

**ORAL DOSE
FOR PAEDIATRICS
HOSPITAL BANTING**

UPDATED 10.04.2021

Disediakan Oleh: Pegawai Farmasi Unit Maklumat Ubat

Cy
CINDY FOW, RPh 8394
PEGAWAI FARMASI
HOSPITAL BANTING

Semakan Pertama Oleh: Pegawai Farmasi Ambulatori

N. Saroni
NUR ATIQAH BINTI SARONI
PEGAWAI FARMASI UF48

Semakan Kedua Oleh: Pegawai Farmasi Wad Pediatrik

ly
TE CHIN KEW, RPh 9416
Pegawai Farmasi
Hospital Banting

Siti
Siti Sakinah binti Noor Azmi
Pegawai Farmasi, RPh 14514
Hospital Banting

Dr. Noor Hafiza BT Noordin
DR. NOOR HAFIZA BT NOORDIN
MBBS (UM) Mmed Paed (UKM)
Pakar Perunding Kanan Pediatrik
Jusa Khas C
Hospital Banting
MPM 34000

Disemak & Disahkan Oleh: Pakar Pediatrik Hospital Banting

Jenny
DR. JENNIFER SL WONG
No. Pendaftaran MPM: 43507
Pakar Perubatan (Pediatrik) UDSM
Jabatan Pediatrik
Hospital Banting

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NO	DRUG & STRENGTH	DOSE	STORAGE		SHELF LIFE AFTER OPEN
			BEFORE OPEN	AFTER OPEN	
1	Acyclovir 200mg Tab Acyclovir 800mg Tab <u>Notes:</u> Slightly soluble in water ¹ (Freshly prepared)	<u>Based on age²:</u> <u>Herpes Simplex, suppression:</u> 12 – 17 years: 400mg BD, alternatively 200mg QID; increased to 400mg TDS <u>Herpes Simplex, prophylaxis in the immunocompromised:</u> 1 – 23 months: 100 – 200mg QID 2 – 17 years: 200 – 400mg QID <u>Herpes Simplex, treatment:</u> 1 – 23 months: 100mg 5 times a day for 5 days 2 – 17 years: 200mg 5 times a day for 5 days <u>Herpes Simplex, treatment, in immunocompromised or if absorption impaired:</u> 1 – 23 months: 200mg 5 times a day for 5 days 2 – 17 years: 400mg 5 times a day for 5 days <u>Varicella Zoster (chickenpox), treatment / Herpes zoster (shingles), treatment²:</u> 1 – 23 months: 200mg QID for 5 days 2 – 5 years: 400mg QID for 5 days 6 – 11 years: 800mg QID for 5 days 12 – 17 years: 800mg 5 times per day for 7 days <u>Herpes Zoster (shingles), treatment in immunocompromised:</u> 1 – 23 months: 200mg QID continued for 2 days after crusting of lesions 2 – 5 years: 400mg QID continued for 2 days after crusting of lesion 6 – 11 years: 800mg QID continued for 2 days after crusting of lesions 12 – 17 years: 800mg 5 times a day continued for 2 days after crusting of lesions	Store below 30°C. Protect from light.	-	

		<p><u>Varicella Zoster (chickenpox), attenuation of infection if varicella-zoster immunoglobulin not indicated:</u> Child: 10mg/kg QID for 7 days, to be started 1 week after exposure</p> <p style="text-align: right;">PIL 1 Tab Acyclovir 200mg (Pharmaniaga) PIL 2 Tab Acyclovir 800mg, Lovir (Ranbaxy)</p>		
2	<p>Albendazole 200mg/5ml Suspension (opaque, viscous liquid white to beige colored, fruit flavoured)</p> <p>Albendazole 200mgTab (for chew ^{PIL2})</p> <p><u>CI:</u> Not to be taken by children under 1 year old ^{PIL1,2}</p>	<p>Based on weight³:</p> <p><u>Pinworm, Threadworm, Roundworm, Hookworm, Whipworm³:</u> <10kg: 200mg oral once (<i>May repeat after 2 weeks</i>) >10kg: 400mg(<i>May repeat after 2 weeks</i>)</p> <p>OR</p> <p><u>Roundworm, Whipworm, Pinworm or Hookworm Infestation ^{PIL 1,2}:</u> 12 – 24 months: 200mg STAT >2 years and adults: 400mg STAT</p> <p><u>Threadworm and Tapeworm Infestation ^{PIL 1,2}:</u> 12 – 24 months: 200mg OD for 3 consecutive days >2 years and adults: 400mg OD for 3 consecutive days</p> <p><u>Mixed Worm Infestation ^{PIL 2}:</u> 400 BD for 3 consecutive days</p> <p><u>Single or Mixed Infestations of Intestinal Parasites⁴:</u> 12-24 months: 200mg STAT</p> <p><u>Strongyloides Infection^{3,4}:</u> <10kg: 200mg OD for 3 days (<i>May repeat after 3 weeks</i>) >10kg: 400mg OD for 3 days (<i>May repeat after 3 weeks</i>)</p> <p>OR 12 – 24 months: 200mg OD for 3 consecutive days</p>	Below 30°C in a cool dry place	-

