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

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 _x	Morphine 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
	Rx	Oxycodone 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 _x	Midazolam 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 _X	Hyoscine N-butylbromide 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 _x	Levomepromazine 2.5mg-5mg s/c 8 hourly PRN for nausea and vomiting.	60 mins to take full effect	Drowsiness, rash, dry mouth
Dyspnoea	R _x	Morphine 2.5-5mg s/c 4 hourly PRN for dyspnoea	20 mins to take effect, peaks around 30-60 minutes.	As Above
	Rx	Oxycodone 1.25-2.5mg s/c 4 hourly PRN for dyspnoea	20 mins to take effect, peaks around 30-60 minutes.	As Above.

In event of resident experiencing symptoms of COVID-19, it is likely there will need to be increased dose ranges, especially if there is a shortage of syringe drivers. Please contact Arohanui Hospice for medication management advice.

KEY PRACTICE POINT

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