsen or you become unwell, seek medical advice immediately

9. Appendix A

10.

References
<ol style="list-style-type: none"> 1. British National Formulary (BNF) available online: https://bnf.nice.org.uk 2. Nursing and Midwifery "The code" available online: https://www.nmc.org.uk 3. Current Health Care Professions Council standards of practice 4. General Pharmaceutical Council standards 5. Electronic medicines compendium available online: https://www.medicines.org.uk 6. Manx Care Policy for Capacity, Best Interests Decisions and Deprivation of Liberty http://edrmgi/sites/hospital/Clinical%20Policies%20and%20Procedures/Policy%20for%20Capacity,%20Best%20Interests%20Decisions%20and%20Deprivation%20of%20Liberty.pdf#search=deprivation

11. Appendix B

Health professionals agreed to practice

- Each registered healthcare professional will hold their own Competency framework which will be signed and agreed by their mentor
- A mentor is defined within the Manx Care policy as any ward/area managers, sisters, senior nurses, GPs, pharmacists or senior paramedics who has completed the PGD training themselves