

Teaching Guideline

To be used in conjunction with the NHSGGC Patient/Informal Carer Administration of Subcutaneous Intermittent Medication in Adult Palliative Care Policy

Patient/Informal Carer name:	
Patient CHI number:	

This teaching guideline is a general guide to be used when patients and/or informal carers wish to be involved in the administration of subcutaneous medication by intermittent injections in adult palliative care.

This teaching guideline should be used alongside practical teaching and support from a healthcare professional.

A copy should be given to the patient receiving care, and when appropriate the carer for reference.

A copy of the completed record of competency should be filed in the patient's Care Plan.

A copy of the Patient/Informal Carer Information Sheet for Administration of Subcutaneous Intermittent Medication should be given to the patient/informal carer.

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Administration of medication by intermittent subcutaneous injections by patients/informal carers: adult palliative care

1.0 Introduction

You, or the person you are caring for, may have unpredictable or complex symptoms that may require medicines to be given by intermittent subcutaneous injection for comfort.

This type of injection is sometimes needed if taking medicines by mouth is not possible, or does not work well enough e.g. when someone cannot swallow or is being sick. The nurse or doctor will explain why this is needed in your particular case.

Some patients and carers want to be involved in giving the intermittent subcutaneous injections. This guideline is to help you do this.

You should not feel under any pressure to give the injections. If you or your carer at any time no longer wants to give the subcutaneous injections, this is okay. All you need to do is tell the nurse or doctor and they will arrange another way for the medicines to be given.

2.0 Aim of this teaching guideline

- To help you or the person supporting you with your care to know how to give intermittent subcutaneous injections of medicines safely and correctly.

2.1 What will I need to know and do?

- To know the name or names and doses of any medicines to be given by subcutaneous injection.
- Why they are being used.
- What symptoms the medicines are treating.
- Any side effects to look out for.
- To prepare a syringe and give subcutaneous injections safely and at the appropriate times.
- To keep a written record of the drugs, doses and times you have given the subcutaneous injections.
- To safely store and dispose of all the equipment/medications including the needles and syringes.
- To know when and how to get help.
- To consider issues related to a 'last injection'.

3.0 Administration of subcutaneous drugs by intermittent injections

3.1 What is a subcutaneous injection?

A subcutaneous injection is an injection into an area just under the surface of the skin where there is a layer of fat. This can be:

- Upper arms, chest, abdomen or outer aspects of thigh.
- In the shoulder area on the back if the person receiving the medication is confused, distressed or agitated.

There are three steps involved in giving a subcutaneous injection

- a healthcare professional will insert a small needle and thin plastic tube known as a cannula under the skin in a place that is easy to reach and safe. The cannula will be secured by a clear dressing.
- you or your carer may want to be involved in preparing the syringe
- give the medication through the cannula.

All items should be stored out of reach of children or vulnerable adults and not in direct sunlight

4.0 How to check an inserted cannula site

The cannula site should be checked daily for pain, swelling or redness and before any medication is administered.

If there is no pain, swelling or redness the cannula can be left in place for up to seven days. The nurse will arrange for this to be replaced after the seven days.

If you notice any pain, swelling or redness the cannula should not be used and you should contact the nurse who is supporting you to arrange for this to be replaced.

BD Saf-T-Intima Cannula



5.0 How to prepare syringe for subcutaneous injection via the cannula

Items required to prepare the syringe for giving medication:

- Palliative Care Kardex.
- Medication.
- Diluent to flush the cannula.
- Syringe and safety needle.
- Sharps bin.

5.1 Read the Palliative Care Kardex:

- To check the time of the last injection given and if it is OK to give another injection.
- If not within timeframe for drug to be given please contact your nurse via single point of access (SPOA) for advice.
- To check the name and dose of medicine to be given.

5.2 How to fill the syringe for giving medication:

1. Open syringe package, open safety needle package and attach the needle to syringe.
2. Snap the top off the ampoule and put it in the sharps bin.
3. Remove the needle cover.
4. Place needle into the middle of the ampoule and draw up required volume (dose) by slowly pulling back the end of the syringe.
5. Hold the syringe with the needle pointing upwards. Be careful not to touch the needle. Flick the syringe with your index finger to get all the bubbles to the top of the syringe.
6. Slowly press on the end of the syringe to get rid of the bubbles – a tiny drop of liquid will appear at the end of the needle.
7. Once medication is drawn up, close the safety needle (by pressing it on a hard surface until it clicks) and remove from syringe. Carefully place needle and ampoule in a sharps bin.

