

NARCOTIC CONVERSION CHART

*This chart should be utilized as a recommendation for conversion of injectable or oral opioid analgesics. It is to only be used as a guide.

Injectable – Injectable or ORAL conversion chart (approximate). Individual dose adjustment essential

DRUG	Onset	Peak	Half-Life	Duration	Equivalent Analgesic Dose	
Codeine^{a,b}	PO: 30-60min	60-90min 30-60min	3h	4-6 h 3-4 h		PO 200mg
Fentanyl^b (SUBLIMAZE [®])	IM: 7-15min IV: <5min	30min 15min	2-4h	1-2 h 0.5-1 h	IM/IV 100mcg	Patch 100mcg/hr
Hydrocodone^b (VICODIN [®] [w/APAP]; Hycodan [®])	PO: 10-20min	30-60min	3.3- 4.5h	4-8 h		PO 20mg
HYDROmorphONE^b (DILAUDID [®])	PO/IM/SC: 15-30min IV: 5min	30-60min 5-20min	2-3h	4-6 h 3-4 h	IM/IV/SC 1.5 mg	PO 7.5mg-10mg
Meperidine^{a,b,c} (DEMEROL [®])	PO/IM/SC: 10-15min IV: 5min	30-60min 5-20min	3-4h	3-4 h 2-3 h	IM/IV/SC 75mg	PO 300mg
Morphine^{a,b}	PO/IM/SC: 15-60min IV: 5min	30-60min 5-20min	2-4h	4-6 h 3-4 h	IM/IV/SC 10mg	PO 60mg acute 30mg chronic
Oxycodone^b (PERCOCET [®] [w/APAP])	PO: 10-15min	30-60min	2-3h	3-6 h		PO 15-30mg (20mg)
Propoxyphene^{a,b} (DARVOCET [®] [w/APAP])	PO: 30-60min	60-90min	6-12h	4-6 h	not for chronic pain management	PO 200mg (inconclusive)

Duration is based on immediate release formulations

^a Dose adjustment necessary in **RENAL** impairment

^b Dose adjustment necessary in **HEPATIC** impairment

^c **Meperidine (DEMEROL)** should be used for acute dosing only and **not used for chronic pain management** due to its short half-life (& duration of action) and toxic metabolite (normeperidine). Its use should also be avoided in patient with renal insufficiency, CHF, hepatic insufficiency, and the elderly because of the potential for toxicity due to accumulation of the metabolite (seizures, confusion, tremors, or mood alterations may occur).

Approximate equianalgesic opioid doses to Demerol (meperidine)

Meperidine 25mg IV/IM q2-4h ~ Morphine 3mg IV/IM/SC q3-6h ~ HYDROmorphONE 0.5mg IV/IM/SC q3-6h

Meperidine 50mg IV/IM q2-4h ~ Morphine 6mg IV/IM/SC q3-6h ~ HYDROmorphONE 1mg IV/IM/SC q3-6h

Meperidine 75mg IV/IM q2-4h ~ Morphine 10mg IV/IM/SC q3-6h ~ HYDROmorphONE 1.5mg IV/IM/SC q3-6h

Meperidine 100mg IV/IM q2-4h ~ Morphine 12mg IV/IM/SC q3-6h ~ HYDROmorphONE 2mg IV/IM/SC q3-6h

Charts available at: <http://www3.us.elsevierhealth.com/pain/charts.html>

Other non-opioid analgesic options:

Injectable: Ketorolac (Toradol)

Oral: Tramadol (Ultram), Celecoxib (Celebrex), NSAIDS (Ibuprofen, Naproxen), Acetaminophen (Tylenol)

*****These tables do not suggest starting doses; these are doses of opioids that produce approximately the same amount of analgesia. Published trials vary in the suggested doses that are equianalgesic to morphine. Using these tables, you can determine a dose of a new opioid and/or route of administration that is approximately equal in analgesic effect to the dose of the former opioid. Titration to clinical response is necessary & recommended doses do not apply to patients with renal or hepatic insufficiency or other medications/conditions affecting drug metabolism or kinetics. Elderly patients generally require lower doses, titrated slowly to the desired effect or intolerable side effects*****