		<p>>2 years and adults: 400mg OD for 3 consecutive days</p> <p><u>Chronic Strongyloides Infection²:</u> 2 – 17 years: 400mg BD for 3 days (<i>May repeat after 3 weeks</i>)</p> <p><u>Neurocysticercosis³:</u> 7.5mg/kg (adult 400mg) BD for 8-30 days</p> <p><u>Hydatid Disease^{2,3}:</u> 2 – 17 years: 7.5mg/kg BD(adult 400mg BD) for 28 days followed by 14 days break and then repeated for up to 2-3 cycles</p> <p>PIL¹ Albendazole Suspension 200mg/5ml (Idaman Pharma) PIL² Tab Albendazole 200mg, Champs (Upha)</p>			
3	<p>Amoxicillin 125mg/5ml Suspension (white powder. After reconstitution, white homogeneous suspension formed)</p> <p>*Higher doses for specific infection (Refer NAG) *May use STAT dose if can't tolerate increase in dose</p>	<p><u>Standard Dose^{17,3(pg:116)}:</u> 15mg/kg TDS (max: 1.5g/day)</p> <p>OR</p> <p><u>Infections caused by Susceptible Strains of Gram Positive and Gram Negative Organisms³:</u> 25mg/kg (adult : 0.25g-1g/dose) TDS OR 25 – 40mg/kg BD</p> <p>PIL¹ Sy Amoxicillin 125mg/5ml, Synamox (Idaman Pharma)</p>	Below 25°C in a dry place	Refrigerated	7 days
4	<p>Amoxicillin + Potassium clavulanate 228.5mg/5ml oral Suspension (Fleming) (DUO PRODUCT)</p> <p>(off-white powder. After reconstitution, off-white homogeneous suspension formed)</p>	<p><u>Standard dose³:</u> Syrup Augmentin 228.5mg/5ml is 7:1 (Duo) : 20-30mg/kg BD (Max: 875/125mg) Tablet Augmentin 625mg is 4:1 (Non-Duo): 15-25mg/kg TDS (Max: 500/125mg)</p> <p>PIL¹ Sy Amoxicillin/Clavulanic acid 228.5mg/5ml, Fleming (Healol Pharmaceutical) PIL² Tablet amoxicillin/potassium clavulanate 500mg/125mg, Co-amoxiclav (Pharmaniaga)</p>	Susp: Below 30°C in a dry place	Refrigerated	7 days

	Amoxicillin + Potassium clavulanate 500mg/125mg Tab (NON-DUO PRODUCT) <u>Notes:</u> Dose based on Amoxicillin component		Tab: Store below 25°C		
5	Atenolol 2mg/ml Oral Liquid <u>Notes:</u> Extemporaneous Preparation	Initial dose 0.5 – 1 mg/kg (max 25 -50 mg) OD – BD ^{3,9} Maximum dose 2mg/kg (100mg/day) ⁹	Room temperature. Use amber plastic bottle and protect from light.		1 month
6	Azithromycin 200mg/5ml Suspension (white to off-white powder. After reconstitution, white to off-white homogeneous suspension formed) <u>Notes:</u> For 15ml bottle, add 8ml water ^{PIL}	<u>1.Treatment</u> 15mg/kg OD on day 1 (Max: 500 mg) then 7.5mg/kg OD on day 2 – 5 (Max: 250mg) OR 15mg/kg OD (Max: 500mg) for 3 days ³ <u>2.Pertussis (pg:116):</u> 10mg/kg OD for 5 days (Max: 500mg) <u>3.Bronchiectasis/ Cystic Fibrosis (Anti-inflammatory)^{10:}</u> 6 years or older (less than 40kg): 250mg 3 times per week 6 years or older(40kg or greater): 500mg 3 times per week <small>^{PIL}Sy Azithromycin 200mg/5ml, Binozyt (Sandoz)</small>	Below 30°C	Below 30°C	5 days
7	Baclofen 10 mg/ml Suspension <u>Notes:</u> Extemporaneous Preparation	0.2mg/kg TDS increase every 3 days to 1mg/kg (adult 25mg, max 50mg) TDS ³	25 ±2°C, amber plastic bottle		2 months

8	Captopril 1mg/ml Suspension <u>Notes:</u> Extemporaneous Preparation	0.1-2mg/kg TDS (2.5-50mg TDS) ³	Refrigerate. Amber glass bottle.		1 month
9	Carbamazepine 100mg/5ml Syrup	2mg/kg TDS, may increase over 2-4 weeks to 5-10mg/kg (Max: 500mg) TDS ³ PIL Sy Carbamazepine 100mg/5ml Suspension, Tegretol(Novartis)	Below 30°C and protect from heat and light	Below 30°C and protect from heat and light	3 months *
10	Cefuroxime 125mg/5ml Suspension (dry, white to off-white, fruitflavoured granules) ^{PIL1,2} <u>Notes:</u> Mix with cold water. Can be further diluted in cold fruit juices or milk. Should NOT be mixed with hot liquids.. ^{PIL1}	Standard dose³: 10-15mg/kg (adult 250-500mg) BD PIL1 Sy Cefuroxime 125mg/5ml, Zinnat (GSK) PIL2 Sy Cefuroxime 125mg/5ml, Axcel (Kotra Pharma)	Below 30°C	Refrigerated	10 days. ^{PIL1,2}
11	Cephalexin 125mg/5ml Suspension (cherry red granules, cherry flavour, sweet taste)	<u>Skin or UTI³:</u> 12.5mg/kg (max 500mg) QID or 25mg/kg (max 1g)BD PIL Cephalexin 125mg/5ml (MPI)	15 - 25°C	Refrigerated	5 days
12	Chloral Hydrate 200mg/5ml <u>Notes:</u> Galenical Preparation	<u>Hypnotic/ Preprocedure³</u> 50mg/kg (max 2g) stat (ICU up to 100mg/kg, max 5g) <u>Sedative³</u> 10mg/kg TDS-QID OR <u>Sedation for painless procedures²</u> Neonate-11 years: 30–50 mg/kg (max. per dose 1 g), to be given 45–60 minutes before procedure, increased if necessary up to 100 mg/kg (max per dose 2 g) > 12 years: 1-2g, to be given 45-60 minutes before procedure	Room temperature (<25°C)		6 months

