**ISLE OF WIGHT PRIMARY CARE TRUST** **JUST IN CASE BOX**

**RECORD OF DRUGS PRESCRIBED BY DOCTOR FOR ADMINISTRATION BY NURSE**

| **Name** | **Identifier** | **GP** |
|---|---|---|
| **Address** | | **DN Team** |

| Date | Drug | Dose | Route | Frequency | No. prescribed | GP Sign |
|---|---|---|---|---|---|---|
| | Diamorphine * | | SC | PRN | | |
| | Levomepromazine | 2. 5mg | SC | QDS PRN | | |
| | Midazolam | 2.5 – 5mg | SC | PRN | | |
| | Glycopyrronium | 400 micrograms | SC | TDS PRN | | |
| | Lorazepam | 0.5 -1mg | sublingual | PRN | | |
| | | | | | | |
| | **Syringe Driver** | **These drugs can be used separately or in combination. Prior to setting up the Syringe Driver consult with GP or IDOC regarding contents and dosage** | | | | |
| | Diamorphine * | | SC | Over 24hrs | | |
| | Levomepromazine [5 – 12.5mg] | | SC | Over 24hrs | | |
| | Midazolam [5 – 20mg] | | SC | Over 24hrs | | |
| | Glycopyrronium [1.2mg] | | SC | Over 24hrs | | |
| | Water for Injection [10mls] | | | | | |
| *** PLEASE ADD DOSE OF DIAMORPHINE AND NO. PRESCRIBED.** | | | | | | |

**THESE GUIDELINES ARE BASED ON BEST PRACTICE. IF NECESSARY SEEK ADVICE FROM THE SPECIALIST PALLIATIVE CARE TEAM ☎529511**

**In the absence of any known sensitivities or contraindications e.g. renal failure it is suggested that the following drugs in the box below are prescribed for "Just in Case" Boxes**

**1. Strong opiate injection** (according to local availability)
*a*. For opiate naïve patient prescribe morphine sulphate or diamorphine 2.5 - 5mg s/c prn.
*b*. For conversions of oral morphine to s/c morphine, s/c diamorphine or other opioid drugs see conversion chart overleaf. [*Quantity 5 / 10amps*]

**2. Antiemetic injection**
Levomepromazine 2.5mg s/c qds prn (or 5 – 12.5mg / 24hrs via syringe driver)
[*25mg / 1ml, 1ml ampoules - Quantity 10 amps*]

**3. Anxiolytic injection**
Midazolam 2.5 - 5mg s/c prn (or 5 – 20mg / 24hrs via syringe driver)
[*5mg / ml, 2ml ampoules - Quantity 10 amps*]

**4. Anticholinergic injection to reduce secretions**
Glycopyrronium (Robinul) 400 micrograms s/c tds prn (or 1.2mg / 24hrs via syringe driver)
[*200 micrograms /1 ml, 3ml ampoules - Quantity 9 amps*]

**5. Lorazepam 1mg** sublingual stat for dyspnoea or panic [*Quantity 28 tabs*]

**6. Water for injection 10ml** [Quantity 10]

**Syringe Drivers**

If frequent (>2/day) doses of any of these drugs are required then consider starting a s/c infusion using a syringe driver. See box on left for recommended ranges. The dose of diamorphine or morphine sulphate is calculated from the total number of prn injections given in 24hrs or can also be calculated from the 24hr dose equivalent of oral morphine divided by three.
Breakthrough dose is calculated as 1/6th of the total 24 hour opioid. To control symptoms a separate prn dose may be required immediately prior to commencing the syringe driver.

