

Prevention of secondary case of invasive group A streptococcal infection

► BY MOUTH

► Neonate: 12.5 mg/kg every 6 hours (max. per dose 62.5 mg) for 10 days.

- Child 1-11 months: 62.5 mg every 6 hours for 10 days
- Child 1-5 years: 125 mg every 6 hours for 10 days
- Child 6-11 years: 250 mg every 6 hours for 10 days
- Child 12-17 years: 250–500 mg every 6 hours for 10 days

Prevention of pneumococcal infection in asplenia or in patients with sickle-cell disease

► BY MOUTH

- Child 1-11 months: 62.5 mg twice daily
- Child 1-4 years: 125 mg twice daily
- Child 5-17 years: 250 mg twice daily

Acute sinusitis

► BY MOUTH

- Child 1-11 months: 62.5 mg 4 times a day for 5 days
- Child 1-5 years: 125 mg 4 times a day for 5 days
- Child 6-11 years: 250 mg 4 times a day for 5 days
- Child 12-17 years: 500 mg 4 times a day for 5 days

- **UNLICENSED USE** [EVRG](#) Duration of treatment for acute sinusitis adheres to national guidelines. [⚠](#) See Sinusitis (acute) p. 750 for further information.

Phenoxymethylpenicillin doses in the BNF may differ from product literature.

- **INTERACTIONS** → Appendix 1: penicillins
- **SIDE-EFFECTS** Arthralgia · circulatory collapse · coagulation disorder · eosinophilia · faeces soft · fever · increased risk of infection · neurotoxicity · neutropenia · oral disorders · paraesthesia
- **PREGNANCY** Not known to be harmful.
- **BREAST FEEDING** Trace amounts in milk, but appropriate to use.
- **EFFECT ON LABORATORY TESTS** False-positive urinary glucose (if tested for reducing substances).
- **PRESCRIBING AND DISPENSING INFORMATION** For choice of antibacterial therapy, see Antibacterials, use for prophylaxis p. 319, Ear infections, antibacterial therapy p. 324, Nose infections, antibacterial therapy p. 326, Oral bacterial infections p. 326, Oropharyngeal infections, antibacterial therapy p. 761.
- **PATIENT AND CARER ADVICE**
Medicines for Children leaflet: Penicillin V for bacterial infections www.medicinesforchildren.org.uk/penicillin-v-bacterial-infections
Medicines for Children leaflet: Penicillin V for prevention of pneumococcal infection www.medicinesforchildren.org.uk/penicillin-v-prevention-pneumococcal-infection
- **PROFESSION SPECIFIC INFORMATION**
Dental practitioners' formulary
Phenoxymethylpenicillin Tablets may be prescribed.
Phenoxymethylpenicillin Oral Solution may be prescribed.
- **MEDICINAL FORMS** There can be variation in the licensing of different medicines containing the same drug.

Oral solution

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► **Phenoxymethylpenicillin (Non-proprietary)**

Phenoxymethylpenicillin (as Phenoxymethylpenicillin potassium)
25 mg per 1 ml Phenoxymethylpenicillin 125mg/5ml oral solution | 100 ml [PoM](#) £34.00 DT = £2.53
Phenoxymethylpenicillin 125mg/5ml oral solution sugar free sugar-free | 100 ml [PoM](#) £25.00 DT = £7.10

Phenoxymethylpenicillin (as Phenoxymethylpenicillin potassium)
50 mg per 1 ml Phenoxymethylpenicillin 250mg/5ml oral solution | 100 ml [PoM](#) £35.00 DT = £5.81
Phenoxymethylpenicillin 250mg/5ml oral solution sugar free sugar-free | 100 ml [PoM](#) £35.00 DT = £7.47

Tablet

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► **Phenoxymethylpenicillin (Non-proprietary)**

Phenoxymethylpenicillin (as Phenoxymethylpenicillin potassium)
250 mg Phenoxymethylpenicillin 250mg tablets | 28 tablet [PoM](#)
£5.00 DT = £1.14

ANTIBACTERIALS > PENICILLINS, BROAD-SPECTRUM**F 362****Amoxicillin**

21-May-2020

(Amoxycillin)● **INDICATIONS AND DOSE****Susceptible infections (e.g. sinusitis, salmonellosis, oral infections)**

► BY MOUTH

► Neonate 7 days to 28 days: 30 mg/kg 3 times a day (max. per dose 125 mg).

- Child 1-11 months: 125 mg 3 times a day; increased if necessary up to 30 mg/kg 3 times a day
- Child 1-4 years: 250 mg 3 times a day; increased if necessary up to 30 mg/kg 3 times a day
- Child 5-11 years: 500 mg 3 times a day; increased if necessary up to 30 mg/kg 3 times a day (max. per dose 1 g)
- Child 12-17 years: 500 mg 3 times a day; increased if necessary up to 1 g 3 times a day, use increased dose in severe infections

► BY INTRAVENOUS INJECTION, OR BY INTRAVENOUS INFUSION

► Neonate up to 7 days: 30 mg/kg every 12 hours, increased if necessary to 60 mg/kg every 12 hours, increased dose used in severe infection.

► Neonate 7 days to 28 days: 30 mg/kg every 8 hours, increased if necessary to 60 mg/kg every 8 hours, increased dose used in severe infection.

► Child: 20–30 mg/kg every 8 hours (max. per dose 500 mg), increased if necessary to 40–60 mg/kg every 8 hours (max. per dose 1 g every 8 hours), increased dose used in severe infection

Community-acquired pneumonia

► BY MOUTH

- Child 1-11 months: 125 mg 3 times a day for 5 days; increased if necessary up to 30 mg/kg 3 times a day
- Child 1-4 years: 250 mg 3 times a day for 5 days; increased if necessary up to 30 mg/kg 3 times a day
- Child 5-11 years: 500 mg 3 times a day for 5 days; increased if necessary up to 30 mg/kg 3 times a day (max. per dose 1 g 3 times a day)
- Child 12-17 years: 500 mg 3 times a day for 5 days; increased if necessary up to 1 g 3 times a day

Acute exacerbation of bronchiectasis

► BY MOUTH

- Child 1-11 months: 125 mg 3 times a day for 7–14 days
- Child 1-4 years: 250 mg 3 times a day for 7–14 days
- Child 5-17 years: 500 mg 3 times a day for 7–14 days

Acute cough [if systemically very unwell or at higher risk of complications]

► BY MOUTH

- Child 1-11 months: 125 mg 3 times a day for 5 days
- Child 1-4 years: 250 mg 3 times a day for 5 days
- Child 5-17 years: 500 mg 3 times a day for 5 days

Acute otitis media

► BY MOUTH

- Child 1-11 months: 125 mg 3 times a day for 5–7 days
- Child 1-4 years: 250 mg 3 times a day for 5–7 days
- Child 5-17 years: 500 mg 3 times a day for 5–7 days