

## The following medications and dose guidelines are recommended for symptom management in the last days of life

Symptom	Medication dose range and charting	How long does it take for s/c medication to work?	Common side effects
Pain (if opioid naïve)	R <sub>x</sub> <b>Morphine</b> 2.5-5mg s/c 4 hourly prn for pain	20 mins to take effect, peaks around 30-60 minutes.	Constipation, N & V, Dry mouth, itchy skin, drowsiness, confusion
	R <sub>x</sub> <b>Oxycodone</b> 1.25-2.5mg s/c 4 hourly PRN for pain	20 mins to take effect, peaks around 30-60 minutes	Constipation, Dry Mouth, N & V, drowsiness, confusion.
Terminal Restlessness	R <sub>x</sub> <b>Midazolam</b> 2.5-10mg s/c 4 hourly PRN for terminal restlessness/agitation	5-10 minutes to take effect	Can irritate the skin. Give slowly Drowsiness, forgetfulness
Respiratory Tract Secretions	R <sub>x</sub> <b>Hyoscine N-Butylbromide</b> 20mg s/c 4 hourly PRN for RTS	Rapid acting, lasts about 2 hours	Dry Mouth, blurred vision, rash, drowsiness, agitation
Nausea and Vomiting	R <sub>x</sub> <b>Levomepromazine</b> 2.5mg-5mg s/c 8 hourly PRN for nausea and vomiting.	60 mins to take full effect	Drowsiness, rash, dry mouth
Dyspnoea	R <sub>x</sub> <b>Morphine</b> 2.5-5mg s/c 4 hourly PRN for dyspnoea	20 mins to take effect, peaks around 30-60 minutes.	As Above
	R <sub>x</sub> <b>Oxycodone</b> 1.25-2.5mg s/c 4 hourly PRN for dyspnoea	20 mins to take effect, peaks around 30-60 minutes.	As Above.

### Indications for initiating a subcutaneous pump (SCP):

- SCP required if resident is currently on oral medication that needs to be continued e.g. M-Eslon and/or Metoclopramide. If a resident is already on regular opioids, the dose range may be different from above.
- If the resident experiences symptoms requiring ongoing prn medications (more than 3 prn medications in 24 hours) a sub cut pump should be considered as per symptom management guidelines.
- Refer to Arohanui Hospice or District Nursing for Syringe Driver Management if required.
- PRN medication can and should be used with SCP for symptom management.

### KEY PRACTICE POINT

Caution, consideration, critical thinking, clinical skills and knowledge are all required when administering appropriate and timely anticipatory medications.

