

FLURBIPROFEN (*Ansaid*) 200 to 300 mg/day PO divided two to four times per day. [Generic only: Tabs, immediate-release 50, 100 mg.] ▶L ⊗ ♀B (D in 3rd trimester) ▶+ \$\$\$ ■

IBUPROFEN (*Motrin, Advil, Nuprin, Rufen, NeoProfen, Caldolor*) 200 to 800 mg PO three to four times per day. Peds older than 6 mo: 5 to 10 mg/kg PO q 6 to 8 h. GI perforation and necrotizing enterocolitis has been reported with NeoProfen. [OTC: Caps/Liqui-Gel caps 200 mg. Tabs 100, 200 mg. Chewable tabs 100 mg. Susp (infant gttts) 50 mg/1.25 mL (with calibrated dropper), 100 mg/5 mL. Rx Generic/Trade: Tabs 400, 600, 800 mg.] ▶L ⊗ ♀B (D in 3rd trimester) ▶+ ■

INDOMETHACIN (*Indocin, Indocin SR, Indocin IV, Tivorbex*) Multiple strengths; write specific product on Rx. Immediate-release preparations: 25 to 50 mg cap PO three times per day. Sustained-release: 75 mg cap PO one to two times per day. [Generic only: Caps, immediate-release 25, 50 mg. Caps, sustained-release 75 mg. Trade only: Caps (Tivorbex), 20, 40 mg. Supp 50 mg. Oral susp 25 mg/5 mL (237 mL)] ▶L ⊗ ♀B (D in 3rd trimester) ▶+ \$ ■

KETOPROFEN (*Orudis, Orudis KT, Actron, Oruvail*) Immediate-release: 25 to 75 mg PO three to four times per day. Extended-release: 100 to 200 mg cap PO daily. [Rx Generic only: Caps, extended-release 200 mg. Caps, immediate-release 50, 75 mg.] ▶L ⊗ ♀B (D in 3rd trimester) ▶- \$\$\$\$ ■

KETOROLAC (*Toradol, Sprix*) **Moderately severe acute pain:** 15 to 30 mg IV/IM q 6 h or 10 mg PO q 4 to 6 h prn. Combined duration IV/IM and PO is not to exceed 5 days. **Moderately severe, acute pain, single-dose treatment:** 60 mg IM or 30 mg IV if patient younger than 65 yo, 30 mg IM or 15 mg IV if patient 65 yo or older, has renal impairment, or wt < 50 kg. [Generic only: Tabs 10 mg. Trade only: Nasal spray (Sprix-\$\$\$\$), 15.75 mg per spray. 8 sprays/bottle. Bottle to be discarded within 24 hours of taking first dose.] ▶L ⊗ ♀C (D in 3rd trimester) ▶+ \$\$ ■

MECLOFENAMATE **Mild to moderate pain:** 50 mg PO q 4 to 6 h prn. Max dose 400 mg/day. **Menorrhagia and primary dysmenorrhea:** 100 mg PO three times per day for up to 6 days. **RA/OA:** 200 to 400 mg/day PO divided three to four times per day. [Generic only: Caps 50, 100 mg.] ▶L ⊗ ♀B (D in 3rd trimester) ▶- \$\$\$\$ ■

MEFENAMIC ACID (*Ponstel, *Ponstan*) **Mild to moderate pain, primary dysmenorrhea:** 500 mg PO initially, then 250 mg PO q 6 h prn for no more than 1 week. [Generic/Trade: Caps 250 mg.] ▶L ⊗ ♀D ▶- \$\$\$\$ ■

MELOXICAM (*Mobic, Vivlodex, *Mobicox*) **RA/OA:** 7.5 mg PO daily. **JRA,** age 2 yo or older: 0.125 mg/kg PO daily. [Generic/Trade: Tabs 7.5, 15 mg. Generic only: Susp 7.5 mg/5 mL (1.5 mg/mL). Trade only: Caps (Vivlodex), 5, 10 mg.] ▶L ⊗ ♀C (D in 3rd trimester) ▶? \$\$\$ ■

NABUMETONE (*Relafen*) **RA/OA:** Initial: Two 500 mg tabs (1000 mg) PO daily. May increase to 1500 to 2000 mg PO daily or divided two times per day. [Generic only: Tabs 500, 750 mg.] ▶L ⊗ ♀C (D in 3rd trimester) ▶- \$\$\$ ■

NAPROXEN (*Naprosyn, Aleve, Anaprox, EC-Naprosyn, Naprelan, Prevacid NapraPAC*) Immediate-release: 250 to 500 mg PO two times per day. Delayed-release: 375 to 500 mg PO two times per day (do not crush or chew). Controlled-release: 750 to 1000 mg PO daily. **JRA:** Give 2.5 mL PO two times per day for wt 13 kg or less, give 5 mL PO two times per day for 14 to 25 kg, give 7.5 mL PO two

(cont.)