

Prescriber and Administrator Guidance for Subcutaneous Anticipatory Medications PRN and Syringe Pump

Please refer to local policy and guidance for anticipatory medications administration and monitoring. Seek support and guidance from specialist palliative care (SPC).

- Anticipatory medication prescribing avoids delays in treating the most common symptoms at the end of life, improves symptom control and may avoid hospital admission.
- Prescription should include medication for pain, anxiety, respiratory secretions, nausea and vomiting.
- Prescribe and administer within your competencies – medication ranges should be limited to allow administrators to manage symptoms within their skill.
- Refer to local guidance and patient assessment protocols.
- Begin with lower dose unless otherwise indicated, review and titrate accordingly.
- Review doses and consider benefit of syringe pump at a minimum of every 24 hours.
- Water for injection (10ml) typically used for diluent or Sodium Chloride 0.9% (10ml) on advice.
- Further support, guidance and advice for poorly controlled symptoms is available through SPC teams.

Specialist Palliative Care (SPC) Team Contact Details

Herefordshire	Contact details	Worcestershire	Contact details
St. Michael's Hospice (including OOH nursing & palliative consultant advice)	01432 852080	St Richard's Hospice	01905 763963
WVT SPC community team 9-5pm (7 days a week)	01432 851356	Worcestershire SPC community team 9-5pm 7 days a week North	01527 488064
WVT SPC Hereford Hospital 9-5pm (Monday-Friday)	01432 364414	SPC integrated community team 8-6pm Mon-Fri, 8-4pm Sat & Sun South	01905 763963
WVT neighbourhood team	01432 808750	Worcestershire OOH Palliative consultant advice	01905 763333 – WRH switchboard
		Worcestershire neighbourhood teams	0300 7906253

Regional & National Prescribing Guidance

- [Anticipatory Prescribing for adults at end of life](#)
- [Prescribing in palliative care](#)
- [Relative doses of opioids](#)
- <https://www.westmidspallcare.co.uk/>
- <https://www.pharmaceuticalpress.com/products/palliative-care-formulary/>

Community Pharmacy Stockists – urgent access medicine service

- [Pharmacy - Herefordshire and Worcestershire ICS](#)

Links & Resources

- [H&W Advance Care Planning - ReSPECT My Wishes](#)
- [Anticipatory_Medicines_Patient_Leaflet.pdf](#)
- [Care in the last year of life – H&W ICS](#)

Additional Symptom & Medicine Guidance – Prescribe PRN for all symptoms even if absent

Protocol management recommendations

	Medicine	Ampoule strength	Dose/24hrs Via syringe pump	Dose PRN	PRN dose frequency	Total Max dose/24hrs (inclusive of syringe pump)	Other considerations	CAUTION – contact SPC team if guidance or advice required
PAIN	Morphine sulphate	10mg/ml 30mg/ml	10mg-30mg	2.5mg-5mg	1 hourly	30mg	Titrate opioids if used for breathlessness.	Refer to WMPCP guidance for opioid conversions.
	Oxycodone *Do not mix with cyclizine*	10mg/ml 20mg/2ml	5mg-20mg	1mg-2.5mg	1 hourly	20mg		
NAUSEA AND VOMITING	Levomepromazine	25mg/ml	5mg-25mg	2.5mg-6.25mg	2 hourly	25mg	Broad spectrum – use if multiple possible causes	
	Cyclizine *not compatible with Hyoscine butylbromide or Oxycodone*	50mg/ml	75mg-100mg	25mg	2 hourly	100mg	Drug induced, biochemical cause, central cause	Consider compatibility
	Haloperidol	5mg/ml	2.5mg-5mg	0.5mg-1.5mg	2 hourly	10mg	Drug induced, biochemical cause	
BREATHLESSNESS	Morphine sulphate	10mg/ml	5-10mg	2.5mg-5mg	1-2 hourly	30mg	Avoid in renal impairment	Consider if opioid already prescribed
	Midazolam	10mg/2ml	5-30mg	2.5mg-5mg	1 hourly	30mg	Breathlessness related to anxiety	Check if medicine prescribed for anxiety

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Medicine	Ampoule strength	Dose/24hrs Via syringe pump	Dose PRN	PRN dose frequency	Total Max dose/24hrs (inclusive of syringe pump)	Other considerations
Hyoscine butylbromide* Not compatible with cyclizine*	20mg/ml	60mg-120mg	20mg	1 hourly	120mg	Does not cross blood-brain barrier so prevents drowsiness or confusion
Glycopyrronium	200micrograms/ml 600micrograms/ml	0.6mg-1.2mg	0.2mg	2 hourly	1.2mg	Does not cross blood-brain barrier so prevents drowsiness or confusion
Hyoscine hydrobromide	400micrograms/ml	1.2mg-2.4mg	0.4mg	2 hourly	2.4mg	Crosses blood-brain barrier so risk of drowsiness or confusion

RESPIRATORY
SECRECTIONS

Agitation

Midazolam	10mg/2ml	5mg-30mg	2.5mg-5mg	30 minutes	30mg	Delirium & agitation difficult to differentiate
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Renal Prescribing Guidance eGFR < 30ml/min/1.73m²

Prescribe with caution - lower doses, increased intervals and seek SPC advice if uncertain or before commencing syringe pump

Protocol management recommendations

	Medication	Ampoule strength	Dose/24hrs via syringe pump	Dose PRN	PRN dose frequency	Total maximum dose/24hrs (inclusive of syringe pump)	Other considerations
PAIN	Oxycodone	10mg/ml	Seek advice from SPC team	1mg-2.5mg	2-4 hourly	Seek advice from SPC team	Use if longer opioid duration required. May accumulate observe for toxicity consider reducing dose or increasing frequency of dose
NAUSEA AND VOMITING	Haloperidol	5mg/ml	Seek advice from SPC team	0.5mg-1.5mg	2 hourly	10mg	Avoid in Parkinson's disease. Contact SPC team.
	Levomepromazine	25mg/ml	5mg-25mg	2.5mg-5mg	2 hourly	25mg	Broad spectrum – use if multiple possible causes
	Cyclizine <i>*not compatible with Hyoscine butylbromide or Oxycodone*</i>	50mg/ml	Seek advice from SPC team	12.5mg	12 hourly	Seek advice from SPC team	Drug induced/biochemical cause/central cause
RESPIRATORY SECRETIONS	Hyoscine butylbromide	20mg/ml	Seek advice from SPC team	20mg	1 hourly	120mg	
	Glycopyrronium	200 microgram/ml 600 microgram/ml	Seek advice from SPC team	200 micrograms	4 hourly	1200 micrograms	
AGITATION	Midazolam	10mg/2ml	Seek advice from SPC team	1.25mg-2.5mg	30 minutes	Seek advice from SPC team	