13	Chlorpheniramine 2mg/5ml Syrup (clear, colorless to yellowish, pineapple odour, & slightly sourish after taste) <u>CI:</u> Do not use for children below 2 years old ^{PIL}	<u>Standard Dose³:</u> 0.1mg/kg TDS-QID (Max:4mg/dose) ^{PIL} Chlorpheniramine Maleate BP Syrup 2mg/5ml, Alleryl (Idaman Pharma)	Below 30°C	Below 30 °C	3 months *
14	Clarithromycin 125mg/5ml Suspension (white to off-white powder and odorless) Notes: The prepared suspension can be taken with or without meals, and can be taken with milk.	1) <u>Treatment³:</u> 7.5 – 15mg/kg BD, max single dose 500mg 2) <u>Pertussis³⁽¹¹⁶⁾</u> 7.5mg/kg (max 500mg) BD for 7 days 3) <u>Immunomodulator¹²:</u> 7.5mg/kg OD ^{PIL} Clarithromycin Paediatric Suspension 125mg/5ml, Klacid (Abbott)	15 – 30 °C	15 – 30 °C	14 days
15	Clonazepam 0.1mg/ml Suspension <u>Notes:</u> Extemporaneous Preparation	0.01mg/kg (max 0.5mg) BD. Slowly increase to 0.1mg/kg (max 5mg) BD-QID ³	Room temperature. Use amber glass bottle. Avoid PVC containers. Protect from light.		2 months
16	Cloxacillin 125mg/5ml Suspension (white powder. After reconstitution, yellow suspension formed)	15mg/kg QID (Max:500mg/dose) ³ ^{PIL} Cloxacillin 125mg/5ml (Duopharma)	Below 30°C	Refrigerated	7 days
17	Diphenhydramine HCl 7mg/5ml Syrup <u>CI:</u> Not recommended below 2 years ^{PIL}	1-2mg/kg (adult: 50-100mg) TDS-QID ³	Below 30°C	Below 30 °C	3 months*
18	Dipyridamole 10mg/ml Oral Liquid <u>Notes:</u> Extemporaneous Preparation	1 – 2 mg/kg (adult 50 – 100mg) TDS – QID ³	Room temperature		2 months

19	<p>Erythromycin Ethylsuccinate 400mg/5ml Suspension (an almost white powder when reconstituted forms a pink, fruity flavoured, homogenous suspension)</p> <p><u>CI:</u> Do not use in children less than 2 months old due to pyloric stenosis³</p>	<p>Standard dose^{11,18,19:} 20mg/kg BD (Max: 1.6g/day)</p> <p>*EES is readily absorbed orally (Frequency is BD-QID) *BD dosing of EES will achieve similar concentration as base QID</p> <p>OR</p> <p><u>Usual Dose^{3:}</u> 10mg/kg QID (Adult: 250-500mg/dose)</p> <p><u>Severe Infection^{3:}</u> 15 – 25mg/kg QID (Adult: 0.75-1g/dose)</p> <p><small>PIL Erythromycin 400mg/5ml (Eryson, Upha Pharmaceutical)</small></p>	Below 30°C	Refrigerated	7 days
20	<p>Ferric Ammonium Citrate 400mg/5ml Syrup</p> <p><u>Notes:</u> Galenic preparation. Contained 86mg/5ml elemental iron</p>	<p><u>Prophylaxis^{3,9:}</u> 2-3mg/kg/day elemental iron</p> <p><u>Treatment^{3:}</u> 6mg/kg/day elemental iron</p>	Room temperature (<25°C)		3 months
21	<p>Folic Acid 1mg/ml Syrup</p> <p><u>Notes:</u> Extemporaneous Preparation</p>	<p><u>Deficiency^{3:}</u> Neonate: 50mcg OD < 4 years: 0.1-0.25mg OD > 4 years: 0.5-1mg OD</p> <p><u>Metabolic Disease: ³</u> 5mg/day</p>	Room temperature (<25°C)		2 months
22	<p>Frusamide 10mg/ml Syrup (orange flavoured with orange coloured clear solution)</p>	0.5-1mg/kg OD-QID ³ (Adult : 20-40mg/dose)	Below 30°C	Below 30°C	90 days

