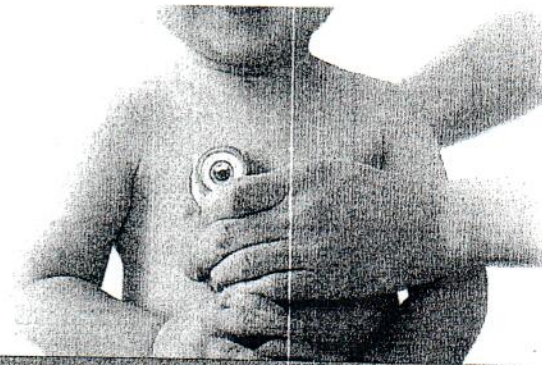


Infants' Acetaminophen Concentration Change

Companies are changing the concentration of their medications for infants, and there are new dosing directions for these products.



Professional Dosing Information

What you should know:

- There may be a time when both the old and new concentrations of infants' acetaminophen products are in stores and also in patients' homes
- For children under 2 years of age, no dose is provided on the OTC label — caregivers are instructed to call their doctor for dosing instructions

What you can do:

- 1 Clarify the concentration of infants' acetaminophen product a parent/caregiver is using
- 2 Identify the product concentration and dose for your patient's weight/age from the appropriate chart below
- 3 Discuss the infants' acetaminophen concentration change during sick and well visits

Infants' Acetaminophen Concentrated Drops — "Old" Concentration

80 mg/0.8 mL

Weight (lb)	Age (mos)	Dose (mL)
6-11 lbs	0-3 mos	0.4 mL
12-17 lbs	4-11 mos	0.8 mL
18-23 lbs	12-23 mos	1.2 mL
24-35 lbs	24-36 mos	1.6 mL

Infants' Acetaminophen Oral Suspension — "New" Concentration

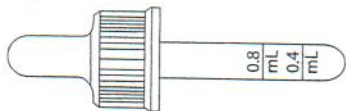
160 mg/5 mL

Weight (lb)	Age (mos)	Dose (mL)
6-11 lbs	0-3 mos	1.25 mL
12-17 lbs	4-11 mos	2.5 mL
18-23 lbs	12-23 mos	3.75 mL
24-35 lbs	24-36 mos	5 mL

Dosing schedule continues to provide approximately 10-15 mg/kg for children in the 10th-90th decile for weight.¹

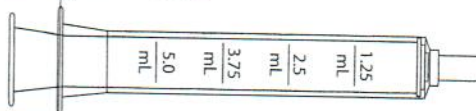
Infants' Acetaminophen Concentrated Drops

The enclosed dropper is designed to provide 0.4 mL (40 mg) increments



Infants' Acetaminophen Oral Suspension

The enclosed syringe is designed to provide 1.25 mL (40 mg) increments



Remind parents and caregivers:

- Infants' Acetaminophen Concentrated Drops are 3x more concentrated than Acetaminophen Oral Suspension
- Always read and follow the label
- Keep medicines out of the reach of children
- Never give adult medicines to children
- Use only the dosing device that comes with the product

1. Temple AR. Pediatric dosing of acetaminophen. *Pediatr Pharmacol.* (New York)1983;3(3-4):321-327.



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