

Supply of Medicine

PATIENT GROUP DIRECTION (PGD) FOR

IBUPROFEN 400MG TABLETS/ SUSPENSION 100MG IN 5ML

YOU MUST BE AUTHORISED BY NAME, UNDER THE CURRENT VERSION OF THIS PGD BEFORE YOU ATTEMPT TO WORK ACCORDING TO IT

Clinical Condition	
Indication	Relief of pain, inflammation and pyrexia
Inclusion criteria	Patients 3 months of age and over presenting at MIU with pain and inflammation e.g. musculoskeletal pain, dental pain, dysmenorrhoea, back pain or fever
Exclusion criteria If any of the following apply the PGD CANNOT be used and the patient must be referred to a prescriber	<p>Children under 3 months of age</p> <p>Children less than 5kg weight (regardless of age)</p> <p>Pregnancy or breastfeeding</p> <p>History of, or active gastro-intestinal ulcers or gastro-intestinal bleeding.</p> <p>Crohn's disease or ulcerative colitis</p> <p>Previous allergic reaction to ibuprofen, aspirin or other NSAIDs</p> <p>Known renal or hepatic impairment.</p> <p>Individuals with coagulation defects e.g. haemophilia</p> <p>Patients with uncontrolled hypertension, congestive heart failure, ischaemic heart disease, peripheral arterial disease, and/or cerebrovascular disease.</p> <p>Patients taking any drug listed as interacting with ibuprofen in the current BNF Appendix 1 under NSAIDS, such as lithium, anticoagulants, zidovudine, diuretics, methotrexate, digoxin, ciclosporin, tacrolimus, pentoxifylline, ginkgo biloba or quinolones e.g. ciprofloxacin</p> <p>During chemical abortion with mifepristone</p> <p>Patients receiving concomitant medications which could increase the risk of ulceration or bleeding, such as oral corticosteroids, anticoagulants such as warfarin, selective serotonin-reuptake inhibitors (SSRIs) or anti-platelet agents such as aspirin / clopidogrel.</p> <p>Patients who have taken any preparation containing a NSAID within the previous 6 hours.</p>
Cautions - Seek further advice from doctor before proceeding and document advice	<p>Use with caution in elderly patients and the very frail who are more at risk of adverse reactions.</p> <p>Caution in individuals with asthma unless they know they can take ibuprofen without the asthma worsening,</p>
Further information	<p>In older people and the very frail paracetamol is preferred</p> <p>Infants should be given paracetamol in first instance.</p>
Action if patient declines or is excluded	Refer to doctor/A & E as appropriate. Document refusal or action taken in patient's records.

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Drug Details																	
Name, form & strength of medicine	Ibuprofen tablets 400mg Ibuprofen suspension 100mg in 5ml																
Legal status	Pharmacy Medicine (P)																
Route/Method	ORAL																
Dosage / frequency	<table> <thead> <tr> <th>Age</th> <th>Dose</th> </tr> </thead> <tbody> <tr> <td>Infants 3 - 6 months</td> <td>50mg (2.5ml) dose 3 times daily</td> </tr> <tr> <td>CHILD 6 months–1 year</td> <td>50mg (2.5ml) 3–4 times daily</td> </tr> <tr> <td>CHILD 1–3 years</td> <td>100mg (5ml) 3 times daily</td> </tr> <tr> <td>CHILD 4–6 years</td> <td>150mg (7.5ml) 3 times daily</td> </tr> <tr> <td>CHILD 7–9 years</td> <td>200mg (10ml) 3 times daily</td> </tr> <tr> <td>CHILD 10–12 years</td> <td>300mg (15ml) 3 times daily</td> </tr> <tr> <td>Over 12 years</td> <td>200mg - 400mg tablet 3 times daily</td> </tr> </tbody> </table>	Age	Dose	Infants 3 - 6 months	50mg (2.5ml) dose 3 times daily	CHILD 6 months–1 year	50mg (2.5ml) 3–4 times daily	CHILD 1–3 years	100mg (5ml) 3 times daily	CHILD 4–6 years	150mg (7.5ml) 3 times daily	CHILD 7–9 years	200mg (10ml) 3 times daily	CHILD 10–12 years	300mg (15ml) 3 times daily	Over 12 years	200mg - 400mg tablet 3 times daily
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Duration of treatment	Seek medical advice if symptoms no better after 3 days																
Quantity to supply	24 tablets or 100ml suspension																
Side effects	Nausea, vomiting, diarrhoea, dyspepsia - may be minimised by taking the drug with food or milk Headache Occasionally dizziness or visual disturbances (do not drive or operate machinery)																
Advice to patient/carer	Patient information leaflet from the pack. To be taken preferably with or after food Seek medical advice if pain/pyrexia worsens or if no improvement in 3 days If patient experiences any severe abdominal pain, pale or darkened stools, shortness of breath, reduction in urine output, itchiness, yellowing of skin/eyes or rash following the treatment they must see their GP																

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Staff Characteristics	
Professional qualifications	Nurses on the NMC Register
Specialist competencies or qualifications	A registered nurse trained in the management of minor injuries, after discussion and agreement with the service/departmental lead. Has undertaken appropriate training for working under PGDs for the supply and administration of medicines and is trained in the management of anaphylaxis.
Continuing education & training	The practitioner should be aware of any change to the recommendations for the medicine listed. It is the responsibility of the individual to keep up-to-date with clinical developments as part of their continued professional development.
Referral Arrangements and Audit Trail	
Records/audit trail	Patient's name, address, date of birth. Contact details of GP (if registered). Diagnosis. Advice given to patient (including side effects). Signature/name of staff who administered the medication. Details of any adverse drug reaction and actions taken including documentation in the patient's medical record Referral arrangements (including self-care) Record the use of the PGD in the departmental log.
References/Resources and comments	SPC – Summary of Product Characteristics BNF – British National Formulary
Clinical Authorisation	
Lead Doctor	Dr John Devapriam, Medical Director Signature:  Date: 17/10/18
Lead Pharmacist	Dr Alex Johnson, Prescribing Support Pharmacist Signature:  Date: 16.10.18
Organisational Authorisation	
On behalf of Worcestershire Health & Care NHS Trust	Michelle Clarke, Director Nursing & Quality Signature:  Date: 30/10/18
Patient Group Direction Peer Reviewed by	
Senior MIU Nurses	

