

Anticipatory prescribing guidance for community palliative care INJECTABLE medication for symptom control in the last days of life

		Suggested starting doses (if oral route no longer possible):				
Prescribe one drug for each symptom:	Drug	Subcutaneous PRN dose	Frequency	CSCI over 24 hrs via a syringe pump	Usual total maximum dose over 24 hrs	
Pain/breathlessness						
Opioid naive	Morphine sulphate (1 st line opioid)	2.5-5mg	1-2 hourly PRN	10-15mg/24 hrs	Call for advice if 3	
If already on opioids Please see separate opioid conversion table on page 2	Morphine sulphate or Oxycodone	1/6 of 24 hr subcutaneous dose	1- 2 hourly PRN	50% of total oral dose	PRN doses ineffective	
Nausea and vomiting						
Drug induced/metabolic	Haloperidol	0.5-1mg	Up to tds	1-3mg	3mg	
Prokinetic	Metoclopramide	10mg	tds	30mg	60mg	
Centrally induced (eg raised ICP)	Cyclizine	50mg	tds	150mg	150mg	
Agitation						
With anxiety	Midazolam	2.5-5mg	1-2 hourly PRN	10-15mg	30mg	
With delirium	Haloperidol	1-3mg	2-4 hourly	2-5mg	5mg	
Respiratory secretions			·		• 	
If causing distress	Glycopyrronium	200 -400 micrograms	4-8 hourly	600 micrograms	1200 micrograms	
(also used in bowel colic)	Hyoscine butylbromide	20mg	4 hourly	60-80mg	120mg	

ST CATHERINE'S HOSPICE

Opioid	Route	PRN or 4 hrly dose	24 hour dose	Conversion from oral morphine
Codeine phosphate	Oral	60mg (N.B. 6 hourly)	Max 240mg	Multiply by 10 (ie 6mg Morphine = 60mg codeine)
Morphine sulphate IR (immediate release) e.g. Oramorph	Oral	5mg	30mg	-
Morphine sulphate injection	Subcutaneous	2.5mg	15mg	Divide by 2
Oxycodone IR (immediate release) e.g. Shortec	Oral	2.5mg	15mg	Divide by 2
Oxycodone injection	Subcutaneous	1.25mg	7.5mg	Divide by 4
	Transe	dermal patches	1	
25 microgram/hour Fenta e.g. Durogesic, Mezolar Ma	Equivalent to app 60mg oral morph in 24 hrs	ine 10mg ora	PRN dose 10mg oral morphine sulphate IR (immediate release)	
Change every 72 hours			, , , , , , , , , , , , , , , , , , ,	,
10 microgram/hour Bupre e.g. Butrans, Butec	Equivalent to app 24mg oral morph in 24 hours	ine 5mg oral	PRN dose 5mg oral morphine sulphate IR (immediate release)	
Change every 7 days				

ST CATHERINE'S HOSPICE

Title: Mr	Name: Jonathon Smith	DOB: 01/04/1930	PRN INSTRUCTION CHA	ART NO: 1
Known as:	Jon	NHS no: 123 456 789	Date: 21 June 2018	Valid until: 1 month from issue
GP and Practice Name and contact details: Dr V. Able, Crawley Medical Practice Tel: 01293 123456 Fax: 01293 123457		Specialist Practitioner name and contact details: Laurence Nightingale St Catherine's Hospice 01293 447329	Special instructions e.g.	transdermal patch



PRN (MEDICATION AS NEEDED) INSTRUCTION CHART

Clinically assess – are symptoms being effectively controlled? Ensure PRN dose is in line with 24 hour dose.

If 3 or more PRN doses are needed in a 24 hour period consider review by GP or Specialist Practitioner.

Symptom	Medication	Dose (words and figures for CDs)	Frequency / max 24hr dose	Route	Prescriber name	Prescriber signature
PAIN	Morphine sulphate	2.5 – 5mg Two point five to five milligrams	2 hrly (max 20mg in 24hrs)	S/C	Dr V Able	V . Able
NAUSEA & VOMITING	Haloperidol	0.5-1mg	TDS (max 3mg in 24hrs)	S/C	Dr V Able	V. Able
RESPIRATORY SECRETIONS	Glycopyrronium	200-400mcg	4-8hrly (max 1200mcg in 24hrs)	S/C	Dr V Able	V. Able
ANXIETY & AGITATION	Midazolam	2.5-5mg Two point five to five milligrams	2hrly (max 15 mg in 24hrs)	S/C	Dr V Able	V. Able

ST CATHERINE'S HOSPICE