

# Standing Order for Primary Health Care

Practice Issue Date: Not valid after the review date: *(one year after issue)*

Medicine standing order for	PARACETAMOL																																																														
Rationale	To improve access to urgent treatment for patients who meet the scope below.																																																														
Scope of use (the condition and patient group)	For patients older than 6 weeks presenting with mild to moderate pain as a primary or secondary complaint or with fever related discomfort																																																														
Medicine(s)	Oral tablets 500mg Oral liquid 250mg/5ml Oral liquid 120mg/5ml																																																														
Route of administration	Oral																																																														
Dosage range/ instructions	<ul style="list-style-type: none"> <li><b>Child:</b> (1month-18 years): 15 mg/kg as a single dose (maximum 1g per dose), every 4 hours;</li> <li>For the first 48 hours: maximum 75mg/kg per day (without exceeding 4g per day)</li> <li>After the first 48 hours: maximum of 60mg/kg per day (without exceeding 4g) thereafter</li> <li><b>Adult:</b> 1g as a single dose every 4 hours (maximum of 4g per day)</li> <li>Provide caregivers with an oral syringe to measure the dose.</li> <li>Store liquid &amp; tablets at room temp</li> </ul> <p>Quick calculator:</p> <table> <thead> <tr> <th colspan="2">Paracetamol <b>120mg/5ml</b> (over 3 months of age)</th><th colspan="2">Paracetamol <b>250mg/5ml</b></th></tr> <tr> <th>Weight In kgs</th><th>Usual dose (mls) 15mg/kg dose</th><th>Weight In kgs</th><th>Usual dose (mls) 15mg/kg dose</th></tr> </thead> <tbody> <tr><td>6</td><td>4</td><td>10</td><td>3</td></tr> <tr><td>8</td><td>5</td><td>12</td><td>3.5</td></tr> <tr><td>10</td><td>6</td><td>14</td><td>4</td></tr> <tr><td>12</td><td>7</td><td>16</td><td>4.5</td></tr> <tr><td>14</td><td>8</td><td>18</td><td>5.5</td></tr> <tr><td>16</td><td>10</td><td>20</td><td>6</td></tr> <tr><td>18</td><td>11</td><td>22</td><td>6.5</td></tr> <tr><td>20</td><td>12</td><td>24</td><td>7</td></tr> <tr><td>22</td><td>13</td><td>26</td><td>7.5</td></tr> <tr><td>24</td><td>15</td><td>28</td><td>8.5</td></tr> <tr><td>26</td><td>16</td><td>30</td><td>9</td></tr> <tr><td>28</td><td>17.5</td><td>32</td><td>9.5</td></tr> <tr><td>30</td><td>18.5</td><td>34</td><td>10</td></tr> </tbody> </table>			Paracetamol <b>120mg/5ml</b> (over 3 months of age)		Paracetamol <b>250mg/5ml</b>		Weight In kgs	Usual dose (mls) 15mg/kg dose	Weight In kgs	Usual dose (mls) 15mg/kg dose	6	4	10	3	8	5	12	3.5	10	6	14	4	12	7	16	4.5	14	8	18	5.5	16	10	20	6	18	11	22	6.5	20	12	24	7	22	13	26	7.5	24	15	28	8.5	26	16	30	9	28	17.5	32	9.5	30	18.5	34	10
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<b>Exclusions/ contraindications and precautions for using this medication</b>	<b>Exclusions: (patients with the following are to be referred to medical practitioner for management)</b> <ul style="list-style-type: none"> <li>children under 1 month, taking into account prematurity</li> <li>Patients with hypersensitivity to paracetamol</li> <li>Patients who present with or have a history of renal or severe liver dysfunction</li> <li>Patients who have had a dose of paracetamol in the last 4 hours</li> <li>Patients who are malnourished</li> <li>Patients who require a loading dose</li> </ul>			
<b>Persons authorised to administer this standing order</b>	A Registered Nurse (RN), working within _____, who is able to demonstrate a competency in working with this Standing Order.			
<b>Competency and training for the authorised person(s)</b>	Prior to administering <i>Paracetamol</i> under this Standing Order, RN staff are required to have: <ul style="list-style-type: none"> <li>Attended a relevant education session on the use of Standing Order and relevant training</li> <li>A current BLS/ CPR certificate.</li> <li>An annual review of competency in administration of this Standing Order by the Issuer.</li> </ul>			
<b>Monitoring: Countersign or audit</b>	<b>The Issuer of the Standing Order is required to determine whether this standing order will be countersigned or audited</b> (please refer to the MOH 2016 Standing Order Guidelines <a href="https://www.health.govt.nz/publication/standing-order-guidelines">https://www.health.govt.nz/publication/standing-order-guidelines</a> ) <b><u>Delete the option which is not applicable.</u></b>			
	<b>Option 1: Countersign</b>	If <u>countersigning</u> is the preferred option, the Issuer of the Standing Order is to specify the period which is required to be shorter than a month, e.g:  This standing order is to be countersigned by the Issuer of the Standing Order within _____ [timeframe to be determined by the issuer e.g. 48 hours, 72 hours, 3 working days, 5 working days]		
	<b>Option 2: Audit</b>	If <u>auditing</u> of the Standing Order is the preferred option, then the audit sample size as a minimum is to be used. The audit sample size as a minimum: <ul style="list-style-type: none"> <li>50 per cent of administration and/or supply records if there are 20 or fewer in total</li> <li>20- 30 per cent of administration and/or supply records if they are in range of 21–100</li> <li>15- 20 per cent of administration and/or supply records if there are over 100</li> </ul> If any administration and/or supply records found to be non-		

