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Palliative Care Medications for Patients in the Community in East and South Cheshire and Vale Royal during the COVID-19 Pandemic

Symptom Control Medications for Patients Assessed to be in the Last Hours to Days of Life as a Result of COVID 19 in the Community Setting

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and

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Symptom Control Medications for Patients Assessed to be in the Last Hours to Days of Life as a Result of COVID-19 in the Community Setting in East and South Cheshire and Vale Royal

- This advice has been developed by specialist palliative care across Cheshire and is designed to be used alongside the national document produced by the APM and RCGP (<https://elearning.rcgp.org.uk/mod/page/view.php?id=10537>) and the NICE guidance on symptom control in COVID 19 (<https://www.nice.org.uk/guidance/ng163>). As further national guidance becomes available it may need to be updated.
- For patients with probable or confirmed COVID 19 who are not for hospital transfer and wish to remain at home for end of life care consider prescribing the following medications that could be administered by carers **in addition** to anticipatory injectable medications as per the usual 'Blue Booklet' guidance and prescription.

Oramorph 10mg/5ml	2.5-5mg 2-4 hourly for pain and SOB	100ml supply
Lorazepam 1mg tablets (halved if possible)	500mcg-1mg 2-4 hourly for anxiety (max 4mg/24 hrs)	8 tablets
Haloperidol 500mcg tablets	500mcg PRN 2 hourly for N&V and delirium	20 tablets
Codeine Linctus	30-60mg PRN QDS for cough	200ml supply
Paracetamol	1g QDS for fever	16 tablets

- Injectable anticipatory medication should continue to be prescribed using the 'Blue Booklet'.
- Stocks of syringe pumps are monitored by community care teams and a small number have been loaned by the End of Life Partnership as a reserve supply for patients at home, in care homes or in hospital, should normal stock within those areas be exhausted. These will be accessible via the following routes:
 - **East Cheshire**- via East Cheshire Hospice 24 hours a day (Please Tel 01625 666999 if you need to access this additional stock of pumps). While efforts are ongoing to increase available stock it is possible a surge in numbers of patients dying of COVID 19 at home over a short period of time could mean a syringe pump will not always be available.
 - **South Cheshire & Vale Royal**- via the Specialist Palliative Care Team at Leighton Hospital in hours and via the on call Service Manager out of hours
- In this scenario symptom control medications will need to be delivered in a different way
- If a patient still has an oral route this should be used
- However patients in the last hours to short days of life are unlikely to be able to swallow. Therefore if no syringe pump is available medications may need to be delivered by:
 - Subcutaneous injection via a butterfly needle
 - Intra-nasally/sublingually
- The table below gives options that could be utilised for patients at the end of life with COVID 19 who are unable to swallow. **Many of the 2nd and 3rd line options are not our normal practice and are not licenced for the indications in the table. Only prescribe when 1st line options are unavailable.**
- Carers and, where possible, patients should be offered sensitive explanation if we are using medications out of our normal practice if this is the only option available to manage them at home.
- When prescribing it may be helpful to consider how long lasting the effects of medications are likely to be. Medications with longer half-lives are likely to be needed less frequently.
- The following are suggestions of how medications could be prescribed in an opioid naïve patient. Doses and frequencies may need to be adjusted due to, for example, frailty and poor renal function.
- Where there are two or more possible options these are listed in order of preference.
- Please seek Specialist Palliative Care Advice when needed, contact numbers are outlined at the end of this document. **It is recommended palliative care advice is sought if considering prescribing any 3rd line medication options.**

