



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

# **Quick Links**

DoseAdministrationMonitoringPregnancy and Breastfeeding

### Restrictions

Formulary: Slow release tablet - Restricted,

<u>Immediate release - Provisional listing</u>: Under the direction of a Pain Service or Anaesthetist for inpatient and discharge patients.

Non-Formulary - IPA Required

HIGH RISK Medication

### **Medication Class**

**Analgesics** 

### **Presentation**

Immediate Release Tablets: 50mg

Slow Release Tablets: 50mg, 100mg, 150mg

## **Storage**

Store at room temperature, below 30°C.

Protect from light (slow release).

### **Schedule 8 Medication**

## Dose

### **Moderate to Severe Pain**

Doses vary and depend on the indication and previous analgesic requirements.

Titrate dose according to response, respiratory rate and sedation score.

**Suggested starting dose (immediate release):** 50 mg every 4 to 6 hours (a second 50 mg dose can be taken 1 hour after the initial dose if required). Usual maintenance 50 to 100mg every 4 to 6 hours. Maximum 600 mg in 24 hours (700 mg on day 1).

**Suggested starting dose (slow release tablets):** 50 mg twice daily, increasing by 50 mg twice daily every 3 days if required. Maximum 500 mg in 24 hours.

Doses may need reducing in moderate hepatic impairment.

## **Administration**

Slow release tablets: Swallow whole. Do not break, crush or chew.

## **Monitoring**

Respiratory rate, sedation score, dependence, constipation

## **Pregnancy**

Consider alternative

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

## Breastfeeding

Consider alternative, caution advised

For more information, please contact <u>KEMH Obstetric Medicines Information Service</u>.

### Related Policies, Procedures & Guidelines

#### **Department of Health**

Recommendations for prescribing analgesia on discharge following surgery or acute injury

CCC Report on the Supply and Management of Schedule 8 Controlled Drugs at Certain Public Hospitals in Western Australia

#### **WNHS Clinical Practice Guidelines:**

**Palliative Care** 

Acute Pain Service

<u>Pre-operative Medication Management</u>

Gynaecology (Non-oncological)

### **Patient Information Leaflet:**

Medicines used to manage pain

#### Post-operative pain control

### WNHS Pharmaceutical and Medicines Management Guidelines:

Anaesthetic technician competency framework for handling of controlled substances

Reporting of S8 or S4R medicine discrepancies

#### References

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| Keywords  | tapentadol, Palexia ®, immediate release, slow release, opioid, analgesia, analgesic, schedule 8, s8, controlled drug, controlled medicine, pain |   |                           |  |              |            |  |  |
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| NSQHS<br>Standards<br>Applicable:   | Std 1: Cli   | nical Governance                        | Std 5: Comprehensive Care |  |              |            |  |  |
|   | Std 2: Partnering with Consumers   |   |                           | Std 6: Communicating for Safety                          |              |            |  |  |
|   | Std 3: Pr  | reventing and Contr<br>ciated Infection | Std 7: Blood Management   |  |              |            |  |  |
|   | Std 4: Medication Safety   |   |                           | Std 8: Recognising and Responding to Acute Deterioration |              |            |  |  |
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