

# Information for prescribers completing the EOL Patient Specific Direction Forms (Authority to Administer)

A completed and signed PSD authorises the administration of the prescribed subcutaneous medicine by a healthcare professional in the community. A PSD needs to be completed for each subcutaneous medication that is being prescribed for that patient (either via an FP10, Hospice TTO or an acute Trust discharge prescription).

## General points to consider when completing a PSD

- If using in EMIS or SystmOne the patient demographics will auto populate. Within the acute Trusts this information will need to be completed by the prescriber.
- Ensure that all the required information is included (For EMIS only, the grey areas denote the fields to complete):
  - Complete the allergies/adverse reactions section with the relevant information or NKDA. *Note that this information needs completing on ALL pages used.*
  - Tick the appropriate dose box for each medication authorised. Where a dose range is required, more than one box may be ticked. *See [prescribing information for pain and symptom control](#) on the hospice website for further guidance.*
  - If the required dose is not available as a tick box option, there may be the option to free type the dose. *The forms have been designed to accommodate most patients however where this option is not available a blank PSD can be used.*
  - When selecting an appropriate dose for PRN medication for a patient always consider any CSCI doses or background opiates.
  - For each medication authorised add your signature, name and date. *Electronic signatures may be used, including for controlled drugs.*
  - For Schedule 2 & 3 controlled drugs the registration number must also be added (GMC, NMC etc). A prompt is included on the form where a registration number is required.
  - The CSCI forms require a dose in 24hrs to be free typed for the opioids.
  - The diluent box must be signed on the CSCI forms. On the blank CSCI form, specify the diluent required depending on the medication prescribed. (Sodium Chloride or Water for Injection)

## Just in Case (JIC) or As Required (PRN) medication

- The PSD is valid for 3 months from completion. However, if more than 4 weeks has elapsed prior to the first dose being needed, the community nurse/health care professional will contact the medical practice, hospice non-medical prescriber (NMP) or out of hours service to discuss the prescribed doses prior to first administration.
- Use either the Morphine or Oxycodone PRN PSD form depending on the opiate required. Standard levomepromazine, hyoscine and midazolam doses are included on each. For non-standard options, use a blank form (for example levomepromazine for agitation or midazolam for seizure where higher doses are required).

## Continuous subcutaneous infusion (CSCI) syringe pump medication

- The syringe pump form should only be completed by a prescriber if CSCI treatment is needed immediately or likely within the next week. If more than 1 week has elapsed from the date prescribed the community nurse will contact the medical practice, hospice NMP or out of hours service to discuss the prescribed doses prior to first administration.
- Use the required pre-populated form where available. Alternatively use the blank CSCI form for non-standard options.

For prescribing advice scan the QR code on the PSDs, visit the information for health professionals on the hospice website [www.severnhospice.org.uk](http://www.severnhospice.org.uk), the regional palliative care guidelines via SPAGG [www.westmidspallcare.co.uk/wmpcp/guide](http://www.westmidspallcare.co.uk/wmpcp/guide) or contact the hospice directly for patient specific advice.