23	<p>Ibuprofen 100mg/5ml Syrup (colourless and apple flavoured)</p> <p><u>Notes:</u> Not recommended for children weighing less than 7kg or under the age of 1 year^{PIL}</p>	<p>10mg/kg (adult: 200-400mg) 4-8H³</p> <p>OR</p> <p>Analgesic:⁵ <u>Children ≥ 6 months (< 50kg)</u> 4 to 10mg/kg/dose every 6 to 8 hours (Maximum single dose 400mg, maximum daily dose: 40mg/kg/day)</p> <p>Antipyretic:⁵ <u>Infant & Children > 6 months</u> 5 to 10mg/kg/dose every 6 to 8 hours (Maximum single dose 400mg, maximum daily dose: 40mg/kg/day)</p> <p>Juvenile Idiopathic Arthritis: Usual range: 30-40mg/kg/day in 3-4 divided doses (Maximum 2.4g/day)</p> <p>^{PIL} Ibuprofen 100mg/5ml (Ibufen, Dynapharm)</p>	Below 30°C	Below 30 °C	3 months*
24	<p>Itraconazole 20mg/ml Oral Liquid</p> <p><u>Notes:</u> Extemporaneous Preparation</p>	<p>3 – 5 mg/kg OD (liquid); 5 – 7.5mg/kg OD (capsule)³ (Max: 200mg/dose)</p> <p>OR</p> <p>1.5 – 2.5mg/kg BD (liquid); 2.5 – 4mg/kg BD (capsule)³(Max: 100mg/dose)</p> <p>Severe infection: 5mg/kg BD (Liquid) (Max 200mg/dose)²</p>	Room temperature. Use amber plastic bottle and protect from light.		56 days
25	<p>Lactulose 3.35g/5ml Syrup (clear,viscous, colourless or pale brownish-yellow liquid)</p>	<p><u>Laxative</u>³: 0.5ml/kg BD</p> <p>OR</p> <p><u>Based on age</u>^{PIL}: <u>Infant under 1 year:</u> up to 5ml/day</p> <p><u>Children (1 – 6 years):</u> 5 – 10ml/day</p>	Below 30°C		3 months*

		<p><u>Children (7 – 14 years):</u> Starting dose: 15ml/day Maintenance dose: 10 – 15ml/day OD-BD</p> <p>^{PIL} Lactulose 3.35g/5ml Syrup, Unilac (KCK Pharmaceutical)</p>		
26	<p>Levothyroxine Sodium Tab <u>Notes:</u> Freshly prepared. Can mixed with small amount of breastmilk or water. Should not be mixed with soy formula or any preparation containing iron. It can reduce absorption of drug.⁹</p>	<p><u>Based on age⁹:</u> 0-3 months: 10-15 mcg/kg OD 3-6 months: 8-10 mcg/kg OD 6-12 months: 6-8 mcg/kg OD 1-5 yr: 5-6 mcg/kg OD 6-12 yr: 4-5 mcg/kg OD >12 yr: 2-3 mcg/kg OD</p> <p>* L-thyroxine can be given at different doses on alternate days, e.g. 50 mcg given on even days and 75 mcg on odd days will give an average dose of 62.5 mcg/day.</p>	-	-
27	<p>Loratadine 5mg/5ml Syrup (clear syrup having fruity flavour^{PIL1}&clear,colourless to pale yellow liquid)^{PIL,2} <u>Notes:</u> Not recommended below 2 year^{2,5,PIL1,2}</p>	<p><u>Based on weight ³:</u> < 12 kg : 2.5mg OD 12-30kg: 5mg OD > 30kg : 10mg OD</p> <p>^{PIL1} Loratadine Syrup 1mg/ml, Rhitin (Noripharma) ^{PIL2} Loratadine Syrup 1mg/ml, Loraten (SM Pharmaceutical)</p>	Below 30°C	3 months *
28	<p>Magnesium Trisilicate Mixture (white suspension with peppermint flavour)</p> <p><u>Notes:</u> Not recommended for children with body weight < 9kg ^{PIL}</p>	<p><u>Based on age²:</u> 5 – 11 years: 5 – 10ml TDS 12 – 17 years: 10 – 20ml TDS</p> <p>^{PIL} Mist Magnesium Trisilicate (Hovid)</p>	Below 30°C	3 months *
29	<p>Metronidazole 200mg/5ml Suspension (light orange coloured, fruity flavour with sweet taste)</p>	<p>15mg/kg (max 1g) STAT then 7.5mg/kg (max 1g) BD in neonate (1st maintenance dose 48 hr after load if < 2kg, 24 hr in term baby)</p>	Below 30°C	20 days (Company)

