

Who can administer

Administration RESTRICTED - see [Appendix 1](#)

Important information

- Usually given by intramuscular or oral route in GUH, rather than by IV route

Available preparations

Tradol 100mg per 2ml ampoule

Reconstitution

Already in solution

Draw up using a 5 micron filter needle

Infusion fluids

Sodium Chloride 0.9% or Glucose 5%

Methods of intravenous administration

Intermittent Intravenous infusion (preferred over Slow IV injection)

- Add required dose to 100mL of infusion fluid and administer over 15 to 30 minutes ^(ref 1)
- A 50mL infusion may be used if required (e.g. fluid restriction) but the residual volume in the infusion line must be flushed through at the same rate to avoid significant underdosing

Slow Intravenous Injection

- Administer over 2 to 3 minutes
- **Rapid intravenous injection** may be associated with a higher incidence of adverse events and therefore **should be avoided**.

Dose in adults

Usual dose for moderate to severe pain

- Give 50 to 100mg every 4 to 6 hours
- Usual maximum: 400mg daily
- **Elderly patients (>75years):** May need to extend dosage interval
- **Post-operative pain:** Different dosage regimes have been used (higher doses for first hour) - see [SPC](#)

Renal impairment

- Avoid use or reduce dose

Hepatic impairment

- Use with caution

- Consider increasing dosage interval

Monitoring

- If used in combination with SSRIs or other serotonergic agents, monitor for symptoms of serotonin syndrome (e.g. agitation, tremor, fever or diarrhoea)Â

Storage

- Store below 25⁰C

References

Tradol SPC December 2024

1:Medusa Injectable Medicines Guide downloaded 24/04/2025

Therapeutic classification

Opioid analgesic