



ADULT MEDICATION GUIDELINE PARECOXIB Scope (Staff): All WNHS Staff Scope (Area): Obstetrics and Gynaecology This document should be read in conjunction with the Disclaimer.

Quick Links

<u>Dose</u> <u>Administration</u> <u>Monitoring</u> <u>Pregnancy and</u> <u>Breastfeeding</u>

Restrictions

Formulary: Unrestricted

Medication Class

Nonsteroidal Anti-inflammatory Drug (NSAID)

Presentation

Vial: 40mg

Storage

Store at room temperature, below 25°C

Dose

Schedule 8 Medication

Postoperative Pain

IV/IM:

40mg as a single dose

In patients >65yrs and <50kg or with moderate hepatic impairment:

20mg as a single dose

Administration

Step 1 Reconstitution:

IV/IM

Reconstitute the vial with 2 mL of sodium chloride 0.9%, glucose 5% or glucose 5% in sodium chloride 0.45%; the solution is clear and colourless

Step 2 Administration:

IV injection

Inject over a few seconds

IM injection

Inject slowly and deep into the muscle

Monitoring

Renal: Avoid use if CrCl <25 mL/minute

Hepatic: Contraindicated in severe impairment; reduce dose in moderate impairment (Child-

Pugh score 7-9) as elimination is decreased

Elderly: Reduce dose for elderly women <50 kg

Pregnancy

1st Trimester: Consider alternative
 2nd Trimester: Consider alternative
 3rd Trimester: Consider alternative

For more information, please contact KEMH Obstetric Medicines Information Service.

Breastfeeding

Considered safe to use

Comments

Regular oral NSAIDs may be commenced as soon as 1 hour after IV parecoxib or 2 hours after rectal diclofenac.

Related Policies, Procedures & Guidelines

WNHS Clinical Practice Guidelines:

The Hitchhikers Guide to Obstetric Anaesthesia

WNHS Pharmaceutical and Medicines Management Guidelines:

WNHS Medication Administration Guideline

WNHS Medication Management Guideline "Return and Disposal of Medications"

References

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	Std 2: Partnering with Consumers			Std 6: Communicating for Safety		
	Std 3: Preventing and Controlling Healthcare Associated Infection			Std 7: Blood Management		
	Std 4: Medication Safety			Std 8: Recognising and Responding to Acute Deterioration		
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