

First Name: **Self-populated**  
 Last Name: **Self-populated**  
 Date of Birth: **Self-populated**  
 NHS Number: **Self-populated**  
 Patient's GP practice: **Self-populated**  
 Patient's GP practice Tel **Self-populated** ('in hours')

**Palliative Care**  
**Patient Specific Direction**  
 (Authority to Administer)  
**Syringe Pump (McKinley T34)**

**Primary Care**

This form should be printed to accompany the 'just in case' medication prescription but it should not be completed in advance. This form should only be completed if treatment is likely to commence within the next week and treatment must be reviewed at least two weekly.

	Date dd/mm/yy	Dose over 24 hours tick or write required dose (words and	Route	Review Date dd/mm/yy	Doctor's Signature Name in capitals GMC number
<b>Pain:</b> Administer only if symptom present					
Diamorphine injection			Subcutaneously via syringe pump over 24 hours		
<b>Nausea/Vomiting:</b> Administer only if symptom present					
Levomepromazine (Nozinan) injection		6.25 mg	Subcutaneously via syringe pump over 24 hours		
		12.5 mg			
		25 mg			
		Other			
<b>Restlessness/Agitation:</b> Administer only if symptom present					
Midazolam injection		10mg	Subcutaneously via syringe pump over 24 hours		
		20mg			
		40mg			
		Other			
<b>Respiratory Tract Secretions:</b> Administer only if symptom present					
Hyoscine Butylbromide injection		60mg	Subcutaneously via syringe pump over 24 hours		
		120mg			
<b>Diluent:</b> All of the above medications are compatible with water for injection. For information on other medications please contact Severn Hospice (details below).					
Water for injection			Subcutaneously via syringe pump over 24 hours		
<b>Other Medication:</b> Administer only if symptom present					
			Subcutaneously via syringe pump over 24 hours		
			Subcutaneously via syringe pump over 24 hours		

**For further advice on medication**

**Shropdoc Professional Line - Tel 01743 454903 ('out of hours') or 01743 454900 ('in hours')**  
**Severn Hospice – 01952 221350/01743 236565, and in the appendix of the Shropshire EOL Care plan which can be viewed or downloaded from <http://www.severnhospice.org.uk/for-healthcare-professionals/gp-info-hub/eol-care-plan>**