		<p>or 7.5mg/kg TDS (> 4weeks)³</p> <p>OR</p> <p>Children: 35 – 50mg/kg/day, in 3 divided doses for 10 days^{PIL}</p> <p>^{PIL} Metronidazole suspension, Metrogyl (Unique)</p>		
30	Multivitamin Syrup	<p><u>Based on brands:</u></p> <p><u>Uphavit^{PIL}:</u> <1 years: 0.5ml-1ml OD 1 – 3 years: 1 ml OD 4 – 12 years: 2.5ml OD > 12 years: 5ml OD</p> <p><u>Multi Elixir (KCK)</u> < 2 yr old: 1ml 2- 6 yr old: 2.5ml >6 yr old: 5ml</p> <p><u>Daily-Vite (Dynapharm)</u> < 1 yr old: 1ml 1 yrs and above: 5ml</p> <p>^{PIL} Multivitamin syrup Uphavit (Upha), Multi Elixir & Daily-Vite</p>	Below 30°C and protect from light	6 months
31	<p>Nitrofurantoin 10mg/ml Suspension</p> <p><u>Notes:</u> Extemporaneous Preparation</p> <p><u>CI:</u> Do not use in children less than 3 months and G6PD deficiency²</p>	<p><u>Treatment³:</u> 1.5mg/kg QID (Adult : 50-100mg/dose)</p> <p><u>Prophylaxis^{3,9} :</u> 1-2mg/kg ON (Adult : 50-100mg/dose)</p>	Room temperature. Amber plastic bottle.	3 months

32	Nystatin 100,000 units/ml Suspension (a yellow suspension with a raspberry-vanilla flavour)	<u>Treatment</u> ³ : <12 months: 100,000 units QID (1ml QID) >12 months: 500,000 units QID (5ml QID) <u>Prophylaxis</u> ³ : <12 months: 50,000 units TDS >12 months: 250,000 units TDS <small>PIL Nystatin 100,000 units/ml suspension, Tystatin(ImeksPharma)</small>	Below 30°C	Below 30 °C	7 days at room temperature
33	Omeprazole 2mg/ml Suspension <u>Notes:</u> Extemporaneous Preparation	0.4-0.8mg/kg OD-BD ³ (Adult : 20-40mg/dose) <u>Zollinger-Ellison Syndrome:</u> 1mg/kg OD-BD(Adult : 60mg/dose) , may increase up to 3mg/kg TDS ³ (Adult : 120mg/dose)	Refrigerate (2 – 8 °C). Protect from light		1 month
34	Oseltamivir 60mg/5ml Suspension (off white to light brown granular powder, forming an off white to light brown coloured suspension after reconstitution, with tuttifruittiflavour)	<u>Influenza Treatment:</u> <u><1 year</u> ² : 3mg/kg BD for 5 days <u>1 – 12 years</u> ^{2, PIL} : ≤ 15kg: 30mg BD for 5 days >15 – 23kg: 45mg BD for 5 days >23 – 39kg: 60mg BD for 5 days ≥ 40kg: 75mg BD for 5 days <u>13 years and above</u> ^{2, PIL} : 75mg BD for 5 days <u>Influenza Prophylaxis:</u> <u>< 1 year old</u> ² : 3mg/kg OD for 10 days <u>1 – 12 years</u> ^{2, PIL} : ≤ 15 kg: 30mg OD for 10 days >15 – 23kg: 45mg OD for 10 days > 23 – 39kg: 60mg OD for 10 days ≥ 40kg: 75mg OD for 10 days	Below 30°C	Refrigerated	14 days

		<p>13 years and above^{PIL}: 75mg OD for 10 days</p> <p>^{PIL} Oseltamivir 60mg/5ml suspension, Fluhalt (Ranbaxy)</p>		
35	<p>Paracetamol 250mg/5ml Syrup (pink suspension with raspberry flavour)</p> <p>Paracetamol 250mg Suppository Paracetamol 125mg Suppository</p>	<p>Oral³: 20mg/kg STAT then, 15mg/kg 4 – 6 hourly (max: 4g/day OR 60mg/kg/day) Neonate: 7.5mg/kg (<10 days) or 15mg/kg (>10 days) QID</p> <p>Suppository³: 40mg/kg stat, then 30mg/kg QID (max: 5g/day)</p> <p>^{PIL 1} Sy Paracetamol 250mg/5ml, Mili (KCK Pharmaceutical) ^{PIL 2} SuppParacetamol 125mg&250mg, PORO (YSP)</p>	Syrup & Supp : Below 30°C	Syrup: 3 months *
36	<p>Paraffin Liquid <u>Notes:</u> Galenical Preparation (Repack)</p>	1ml/kg daily ³ (Adult : 30-45 ml/day)	Keep airtight after use. Close promptly after use. Avoid sunlight.	6 months
37	<p>Phenoxymethyl Penicillin (Penicillin V) 125mg Tab <u>Notes:</u> Freshly prepared</p>	<p><u>General dosing³:</u> 10-15mg/kg (adult 250-500mg) QID</p> <p><u>Acute Glomerulonephritis¹⁶:</u> 7.5mg-15mg/kg QID for 10 days</p> <p><u>Nephrotic Syndrome⁹:</u> 1-5 years:125 mg BD 6-12 years:250 mg BD > 12 years:500 mg BD</p> <p><u>Acute Rheumatic Fever:⁹</u> Treatment: 250mg QID (<30kg), 500mg QID (>30kg) for 10 days Prophylaxis: 250mg BD</p> <p>^{PIL} Phenoxymethylpenicillin 125mg tablet, Penicillin V (Idaman Pharma)</p>	Below 30 °C	-