		complaint with the standing order, then the sample size is to be doubled. The audit result is documented, along with any required changes or improvements in relation to the Standing Order documentation, processes or training undertaken.
<b>Documentation and additional information</b>	Under the Standing Order, the notifying RN documents in the PMS the following: <ul style="list-style-type: none"> <li>▪ Current Health status (include weight)</li> <li>▪ Adverse effects</li> <li>▪ Changes to other medications</li> <li>▪ Other e.g. patient education, home visit arranged</li> <li>▪ Effectiveness of the medication after 30 minutes of administration</li> <li>▪ The patient assessment, treatment and, if necessary, any monitoring and follow-up required.</li> <li>▪ Dosage currently taken</li> <li>▪ Changed dose</li> </ul>	
<b>Definition of terms used</b>	BLS	Basic Life Support
	CPR	Cardio-Pulmonary Resuscitation
	PMS	Practice Management System
	RN	Registered Nurse
	SO	Standing Order
	Mild-moderate pain	Using the 0-10 pain scale or Wong Baker faces scale, 0-4 = mild pain, 5-7 = moderate pain
<b>Reference</b>	Health Navigator: <a href="#">Paracetamol   Health Navigator NZ</a> Starship Guidelines on Paracetamol (Oral/Rectal) <a href="https://www.starship.org.nz/guidelines/paracetamol-oral-rectal/">https://www.starship.org.nz/guidelines/paracetamol-oral-rectal/</a> Woods D (editor) New Zealand Formulary V62, August 2017. Available from <a href="http://www.nzf.org.nz">www.nzf.org.nz</a> Garra, G., et al (2010), Validation of the Wong-Baker FACES Pain Rating Scale in Paediatric Emergency Department Patients. Academic Emergency Medicine <a href="http://www.adhb.govt.nz">www.adhb.govt.nz</a>	
<b>Issued by</b>	Name:	NZMC#
	Title:	Date
	Signature: _____ Date: _____	
<b>RN Responsibilities</b>	RNs named below agree to the following: <ul style="list-style-type: none"> <li>▪ Only RNs operating under standing orders from the named issuer can supply or administer the medication for the condition that has been assessed as appropriate by that RN</li> <li>▪ The RN will ensure that they meet the regulatory requirements for an RN working under standing orders and must have:             <ul style="list-style-type: none"> <li>• The competency and training to assess that the standing order applies to the presenting patient/client</li> <li>• The competency to administer and/or supply the medicine</li> <li>• The knowledge to assess the exclusions/contraindications and precautions</li> </ul> </li> <li>▪ A register of the agreed standing order authorisations between the issuer and</li> </ul>	

	the registered nurse must be kept by the nurse and the issuer/practice and reviewed at least annually or when the issuer changes.	
Registered Nurse	Name:	APC#
	Signed	Date
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Document Control	This standing order is valid until it is due to be reviewed <u>OR</u> Is replaced by a new Standing Order <u>OR</u> Cancelled by the issuer	
	Issue Date: 30Mar2021	Review Date: 30Mar2022
	Classification: 0024/1	
	Approved by Metro Auckland Standing Order Steering Group with content review led by Dr Andre George With grateful acknowledgement to Silverdale Medical Centre for supplying the source document	