

Typical adult doses for common non-opioid analgesics

Analgesic	Dose for pain	Dose for osteoarthritis (OA)	Maximum doses
naproxen (<i>Naprosyn, Aleve, Anaprox, Naprelan,</i> and generics)	220 mg p.o. q6-12h p.r.n.	220 mg p.o. b.i.d.	1000 mg/day (pain and OA)
ibuprofen (<i>Motrin, Advil, Nuprin, Rufen,</i> and generics)	200-400 mg p.o. q4-6h p.r.n.	300-800 mg p.o. t.i.d.-q.i.d. (1200- 3200 mg/day)	1200 mg/day (pain); 3200 mg/day (OA)
diclofenac (<i>Cataflam, Voltaren,</i> and generics)	50 mg p.o. b.i.d.-t.i.d. p.r.n.	50 mg p.o. b.i.d.- t.i.d. (delayed- release diclofenac is also available)	200 mg/day
acetaminophen (<i>Tylenol, Panadol, Tempra,</i> and generics)	650-1000 mg p.o. q4-6h p.r.n.	extended-release, 650-1300 mg p.o. q8h	4 g/day; 3 g/day for patients >65 or with other co- morbidities

Note: These are general recommendations only; specific clinical decisions should be made by the treating physician based on an individual patient's clinical condition. *December 2005*

Typical adult doses for opioids

Medication	Product names	Typical doses
codeine with acetaminophen	<i>Tylenol #3</i> , generics	30 mg codeine (max 360 mg/day) + 650 mg acetaminophen (max 4 g/day) q4h p.r.n.
hydrocodone with acetaminophen	<i>Lorcet</i> , <i>Lortab</i> , <i>Vicodin</i> , generics	5 mg hydrocodone (max 60 mg/day) + 500 mg acetaminophen (max 4 g/day) q4-6h p.r.n.
oxycodone with acetaminophen	<i>Endocet</i> , <i>Percocet</i> , generics	5 mg oxycodone (max 60 mg/day) + 325 mg acetaminophen (max 4 g/day) q6h p.r.n.
tramadol	<i>Ultram</i> , generics	50 mg q4-6h p.r.n. (max 400 mg/day)
tramadol with acetaminophen	<i>Ultracet</i>	75 mg tramadol (max 300 mg/day) + 650 mg acetaminophen (max 4 g/day) q4-6h p.r.n.
<ul style="list-style-type: none"> ▪ Doses should be lower and/or dosing intervals longer in older patients or those with other co-morbidities. ▪ Individualize all dosing, especially in older patients, children, and patients with chronic pain, opioid tolerance, or hepatic/renal insufficiency. ▪ Start with the lowest effective dose for the shortest duration possible. Adjust dose and frequency as needed. 		



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December 2005

Balanced data about medications

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