38	Potassium Citrate 1.5g/5ml Syrup <u>Notes:</u> Diluted with full glass of water or juice ^{PIL}	Based on age ^{2,4, PIL} : <1 year: 2.5mL TDS ⁴ Child 1 – 5 years: 5ml TDS >6 years: 10ml TDS ^{PIL} Potassium Citrate Mixture, Mist Possit (Idaman Pharma)	Below 25°C	Below 25°C	3 months *
39	Prednisolone 5mg Tab Notes: Freshly Prepared	1-2mg/kg OD (max 60mg) ³ OR <u>Nephrotic Syndrome^{9,16}</u> <u>Initial Treatment:</u> 60mg/m ² /day (max 60mg per day) for 4 weeks, then 40mg/m ² /EOD (max 40mg per day) for 4 weeks, then taper over 4 weeks and stop. <u>Initial/Infrequent relapse:</u> 60mg/m ² /day (max 60mg per day) until remission, then 40mg/m ² /EOD (max 40mg per day) for 4 weeks, then stop. <u>Frequent relapse:</u> 60mg/m ² /day (max 60mg per day) until remission, then 40mg/m ² /EOD (max 40mg per day) for 4 weeks, then taper Prednisolone dose every 2 weeks and keep on as low an alternate day dose of 0.1-0.5mg/kg/dose ¹⁶ for 6 months <u>Immune Thrombocytopenia (ITP)⁹</u> 2mg/kg/day for 14 days then taper off in 5 days Or 4mg/kg/day for 3-4 days	Below 30 °C		-

40	<p>Promethazine 5mg/5ml Syrup (light brown coloured, clear syrup with raspberry flavour)</p> <p><u>CI:</u> Do not used in children less than 2 years old due to fatal respiratory depression PIL</p>	<p><u>Antihistamine, Antiemetic</u>³: 0.2-0.5mg/kg/dose TDS (Adult : 10-25mg/dose)</p> <p><u>Sedative, Hypnotic</u>³: 0.5-1.5mg/kg/dose ³ (Adult : 25-100mg/dose)</p> <p>PIL Promethazine 5mg/5ml syrup, Prome (Noripharma)</p>	Below 30°C	Below 30°C	3 months *
41	<p>Propranolol 2 mg/ml Suspension <u>Notes:</u> Extemporaneous Preparation</p>	<p>0.2-0.5mg/kg (Adult : 10-25mg/dose) TDS-QID, may increase up to 1.5mg/kg (max 80mg) TDS-QID ³</p> <p>OR</p> <p><u>Hypertension</u> ⁹ 1-2mg/kg/dose BD-TDS (640mg/day)</p> <p><u>Infantile Hemangioma</u>⁹: 0.5mg/kg/day BD-TDS, may increase up to 1.5 -2mg/kg/day with daily increment 0.5mg/kg/day</p>	Room temperature		4 months
42	<p>Salbutamol 2mg/5ml Syrup</p>	<p>0.1-0.15mg/kg QID ³(Adult : 2-4mg/dose)</p> <p>PIL Salbutamol Syrup 2mg/5ml, Saltoline (Dynapharm)</p>	Below 25°C	Below 25°C	3 months *
43	<p>Shohl's Solution (Sodium Citrate 500mg/Citric Acid 334mg per 5 ml) <u>Notes:</u> Galenical Preparation. To be taken well diluted with water⁴</p> <p>1mL= 1mEq sodium = 1mEq bicarbonate</p>	<p><u>Based on age</u> ⁴: Child up to 1 year: 2.5ml TDS 1 – 5 years: 5ml TDS 6 – 12 years: 10ml TDS</p> <p>OR</p> <p><u>Infant and child</u>⁵: 2-3mEq bicarbonate/kg/day TDS-QID or 5-15mL after meals and at bedtime</p>	Below 25°C		1 month

44	Sodium Bicarbonate Mixture Paediatric (Mist Carminative Infant) <u>Notes:</u> Galenical Preparation	Child <1 years: 1.25ml QID ⁴ Child 1 – 5 years: 2.5ml QID ⁴	Below 25°C, protect from light	1 month	
45	Sodium Valproate 200mg/5ml Syrup (red and cherry flavour)	5mg/kg BD , increase if required to max 20mg/kg (max 1g/day) BD-TDS ³ <small>PIL Sodium Valproate 200mg/5ml, Epilim (Unither Liquid Manufacturing)</small>	Below 25°C	3 months *	
46	Spironolactone 2.5mg/ml Syrup <u>Notes:</u> Extemporaneous Preparation	<u>Based on weight</u> ³ : 0-10kg: 6.25mg BD 11-20kg: 12.5mg BD 21-40kg: 25mg BD > 40kg : 25mg TDS OR Neonate ² : 1-2mg/kg/day OD-BD (max 7mg/kg/day) 1 month to 11 years old ² : 1-3 mg/kg/day OD-BD (max 9mg/kg)	Refrigerate (preferable) or at room temperature. Amber glass bottle.	2 months	
47	Sulfamethoxazole 200mg + Trimethoprim 40mg Suspension (Bactrim) <u>Notes:</u> Dose calculated according to trimethoprim (TMP) <u>CI:</u> Contraindicated for below 2 months & G6PD ^{2,5}	<u>Usual Dosage</u> ³ : TMP 4mg/kg (adult 80-160mg) BD <u>Renal Proph</u> ³ : TMP 2mg/kg (max 80mg) OD <small>PIL Sulphamethoxazole 200mg & Trimethoprim 40mg, Dynaprim (Dynapharm)</small>	Below 25°C	Refrigerated	3 months (company)

