HALOPERIDOL ADMINISTRATION – ORAL & INTRAMUSCULAR EQUIVALENT DOSES

The maximum recommended daily dose for each route of administration is different, because parenteral doses generally have a greater bioavailability than oral doses.

<table>
<thead>
<tr>
<th>Oral Haloperidol</th>
<th>0.5</th>
<th>1</th>
<th>1.5</th>
<th>2.5</th>
<th>4.2</th>
<th>5</th>
<th>7.5</th>
<th>8.3</th>
<th>10</th>
<th>12.5</th>
<th>16.7</th>
</tr>
</thead>
<tbody>
<tr>
<td>IM Haloperidol</td>
<td>0.3</td>
<td>0.6</td>
<td>0.9</td>
<td>1.5</td>
<td>2.5</td>
<td>3</td>
<td>4.5</td>
<td>5</td>
<td>6</td>
<td>7.5</td>
<td>10</td>
</tr>
</tbody>
</table>

**Maximum dose in 24 hours:**
- If only oral form prescribed: 20mg
- If only IM form prescribed: 12mg
- If oral & IM forms prescribed in combination, refer to table below for total daily dose

Please use the conversion chart below if a patient has received both haloperidol IM and oral in the last 24 hours, to calculate how much the patient had received in total:

*For example:*

Patient has been given 1 x 5mg haloperidol IM, followed 30 minutes later by 5mg **orally**, then 30 minutes later by another 5mg **orally**.

Convert to all **oral** doses, i.e. 8.3mg + 5mg + 5mg = **18.3mg oral** equivalent

Or

Convert to all **IM** doses, i.e. 5mg + 3mg + 3mg = **11mg IM** equivalent

**NOTE:** Each route of administration should be prescribed as a separate entry on the prescription chart