All Wales Continuous Subcutaneous Infusion Medication Administration Record AWMR10
Why do we need a standardised chart?

- The All Wales Palliative Care Pharmacists Group (AWPCPG) collated information on how syringe drivers were being prescribed across Wales - both in primary and secondary care.
- It was noticed that prescribing of syringe drivers varied greatly between health boards, hospitals, hospices and in the community. It ranged from specific syringe driver charts or hospice charts to the use of stickers/writing on the All Wales Medication chart.
- As a way of reducing this variability and to promote safe prescribing, a single harmonised All Wales standard syringe driver chart across primary and secondary care was proposed.
Why do we need a standardised chart?

• This chart is only intended for prescribing continuous subcutaneous infusions. It is intended for use in both hospital and community settings.

• A standard All Wales drug chart should be used for all other accompanying medication.

• Further information on continuous subcutaneous infusions, including drug compatibilities, diluents, infusion sites, dose conversions and drugs commonly used in syringe drivers is available at: http://book.pallcare.info
### The new chart - Prescriber

<table>
<thead>
<tr>
<th>MEDICINE (approved name)</th>
<th>DOSE</th>
<th>PRESCRIBER’S SIGNATURE</th>
<th>DATE</th>
<th>TIME</th>
<th>DOSE OF MEDICATION ADMINISTERED (Only to be used if a dose range is prescribed)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Diamorphine</td>
<td>30mg</td>
<td>A. Prescriber</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Midazolam</td>
<td>15mg</td>
<td>B. Prescriber</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>Special instructions</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Start date</td>
<td></td>
<td>dd/mm/yy</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

**Diluent**
- Water for Injection
- Or Sodium chloride 0.9% w/v

**Duration of infusion** (please circle)
- 24 hrs / 12hrs / Other: ________ hrs

*Prescriber to initial if to continue*

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- Prescribe the drug, or combination of drugs, in the appropriate box, along with the dose of each drug to be infused over a set period.
### The new chart - Prescriber

<table>
<thead>
<tr>
<th>MEDICINE (approved name)</th>
<th>DOSE</th>
<th>PRESCRIBER'S SIGNATURE</th>
<th>DATE</th>
<th>TIME</th>
<th>DOSE OF MEDICATION ADMINISTERED</th>
</tr>
</thead>
<tbody>
<tr>
<td>Diamorphine</td>
<td>30mg</td>
<td>A. Prescriber</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Midazolam</td>
<td>15mg</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

- **Diluent** *(Please circle)*
  - Water for Injection
  - Sodium chloride 0.9% w/v

**Start date**: dd/mm/yy

**Special instructions**

**Duration of infusion**: (please circle)
- 24 hrs / 12hrs / Other: ________ hrs

*Prescriber to initial if to continue*

- Specify the diluent to be used. This will usually be water for injection
• Circle the intended duration of the infusion or specify the number of hours in the space provided. For the majority of infusions this is usually 24 hours.
### The new chart - Prescriber

<table>
<thead>
<tr>
<th>MEDICINE (approved name)</th>
<th>DOSE</th>
<th>PRESCRIBER'S SIGNATURE</th>
<th>DATE</th>
<th>TIME</th>
<th>Dose of medication administered</th>
</tr>
</thead>
<tbody>
<tr>
<td>Diamorphine</td>
<td>30mg</td>
<td>A. Prescriber</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Midazolam</td>
<td>15mg</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

- **Start date**: dd/mm/yy
- **Special instructions**: 
  - Duration of infusion (please circle): 24 hrs / 12hrs / Other: …… hrs
  - Prescriber to initial if to continue

- **Diluent**: (Please circle)
  - Water for Injection
  - Sodium chloride 0.9% w/v

- **Stop pe**
- **Set up by**: 
  - Pharmacy
- **Checked by**: 
  - AP

- **Prescriber to initial if to continue**: 
  - AP

### Notes
- If the prescribed drug, or combination of drugs, is to be continued then the prescriber should initial this section. This allows the prescribed regime to be administered up to seven times after which the chart should be rewritten.
- If it not initialled the prescribed regime may only be administered **ONCE**.
- The prescriber should review the regime at regular intervals.
The new chart - Prescriber

- When a new regime is prescribed cross through the previous prescription.
The new chart – Nursing staff

- The nursing staff must complete this section of the chart each infusion set up, documenting the date, start and stop times.
### The new chart – Prescriber

<table>
<thead>
<tr>
<th>MEDICINE (approved name)</th>
<th>DOSE</th>
<th>PRESCRIBER’S SIGNATURE</th>
<th>DATE START</th>
<th>TIME START</th>
<th>DATE STOP</th>
<th>TIME STOP</th>
<th>DOSE OF MEDICATION ADMINISTERED</th>
</tr>
</thead>
<tbody>
<tr>
<td>Diamorphine</td>
<td>30mg - 40mg</td>
<td>A. Prescriber</td>
<td>dd/m/m/yy</td>
<td>00:00</td>
<td>dd/m/m/yy</td>
<td>00:00</td>
<td>Med 1</td>
</tr>
<tr>
<td>Midazolam</td>
<td>25mg - 20mg</td>
<td>Pharmacy</td>
<td>dd/m/m/yy</td>
<td>00:00</td>
<td>dd/m/m/yy</td>
<td>00:00</td>
<td>Med 2</td>
</tr>
</tbody>
</table>

- **Diluent (Please circle):**
  - Water for Injection
  - Sodium chloride 0.9% w/v

- **Start date:**
  - dd/mm/yyyy

- **Special instructions:**
  - Please telephone before giving the higher dose. AP

- **Duration of infusion (please circle):**
  - 24 hrs / 12hrs / Other:……hrs

- **Prescriber to initial if to continue:** AP

- Although it is not considered best practice, in some circumstances, especially in rural areas, a dose range may need to be prescribed.
- A ‘special instruction box’ is available for prescribers to state their directions. This space may also be used if the prescriber wishes to specify a volume or syringe size.
The new chart – Nursing staff

<table>
<thead>
<tr>
<th>MEDICINE (approved name)</th>
<th>DOSE</th>
<th>PRESCRIBER'S SIGNATURE</th>
<th>DATE</th>
<th>TIME</th>
<th>DOSE OF MEDICATION ADMINISTERED</th>
<th>TIME</th>
<th>DILUENT (Please circle)</th>
<th>DURATION OF INFUSION (please circle)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Diamorphine</td>
<td>30mg - 40mg</td>
<td>Prescriber 1234 Pharmacy</td>
<td>dd/mm/yy</td>
<td>08:30</td>
<td>STOP: 08:30</td>
<td>STOP: 08:30</td>
<td>Water for Injection</td>
<td>24 hrs / Other: 12 hrs</td>
</tr>
<tr>
<td>Midazolam</td>
<td>25mg - 20mg</td>
<td>Prescriber 1234 Pharmacy</td>
<td>dd/mm/yy</td>
<td>08:35</td>
<td>STOP: 08:35</td>
<td>STOP: 08:35</td>
<td>Sodium chloride 0.9% w/v</td>
<td>24 hrs / Other: 12 hrs</td>
</tr>
</tbody>
</table>

• This section should only be used if there is any variation in the dose administered in relation to the prescribed dose e.g. on the rare occasion that a dose range is prescribed or a verbal order is given. This allows the actual dose administered to be recorded.
Health Boards should ensure they have their own suitable monitoring charts for both community and secondary care use.
Any questions