48	Trimethoprim 10mg/ml Syrup <u>Notes:</u> Extemporaneous Preparation	4mg/kg(adult 75-150mg) BD or 6-8mg/kg (usual max 300mg) OD ³ OR <u>Urine Prophylaxis</u> ³ : 2mg/kg ON (adult: 150mg)	Refrigerate (preferable) or at room temperature. Amber plastic bottle.	1 month
49	Ursodeoxycholic Acid Suspension 50mg/ml <u>Notes:</u> Extemporaneous Preparation	5 – 10 mg/kg (adult 200 – 400mg) BD ³	Room temperature (23 – 25°C), amber plastic bottle	3 months

Tuberculosis Regimen

Recommended Doses for Anti-TB Drugs in Children^{8,9}

Anti-TB Drugs	Dose (mg/kg)	Max Dose (mg)	Syrup Strength in HBTG	Preparation	Storage ⁶	Shelf Life After Opening ⁶
Isoniazid (H)	10 (10-15)	300	-	Freshly	Room temperature & protect from light	-
Rifampicin (R)	15 (10-20)	600	25mg/ml	Extemporaneous		28 days
Pyrazinamide (Z)	35 (30-40)	2000	100mg/ml	Extemporaneous		2 months
Ethambutol (E)	20(15-25)	1000	100mg/ml	Extemporaneous		28 days
Pyridoxine ³	5-10 mg OD need to be added if isoniazid is prescribed		-	Freshly	Room temperature	-

Additional drug :

NO	DRUG & STRENGTH	DOSE	STORAGE		SHELF LIFE AFTER OPEN					
			BEFORE OPEN	AFTER OPEN						
1	<p>Acetylsalicylic Acid 300 mg Soluble Tablet (Aspirin). <u>Notes:</u> Soluble tablet, disperse in water¹(Freshly prepared)</p>	<p>10-15mg/kg 4-6H (Adult :300-600mg)³</p> <p><u>Antiplatelet</u>³ 5mg/kg OD (Adult : 81-100mg)</p> <p><u>Kawasaki Disease</u>⁹ 30-50mg/kg/day TDS for 14 days or afebrile 2-3 days.Then, maintenance dose 3-5mg/kg/day for 6-8 weeks or until ESR & platelet count normalise.</p> <p><u>Acute Rheumatic Fever</u>⁹ 80-100mg/kg/day QID for 2-4 weeks, tapering over 4 weeks</p> <p>PIL ¹Tab Acetyl Salicylic Acid 300mg, Millisprin (Idaman Pharma)</p>	Store below 30°C. Protect from light and moisture.	-						
2	<p>Deferasirox 90mg Film Coated Tablet (Exjade)</p> <p>Deferasirox 360mg Film Coated Tablet (Exjade)</p> <p><u>Notes:</u> For patients > 2years old. Should be swallowed whole with some water or may be crushed and administered by sprinkling the full dose on soft food like yogurt or apple sauce/ puree.^{PIL}</p> <p>Starting dose is depend on transfusion units of packed red blood cells or when evidence of chronic iron overload is present.^{PIL}</p>	<p><u>Starting dose</u>^{PIL}:</p> <table border="1"> <tr> <td>14mg/kg/day</td> <td>After 20u (~100mL/kg) of PRBC</td> </tr> <tr> <td>21mg/kg/day</td> <td>>14mL/kg/month of PRBC</td> </tr> <tr> <td>7mg/kg/day</td> <td><7mL/kg/month of PRBC</td> </tr> </table> <p>*PRBC: Packed red blood cell</p> <p>MAX: 28mg/kg/day</p> <p>PIL Deferasirox 90mg/180mg/360mg, Exjade Film Coated Tablet(Novartis)</p>	14mg/kg/day	After 20u (~100mL/kg) of PRBC	21mg/kg/day	>14mL/kg/month of PRBC	7mg/kg/day	<7mL/kg/month of PRBC	Store below 30°C .	-
14mg/kg/day	After 20u (~100mL/kg) of PRBC									
21mg/kg/day	>14mL/kg/month of PRBC									
7mg/kg/day	<7mL/kg/month of PRBC									

3	Desferrioxamine B Methanesulphonate 0.5g Injection (Desferal) Notes: Subcutaneous continuous infusion over 8-10 hours daily, 5-7 nights/week	20-40mg/kg/day ⁹		
4	Deferiprone 500mg Tablet (L1) Notes: For > 6years ^{PIL}	75-100mg/kg/day TDS ⁹ <u>if combination with Desferal:</u> 50mg/kg/day ² ^{PIL} Deferiprone 500mg, GPO-L-ONE	Store below 30°C .	-
5	Domperidone 1mg/ml Suspension (white raspberry-banana flavored) Notes: Domperidone is no longer indicated for the relief of nausea and vomiting in children aged under 12 years or those weighing less than 35 kg. ³	0.2-0.5mg/kg TDS(adult 10-20mg)) ^{2,3} ^{PIL} Domperidone Suspension 1mg/ml, Motigut (Square pharmaceutical)	Store below 30°C . Protect from light and moisture.	3 months *
6	Griseofulvin (Micronized) 125 mg Tablet Notes: Administer with a fatty meal(eg, whole milk, ice cream, peanut butter) to increase absorption. ⁵	10-20mg/kg daily (adult: 500mg-1g) ³ OR 10mg/kg/day in divided dose ^{PIL} ^{PIL} Tab Griseofulvin 125mg (Royce Pharma)	Below 30°C.	-