**Fentanyl patches**

**These are not a good choice for end of life analgesia** primarily because dose titration is too slow. However, if the patient already has a patch in situ then continue to change this every third day. If breakthrough pain occurs **give** diamorphine injections either prn (see box below) or by continuous infusion via syringe driver (seek advice).

| **Fentanyl patch strength microgram per hour** | **Additional diamorphine S/C PRN dose** |
|---|---|
| 25mcg / hr | 1.25mg – 5mg |
| 50mcg /hr | 7.5mg – 10mg |
| 75mcg/hr | 12.5mg – 15mg |
| 100mcg / hr | 20mg |

Remember that any calculation of breakthrough (prn) dose will need to take into account the Fentanyl and other opiates given

## A GUIDE TO EQUIVALENT DOSES FOR OPIOID DRUGS

N.B. – this is to be used as a guide rather than a set of definitive equivalences. Most data on doses is based on single dose studies so is not necessarily applicable in chronic use, also individual patients may metabolise different drugs at varying rates. The advice is always to calculate doses using morphine as standard and to adjust them to suit the patient and the situation. Some of these doses have by necessity been rounded up or down to fit in with the preparations available.

| **Oral Morphine** | | | **Subcutaneous Morphine** | | **Subcutaneous Diamorphine** | | **Oral Oxycodone** | | | **Subcutaneous Oxycodone** | | **Fentanyl transdermal** | **Subcutaneous Alfentanil** | |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| 4 hr dose (mg) | 12 hr SR dose (mg) | 24 hr total dose (mg) | 4 hr dose (mg) | 24 hr total dose (mg) | 4 hr dose (mg) | 24 hr total dose (mg) | 4 hr dose (mg) | 12 hr SR dose (mg) | 24 hr total dose (mg) | 4 hr dose (mg) | 24 hr total dose (mg) | Patch strength (micrograms) | 4 hr dose (mg) | 24 hr total dose (mg) |
| 5 | 15 | 30 | 2.5 | 15 | 1.25 | 10 | 2.5 | 7.5 | 15 | 1.25 | 7.5 | 25mcg | 0.125 | 1 |
| 10 | 30 | 60 | 5 | 30 | 2.5 -5 | 20 | 5 | 15 | 30 | 2.5 | 15 | 25mcg | 0.25 | 1.5 |
| 15 | 45 | 90 | 7.5 | 45 | 5 | 30 | 7.5 | 25 | 50 | 3.75 | 25 | 25mcg | 0.5 | 3 |
| 20 | 60 | 120 | 10 | 60 | 7.5 | 40 | 10 | 30 | 60 | 5 | 30 | 50mcg | 0.75 | 4 |
| 30 | 90 | 180 | 15 | 90 | 10 | 60 | 15 | 45 | 90 | 7.5 | 45 | 50mcg | 1 | 6 |
| 40 | 120 | 240 | 20 | 120 | 12.5 | 80 | 20 | 60 | 120 | 10 | 60 | 75mcg | 1.25 | 8 |
| 50 | 150 | 300 | 25 | 150 | 15 | 100 | 25 | 75 | 150 | 12.5 | 75 | 75mcg | 1.5 | 10 |
| 60 | 180 | 360 | 30 | 180 | 20 | 120 | 30 | 90 | 180 | 15 | 90 | 100mcg | 2 | 12 |
| 70 | 210 | 420 | 35 | 210 | 25 | 140 | 35 | 105 | 210 | 17.5 | 100 | 125mcg | 2.5 | 14 |
| 80 | 240 | 480 | 40 | 240 | 27.5 | 160 | 40 | 120 | 240 | 20 | 120 | 125mcg | 2.5 | 16 |
| 90 | 270 | 540 | 45 | 270 | 30 | 180 | 45 | 135 | 270 | max | 135 | 150mcg | 3 | 18 |
| 100 | 300 | 600 | 50 | 300 | 35 | 200 | 50 | 150 | 300 | s/c | 150 | 150mcg | 3.5 | 20 |
| 110 | 330 | 660 | 55 | 330 | 37.5 | 220 | 55 | 165 | 330 | vol | 165 | 175mcg | 3.75 | 22 |
| 120 | 360 | 720 | 60 | 360 | 40 | 240 | 60 | 180 | 360 | | 180 | 200mcg | 4 | 24 |

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