

PHARMACIST ASSESSMENT AND PRESCRIPTION – COMPOUNDED ACETAMINOPHEN SUSPENSION

Patient Information		
Name:	HSN:	DOB:
Address:	Telephone:	
Assessment		
<input type="checkbox"/> No known allergies <input type="checkbox"/> Allergies:		<input type="checkbox"/> Severe hepatic impairment or severe active liver disease →Stop
Weight (for weight-based dosing):	<input type="checkbox"/> Unable to swallow tablets or attain dose with OTC dosage forms	
Use of Compounded Product Considerations (discuss prior to prescribing):		
<input type="checkbox"/> Where to have compound prepared <input type="checkbox"/> Expectations for cost, beyond-use date and storage <input type="checkbox"/> Timeline for when it will be ready		
Indication: <input type="checkbox"/> Mild to moderate pain <input type="checkbox"/> Fever		
Dosing Options for Compounded Acetaminophen Suspension:		
<input type="checkbox"/> Weight-based Dosing (≤ 43 kg or < 12 years old): 10-15 mg/kg per dose every 4-6 hours as needed (do not exceed 5 doses in 24 hours; maximum daily dose: 75 mg/kg/day not to exceed 4,000 mg/day.) <input type="checkbox"/> Fixed Dosing (> 43 kg and ≥ 12 years old): 325-1000 mg per dose every 4 to 6 hours as needed (up to 4000 mg per 24 hours)		
Weight-based Dosing Calculation [10-15 mg/kg per dose (up to 5 doses per 24 hours)]:		
Prescription Issued for Acetaminophen Compounded Suspension		
<input type="checkbox"/> Informed consent obtained <input type="checkbox"/> May have prescription filled at pharmacy of choice that can compound acetaminophen		
Rationale for prescribing:		
Rx: [drug and strength(mg)]:		
Dosage directions:		
Quantity: 7-day supply		
Prescribing Pharmacist		
Name:	Signature:	
Pharmacy:	Date:	
Telephone:	Fax:	