

Syringe Driver Prescription Sheet	
Version No	<u>3</u>
Version Date	<u>24.12.2015</u>
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Covid 19 specific syringe driver  
available prescription – (Nb opiate  
naïve patient)\*

\*based on Derbyshire GP Alliance covid 19 EOL guidance  
1.4.20

Derbyshire Community Health Services   
NHS Trust

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SURNAME _____ NHS No:		ALLERGIES <u>None Known</u>
FORENAME _____ D.O.B.		

## SYRINGE DRIVER PRESCRIPTION SHEET

Form completed by the clinician prescribing medication below. If drug dosages adjusted in syringe driver, breakthrough analgesia doses may need to be revised. Please Refer to Symptom Management Guidelines Palliative Care

DATE/TIME	DRUG	DOSE	FREQUENCY	PRESCRIBER SIGNATURE/ DESIGNATION
Breathlessness / pain	Diamorphine		Via driver over 24-hours	
	Morphine		Via driver over 24-hours	
Agitated / delerium	Haloperidol		Via driver over 24-hours	
Respiratory secretions	Hyoscine Butylbromide		Via driver over 24-hours	
Anxiety (breathlessness if not held with 3 drugs)	Midazolam		Via driver over 24-hours	
	Water for Injection	10ml - 20ml	To re-constitute diamorphine and/or to make syringe driver up to final volume	