7	<p>Montelukast 4mg oral granules <u>Notes:</u> Administer by: 1.directly in the mouth 2.mixed with a spoonful of cold or room temperature soft food (e.g applesauce) 3.dissolved in 1 teaspoon(5ml)cold/ room temperature baby formula/breastmilk.</p> <p>NOT INTENDED TO BE DISSOLVED IN ANY LIQUID OTHERS THAN ABOVE.^{PIL1}</p> <p>Montelukast 10mgTablet</p>	<p><u>Based on age</u> ^{3:} 1-5 years: 4mg ON 6-14 years: 5mg ON >14 years: 10mg ON</p> <p>^{PIL 1}Montelukast 4mg Oral Granules, Singulair (Merck Sharp) ^{PIL 2}Tablet Montelukast 10mg, Montular (Kusum Healthcare)</p>	Below 30°C	Should not be opened until ready to use . After opening, the full dose must be administer immediately within 15 minutes. ^{PIL1}
8	<p>Oral Rehydration Sachet <u>Active ingredients:</u> Dextrose Anhydrous 3375mg /Sodium Citrate 725mg/ Potassium Chloride 375mg/ Sodium Chloride 650mg& orange powderflavoured^{PIL}</p> <p><u>Administration</u>^{15:} Mix one ORS sachet into 250mls of cool boiled water ONLY.</p>	<p><u>Based on age</u> ^{9:} Up to 2 years: 50-100ml after each loose stool > 2 years: 100-200ml after each loose stool</p> <p>OR</p> <p><u>Based on weight</u> ^{9:} 10ml/kg of ORS after each loose stool</p> <p>^{PIL} Oral Rehydration Sachet, ORS Plus (Pharmaniaga)</p>	Below 30°C ORS solution that has been prepared should not be kept for more than 24 hours.	

9	Phenytoin 30 mg Capsule Phenytoin 100 mg Capsule <u>Notes:</u> Freshly prepared.	<u>Initial maintenance dose³:</u> Preterm: 2mg/kg BD 1st week of life: 3mg/kg BD 2nd week- 4 years old: 3mg/kg TDS 5-12 years old: 3mg/kg BD >12 years old: 2mg/kg TDS (usual max 100mg)	Below 30°C .Protected from light.	-
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NOTES:

CI: Contraindication

PIL: Product Information Leaflet

*: The commercial syrup is recommended to be used within 3 months after opening, with the condition of good storage practice. If the syrup is kept in the condition with uncertain or poor storage practice, **1 month of shelf-life after opening** is suggested. If there is any taste change, odour change or colour change, the syrup should not be used and have to discard immediately.

Refrigerated: Temperature within 2°C to 8°C

Room Temperature: Temperature at 25°C ± 2

REFERENCES:

1. Martindale (33rd Edition)
2. BNF for Children 2019-2020& 2020-2021
3. Frank Shann (17th Edition 2017)
4. Formulari Ubat Kementerian Kesihatan Malaysia 2020
5. Lexicomp App 2020
6. Extemporaneous Preparation Worksheet in PhIS, Hospital Banting
7. Galenical Preparation Worksheet, Hospital Banting
8. CPG on Management of Tuberculosis 3rd Edition 2012
9. Paediatric Protocol (4th Edition), August 2019
10. Micromedex App Pediatric 2021
11. Antibiotics Choices for Common Infections (BPAC Edition 2017)
Available at: www.bpac.org.nz/antibiotics
12. Alffenaar J, Nienhuis W, de Velde F, Zuur A, Wessels A, Almeida D et al. Pharmacokinetics of Rifampin and Clarithromycin in Patients Treated for Mycobacterium ulcerans Infection. Antimicrobial Agents and Chemotherapy. 2010;54(9):3878-3883.
13. James Cherry, Gail J. Demmler-Harrison, Sheldon L. Kalpan, William J. Steinbach, Peter J Hotez. Feigin and Cherry's Textbook of Pediatric Infectious Diseases E-Book. 2018; 8th edition, Volume 1.
14. Oseltamivir Paediatric; <https://reference.medscape.com/drug/tamiflu-oseltamivir-342618>
15. How to Prepare and Serve Oral Rehydration Salt (ORS) - PORTAL MyHEALTH. Available at: <http://www.myhealth.gov.my/en/how-to-prepare-and-serve-oral-rehydration-salt-ors/>
16. Paediatric Pharmacy Services Guideline, 2015. Pharmaceutical Services Division, Ministry of Health, Malaysia.
17. National Antimicrobial guidelines (3rd Edition), 2019. Pharmaceutical Services Division, Ministry of Health, Malaysia; pg 213
18. Medscape App 2021
19. Micromedex Drug Ref App (Adult & Paediatric) 2021