



## IV Ibuprofen Guidelines

**Indications:** (FDA Indication for adults and children  $\geq 6$ mo of age)

- Management of mild/moderate or moderate/severe pain
- Reduction of fever

**Criteria:**

- NPO orders
- Not tolerating PO ibuprofen
- Severe nausea and vomiting

**Restrictions:**

- If  $\leq 72$  hours of IV NSAID therapy is needed, ketorolac is preferred over IV ibuprofen for pain
  - If on multiple nephrotoxic medications or decreased renal function, IV ibuprofen is preferred over ketorolac. Daily serum creatinine monitoring is recommended with multiple nephrotoxic medications.
- A 48-hour automatic stop date should be placed on all IV ibuprofen orders to assess need for IV medication
  - May be reordered if patient still meets criteria
- No other active ibuprofen products on profile to prevent duplicate dosing
- Medication should be interchanged to PO ibuprofen once the following criteria are met:
  - Dietary orders are changed  
AND/OR
  - Patient is tolerating PO with minimal nausea and vomiting

**Dosing:** (note: patients should be well hydrated prior to administration)

- Should be administered over at least 10 minutes in pediatric patients and 30 minutes in adult patients

Analgesia and Fever (pediatric patients)	Dosing	Max Daily Dose
6mo to <12 years	10mg/kg/dose (Max 400mg/dose) q4-6hrs PRN	40mg/kg/day OR 2,400mg/day (whichever is less)
12-17 years	400mg q4-6hrs PRN	2,400mg/day
<b>Analgesia (adults, age &gt;17)</b>	400-800mg q6hrs PRN	3,200mg/day
<b>Fever (adults, age&gt;17)</b>	400mg, followed by either: <ul style="list-style-type: none"> <li>• 400mg q4-6hrs PRN</li> <li>OR</li> <li>• 100-200mg q4hrs PRN</li> </ul>	3,200mg/day

Approved: 9/20/18