After using the cannula for administration of medicine it should be flushed with 0.2ml of sterile water for injection or saline

Items required to prepare the syringe for flushing the cannula

- Diluent for flush (sterile water or saline your nurse or doctor will tell you which you should use).
- Syringe and needle.
- Sharps bin.

5.3 How to give a subcutaneous injection via Cannula:

1. Clean the needleless connection system (e.g. bionecter) with an alcohol swab.
2. Connect the syringe filled with the medicine to the needleless connection system by pushing and turning clockwise until it stops. Give the medicine slowly by pushing the end of the syringe.
3. When the syringe is empty, disconnect the syringe from the needle free device by twisting anti-clockwise until it is released.
4. Put the empty syringe in the sharps bin.
5. Write down the name of drug, the dose, the date and time of administration in the palliative care kardex.

5.4 How to flush the cannula:

The cannula should be flushed after giving any medicines.

1. Connect syringe to be used to the needleless connection system by pushing and turning clockwise until it stops
2. To flush the cannula, slowly administer 0.2 ml of the contents of the syringe by pushing the end of the syringe.
3. Remove the syringe from the needleless connection system by twisting anti-clockwise until it is released.
4. Carefully put the syringe in the sharps bin.

6.0 Individual Requirements:

The nurse or doctor will explain to you and your carer about the medicine that you and/or your carer will be giving as intermittent subcutaneous injections. You will need to know:

- Name of the medicine/s.
- Diluent for flushing the cannula.
- The medicine dose, how often the medicine can be given.
- What symptom it is being used to treat.

6.1 How many injections can be given in 24 hours?

The number of injections you or your carer can give in 24 hours is usually 3 injections. The time required between giving injections will be explained to you and your carer by the named health professional who is supporting you with your care. There may be a degree of flexibility in the number of injections prescribed depending on individual needs. The dose able to be administered by you will be prescribed in the palliative care kardex by the professional team caring for you.

If you find there is a need for more frequent doses within a 24 hour period or if the medication isn't helping please contact the named health professional who is supporting you for advice and review of your medication before giving any further injections.

6.2 'Last injection'

When your loved one is very close to death, they may still require medication and this may be the last injection before they die. The health care professional supporting you with your care will discuss this with you.

The doses of the drugs which you have been giving are to relieve symptoms and will not in any way shorten or end life. Please raise any concerns you may have with the health care professional supporting you.

It is better to think about this now and to remember that the injections that you are giving are prescribed and are there to ensure that your relative remains comfortable.

7.0 RECORD OF COMPETENCY

Steps in Procedure	Discussed <small>(please Initial and date when completed)</small>	Observed the Health Care Professional <small>(please Initial and date when completed)</small>	Performed with supervision <small>(please Initial and date when completed)</small>	Confident undertaking procedure <small>(please Initial and date when completed)</small>
Describe medicines to be administered, why they are being used, expected benefits and potential side effects List medicines discussed:				
Demonstrate hand washing and discuss importance of this				
List equipment required to administer subcutaneous medication				
Explain and demonstrate the administration of subcutaneous medication				
Describe and demonstrate how to document medication/s given and discarded in the Palliative Care Kardex, including batch numbers and expiry dates				
Describe how to store and discard medication				
Explain when to seek advice and who to contact for advice				

Patient/Carer's Name:

Health Care Professional's Signature:

Designation:

Date of completion:

When and how to get help

- If your condition worsens or your symptoms do not improve after an injection seek help and advice as you may need a change in medication or dose
- If you are required to administer 3 doses of any of your medications in a 24 hour period, you will need to be re-assessed by a health professional to review your medication or dose
- If you, or your carer, are unsure about any aspect of giving subcutaneous injections
- If you, or your carer, no longer wants to give the subcutaneous injections

Phone Number/Times

District Nurse:

Day: _____ Out of Hours _____

GP:

Day: _____ Out of Hours _____