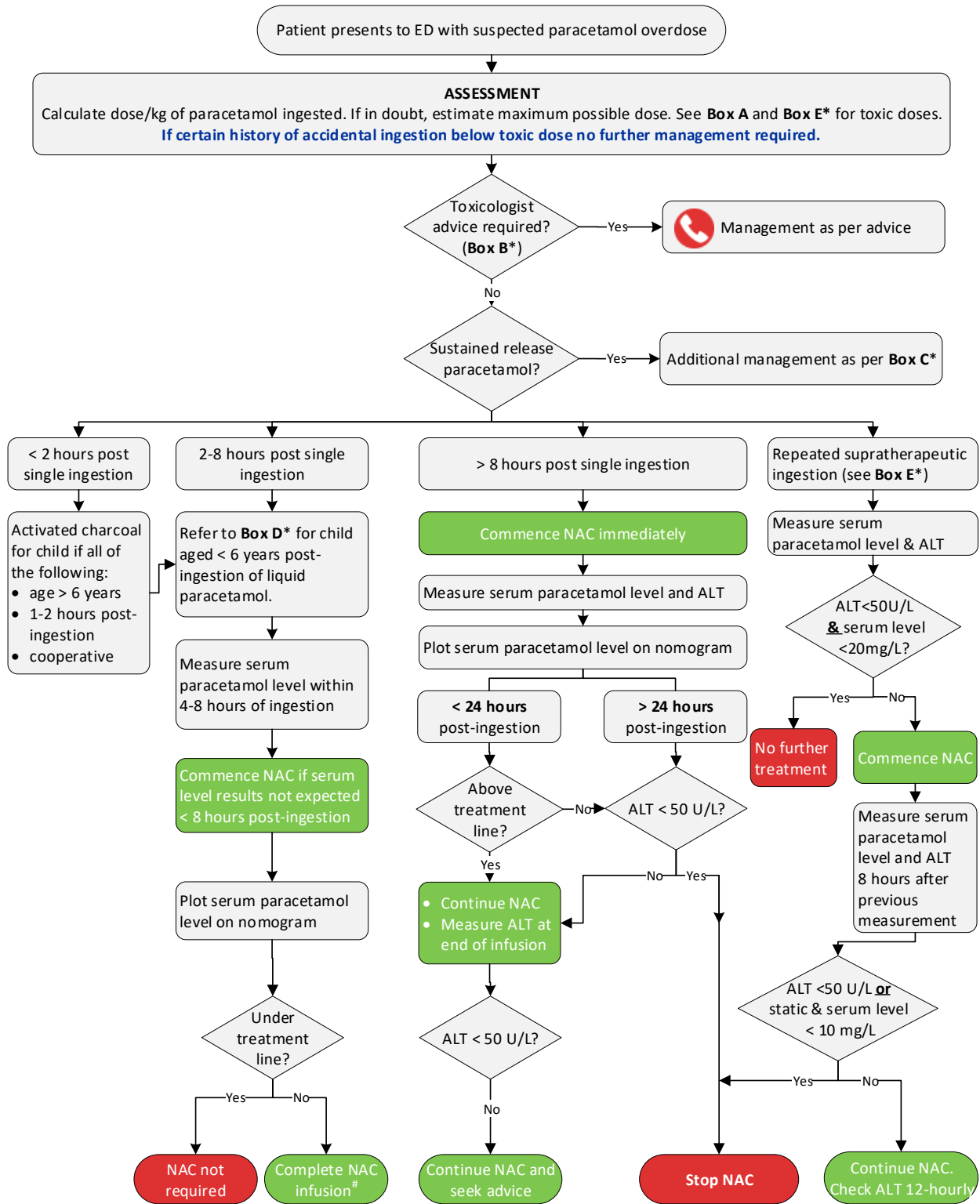


Queensland Paediatric Flowchart

Emergency

Paracetamol ingestion – Emergency management in children – Flowchart



**Box A: Paracetamol dosing that may be associated with hepatic injury**

Age 0-6 years:	> 200 mg/kg over 8 hour period
Age over 6 years:	> 200 mg/kg or 10 g (whichever is lower) over 8 hour period

# Seek Toxicology advice if serum paracetamol level is more than double treatment line

\* Box B-E over page

📞 Seek Toxicology advice via Poisons Information Line (Ph: 13 11 26)

[View treatment nomogram](#)

## Paracetamol ingestion – Emergency management in children

### Box B: Criteria for toxicologist advice

Seek urgent toxicological advice via Poisons Information (ph.: 131126) for the following:

- IV overdoses
- very large overdoses (50g or 1g/kg)
- evidence of hepatotoxicity (ALT greater than 1000 IU/L)

Critical care may be required.

If unknown time of potentially toxic single ingestion, commence NAC and seek advice re testing.

### Box C: NAC administration following sustained release paracetamol ingestions

Sustained release paracetamol preparations (such as Panadol Osteo and Osteomol) result in **potentially delayed** peak concentrations above the nomogram treatment line.

A single measurement of paracetamol level is not adequate to make decisions regarding NAC.

In addition to the management described for single toxic ingestions, **repeat serum level** 4 hours after initial testing and commence NAC if level is above the treatment line.

For all patients requiring NAC:

- measure paracetamol concentration levels and ALT 2 hours before completion of the NAC infusion
- continue NAC infusion and seek toxicology advice if ALT is greater than 50 U/L or paracetamol concentration is greater than 10 mg/L

### Box D: NAC administration following liquid paracetamol ingestions in children aged < 6 years

NAC will **not** be required for children aged less than 6 years with serum paracetamol concentration less than 150 mg/L at 2 hours post-ingestion of liquid paracetamol.

If greater than or equal to 150 mg/L do not commence NAC but repeat level at 4 hours.

### Box E: Repeated suprathreshold paracetamol ingestion that may be toxic

Age	Repeated suprathreshold ingestion
<b>0 - 6 years</b>	Any of the following: <ul style="list-style-type: none"> <li>• greater than 200 mg/kg over a single 24-hour period</li> <li>• greater than 150 mg/kg per 24-hour period for the preceding 48 hours</li> <li>• greater than 100 mg/kg per 24-hour period for greater than 48 hours (may have abdominal pain, nausea or vomiting)</li> </ul>
<b>Over 6 years</b>	Any of the following: <ul style="list-style-type: none"> <li>• greater than 200 mg/kg or 10 g (whichever is lower) over a single 24-hour period</li> <li>• greater than 150 mg/kg or 6 g (whichever is lower) per 24-hour period for the preceding 48 hours</li> <li>• greater than 100 mg/kg or 4 g (whichever is lower) per 24-hour period for greater than 48 hours AND symptoms indicating possible liver injury (such as abdominal pain, nausea or vomiting)</li> </ul>

For more information refer to [CHQ-GDL-60018 – Paracetamol ingestion – Emergency management in children](#)