	Breathlessness and Pain	Nausea and Vomiting	Anxiety	Agitated delirium	Respiratory Tract Secretions
Syringe Driver required and available 1st line drugs	Morphine starting at 10mg/24 hrs and titrating to effect Please also see anxiety section if breathlessness is associated with anxiety	Prescribe according to cause of nausea. If cause unknown use Levomepromazine 6.25-12.5mg/24hrs. Titrate to max 25mg/24hrs	Midazolam 10mg/24 hrs titrated to effect up to maximum 60mg over 24 hours	Levomepromazine 25mg/24hrs and titrated to effect up to maximum of 200mg/24 hrs or Haloperidol 1-5mg/24 hrs	Glycopyrronium 600mcg-1200mcg/24 hrs
Syringe Driver required and available but 1st line drug(s) not available	Oxycodone 5-10mg/24 hrs and then titrating to effect Please also see anxiety section if breathlessness is associated with anxiety	Commence Cyclizine 100-150mg/24hrs. If symptoms persist after 24 hrs add Haloperidol 1-3mg/24hrs	If not on Haloperidol Levomepromazine 25mg/24hrs and titrated to effect up to maximum of 200mg/24 hrs or Lorazepam 500mcg-1mg SL BD	Midazolam 10mg/24 hrs and titrated to effect up to 60mg if distressing agitation with delirium and no antipsychotic available.	Hyoscine Hydrobromide 1200mcg-1600mcg/24 hrs or Hyoscine Butylbromide 60-120mg/24hrs *Cannot be mixed with Cyclizine*
No syringe driver but HCPs able to visit	Morphine 2.5-5mg s/c stat and either PRN 2-4hourly or regularly QDS Please also see anxiety section if breathlessness is associated with anxiety	Cyclizine 50mg s/c stat and either PRN 4hrly (maximum TDS) or regularly TDS If symptoms persist after 24 hrs add Haloperidol s/c 1-2mg nocte	Lorazepam 500mcg-1mg SL BD and PRN 2-4 hourly (max 4mg in 24 hrs) or Midazolam 2.5-5mg stat and either PRN 2-4 hourly or regularly QDS	Levomepromazine 12.5-25mg s/c stat and regularly OD or BD. Additional PRN doses up to 4 hourly. Maximum total daily dose 200mg in 24 hrs	Glycopyrronium 200 micrograms s/c stat and then PRN 4 hourly or regularly up to QDS or Hyoscine Hydrobromide 400 micrograms s/c stat and then PRN 4 hourly or regularly up to QDS or Hyoscine Butylbromide 20mg s/c stat then PRN 4 hourly or regularly up to QDS
Lay carer available but no HCP able to visit	Fentanyl 12 micrograms/hr patch or Buprenorphine 5-10micrograms/hr patch or Morphine 20mg/1ml liquid 0.5ml S/L BD	Olanzapine orodispersible tablet 2.5mg (half a 5mg tablet) stat dose and every 2-4 hrs PRN to a max total daily dose of 10mg in 24hrs	Lorazepam 0.5-1mg SL BD and PRN 2-4 hourly (max 4mg in 24 hrs) or Midazolam 2.5-5mg oromucosal solution pre-filled syringes PRN 2-4 hourly or Midazolam solution for injection 2.5-5mg intra-nasal via atomiser on end of syringe or SL PRN 2-4 hourly	Olanzapine orodispersible tablet 5-10mg OD and 5mg PRN 4 hourly up to max total daily dose of 20mg in 24 hrs or Levomepromazine solution for injection 25mg S/L	Hyoscine Hydrobromide 1mg/24 hr patches (Scopaderm) 2 patches changed every 72 hrs or Atropine 1% ophthalmic drops 1-2 drops QDS

1st line options

2nd line options

3rd line options – **would not usually be recommended for managing symptoms in last hours to days of life but may give some benefit if usual options are not possible, contact specialist palliative care for advice if considering prescribing. Prescribers should be aware that transdermal patches are likely to take up to 12 hours before starting to take effect. Doses in table are for opioid naïve patients. Doses may need to be adjusted to account for factors such as renal impairment or significant frailty. If the patient is already on a regular oral opioid this should be converted to subcutaneous via a syringe driver. If this option is not available contact palliative care for advice.**

Accessing Symptom Control Medications in the Community for Patients at the End of Life During the COVID 19 Pandemic

Selected pharmacies (see below) already hold an additional stock of anticipatory end of life medications in East and South Cheshire and Vale Royal. During this period they will also stock the oral medications outlined at the start of this document. The arrangements for community pharmacies supplying end of life medications is rapidly evolving and this document will be updated to reflect this as further details become available.

G.P out of hours will also be holding increased stocks of anticipatory end of life medications should these need to be accessed outside of pharmacy opening hours.

List of injectable medications selected pharmacies currently hold

Drug name and strength	Form	Pack size	Quantity which must be maintained at all times
Morphine 10mg/ml	Amps	10	1 pack
Morphine 30mg/ml	Amps	10	1 pack
Oxycodone 10mg/ml	Amps	5	1 pack
Oxycodone 50mg/ml	Amps	5	1 pack
Diamorphine 30mg	Amp	5	1 packs
Cyclizine 50mg/ 1ml	Amp	5	2 packs
Levomepromazine 25mg/1ml	Amp	10	1 pack
Midazolam 10mg/2ml	Amp	10	1 pack
Glycopyrronium Bromide 200mcg/ml	Amp	10	1 pack
Water for Injections 10ml	Amp	10	1 packs

Key Pharmacy Contacts for East and South Cheshire and Vale Royal (Stockists of End of Life Medications)

A list of these with contact numbers and opening times can be found within Appendix 3 of the following document

<http://www.cheshire-epaige.nhs.uk/wp-content/uploads/2020/04/Urgent-Palliative-Care-Medicine-Service-2020-v4-Cheshire-CCG.pdf>

Below is a list of 'Tier 3' pharmacies for South Cheshire, Vale Royal & Eastern Cheshire who have agreed to hold extra additional stock of injectable medications because of the Covid-19 situation.

