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Ondansetron 4mg/5mL Syrup

Part A

Prescriber Criteria: Consultant Haematologist
Consultant Oncologist
Consultant Paediatric Surgeon
Consultant Paediatrician
Consultant Palliative Care

Outpatient and Inpatient use:

1. Malignant Diseases

Management of nausea and vomiting in patients receiving cytotoxics who are unable to swallow.

Duration of Approval:
1 year

Part B

Prescriber Criteria: Consultant Emergency Medicine Paediatrician

Inpatient use (A&E Only):
Management of persistent vomiting in paediatric emergency patients ≥ 6 months of age before initiation of oral rehydration salt.