PCN	Pharmacy	Address	Address1	Address3	Postcode	Phone no
CHOC	Tesco In Store Pharmacy	BARN ROAD		CONGLETON	CW12 1LR	0345 6779196
CHOC	Well	1 PARK LANE		CONGLETON	CW12 3DN	01260 280810
Eaglebridge	Boots	UNIT 12	GRAND JUNCTION RETAIL PK	CREWE	CW1 2RP	01270 251070
Eaglebridge	Well	EAGLE BRIDGE HEALTH CTR	DUNWOODY WAY	CREWE	CW1 3AW	01270 212842
GHR	Clear Pharmacy	31-32 THE MARKET CENTRE	VICTORIA STREET	CREWE	CW1 2NG	01270 213624
Knutsford	Boots	64 KING STREET		KNUTSFORD	WA16 6DT	01565 633114
Knutsford	Cohens Chemist	38 PRINCESS STREET		KNUTSFORD	WA16 6BN	01565 633078
Knutsford	The Prescription Service	11 TATTON STREET now 16 Princess Street		KNUTSFORD	WA16 6BU	01565 653229
Macclesfield	Andrews Pharmacy	71 KENNEDY AVENUE		MACCLESFIELD	SK10 3DE	01625 618481
Macclesfield	Cohens Chemist	WATERS GREEN MEDICAL CTR	SUNDERLAND STREET	MACCLESFIELD	SK11 6JL	01625 664405
Macclesfield	Peak Pharmacy	5-6 WESTON SQUARE	EARLSWAY	MACCLESFIELD	SK11 8SS	01625 423465
Macclesfield	Tesco In Store Pharmacy	TESCO SUPERSTORE	HIBEL ROAD	MACCLESFIELD	SK10 2AB	0345 6779455
Nantwich	Well	CHURCH VIEW CARE CENTRE	BEAM STREET	NANTWICH	CW5 5NX	01270 627565
Northwich	Rowlands Pharmacy	16 FIR LANE	SANDIWAY	NORTHWICH	CW8 2NT	01606 882449
SMASH	Alsager Pharmacy	25 LAWTON ROAD		ALSAGER	ST7 2AA	01270 882049
SMASH	Rowlands Pharmacy	ST ANNE'S WALK		MIDDLEWICH	CW10 9BE	01606 837604
SMASH	Well	ASHFIELDS P/CARE CENTRE	MIDDLEWICH ROAD	SANDBACH	CW11 1DH	01270 762205
SMASH	Well	Alsager Health Centre	12 SANDBACH ROAD SOUTH		ST7 2AD	01270 872798
Winsford	Ponda's Chemist	7 CHEVIOT SQUARE		WINSFORD	CW7 1QS	01606 593312
Winsford	Well	WINSFORD HEALTH CENTRE	DENE DRIVE	WINSFORD	CW7 1AT	01606 592543
CHAW	Boots	24-26 GROVE STREET		WILMSLOW	SK9 1DY	01625 523320

Accessing Specialist Palliative Care Advice - East Cheshire

Monday-Friday 9am-5pm

East Cheshire Specialist Palliative Care Team 01625 663177 (Specialist Nurse bleep 1004 via MDGH Switchboard)

Out of Hours

East Cheshire Hospice 24 hour Advice Line 01625 666999

Accessing Specialist Palliative Care Advice - South Cheshire & Vale Royal

Monday-Friday 9am-5pm

Northwich Care Community hub – 01606 564134.
Winsford Care Community – 01606 564139
Crewe Care Community – 01270 278420
Nantwich & Rural care Community – 01270 278430
SMASH* – 01270 278440

Out of Hours

St Luke's Hospice 24hr Advice Line 01606 5515489

Useful Links

- DNACPR form

<http://www.cheshire-epaige.nhs.uk/wp-content/uploads/2020/04/lilacform.pdf>

- Symptom Control Prescription and Administration Record (Blue Booklet)

<http://www.cheshire-epaige.nhs.uk/document-library/?top-category=symptom-management>

- Cheshire e-paige Covid-19 document library

<http://www.cheshire-epaige.nhs.uk/document-library/?top-category=covid-19>