



NHS GREATER GLASGOW AND CLYDE

**ADULT AND OLDER ADULT
SYMPTOMATIC RELIEF POLICY**

**Sixth Edition
April 2021**

INTRODUCTION

The NHS GG&C Symptomatic Relief Policy for Nurses and Midwives allows nurses and midwives to administer medicines to inpatients over the age of 16 years for common minor ailments and complaints without the need for each product to be prescribed on the patient's medicine chart by a qualified prescriber. For NHS GG&C Mental Health Services, Adult Symptomatic Relief Policy 2019, [HERE](#)

This policy is held and reviewed by the ADTC Safer Use of Medicines; however responsibility and accountability rests with local areas using the policy to ensure clinicians are assessed to be competent and records are kept up to date.

The policy contains a series of monographs which provide information on medicines. Each monograph contains information on the dose, indications, contra-indications, side effects and any other relevant information which the nurse may require to safely administer the medicine.

Authorisation by a doctor or independent prescriber must be given and this is achieved by completion of the 'Doctor's declaration' section in the medicines chart. The doctor/Independent Prescriber may exclude any of the products that in their judgement would not be appropriate for the patient.

Administration can be delegated by the nurse if satisfied, the person they are delegating to, is competent to administer. The nurse remains accountable for the administration. All registrants using the policy should be named (Appendix 1) and they should sign to confirm they are competent to administer the medicinal product, acknowledging they will be accountable for their actions. (Appendix 2).

It is the responsibility of local areas to retain an accurate list of named nurses and midwives on the form provided. (Appendix 1)

Additions can be requested using the pro-forma provided. (Appendix 3)

The Symptomatic Relief Policy does not contain complete information about the medicinal products listed. Staff referred to the BNF and summary of product characteristics for further information.

The Doctor's Declaration MUST be signed on the front cover page of the medication chart.

The following criteria must be adhered to at all times:

1. Patients must have been admitted/clerked in before any medicine in the Symptomatic Relief Policy can be administered.
2. The Symptomatic Relief Doctor Declaration is sourced on the front cover page of the medication chart. Any medication from the Policy which is not appropriate for the patient should be listed. Should exclusion be required subsequent to initial prescription, the entire item must be re-written.
3. Nurses- will record each medication to be administered on the back page of the medication chart.
4. Laxatives should only be used for acute constipation where the nurse is certain of the diagnosis. Long term laxative use can be counterproductive leading to hypokalaemia and an atonic, non functioning colon. If constipation persists, the patient must be reviewed by a doctor.
5. Medication may only be administered under the circumstances described within the Policy, noting the frequency and maximum doses.
6. The administering nurse must be competent in use of policy medication (appendix 1)
7. The administering nurse must be fully aware of the patient's diagnosis, recent medical history, current health status and any medical alerts.
8. The nurse must record administration of an item from the Symptomatic Relief Policy on the medicine administration recording sheet. The nurse must make an entry in the patients' records for each administration of an item from the Symptomatic Relief Policy.
9. The nurse must record on the patient's notes rationale for use of medication, noting the symptom experienced and effectiveness of the product administered.
10. Processes associated with recording medication to be administered as part of the Symptomatic Relief Policy within the HEPMA system will be developed in collaboration with the HEPMA team as part of the new system roll out and will be issued as an appendix to this policy in due course.

NB: Any symptoms experienced by patients, which are not relieved by the Product/preparation administered from the Symptomatic Relief Policy, must be further assessed.

The nurse must be aware of the appropriateness of the product for the condition being treated.

The BNF should be consulted for further information required on the listed

Medication

Clinical conditions covered within the policy:

Condition/Need	Medicinal Product	Policy section
Pain/Fever	Analgesics: paracetamol tablets/liquid paracetamol suppositories	1. 1.1.1 1.1.2
Local anaesthetic – catheterisation/ cystoscopies/ canula insertion/ injection	Local anaesthetic Chlorhexidine with lidocaine (Instillagel®) Lidocaine with prilocaine (Emla®)	1.2 1.2.1 1.2.2
Dyspepsia/ Gastro- oesophageal reflux/ Heartburn/ flatulence	GI/Antacids Co-magaldrox Suspension Peptac Liquid® Peppermint Oil Capsules	2 2.1.1 2.1.2 2.1.3
Constipation/ Hepatic encephalopathy	Laxatives/Enemas Senna Glycerin Suppositories Lactulose Sodium Citrate micro enema Phosphate Enema	2.2 2.2.1 2.2.2 2.2.3 2.2.4 2.2.5
Haemorrhoids	Haemorrhoid Preparations Anusol® Suppositories Anusol® Cream	2.3 2.3.1 2.3.2
Angina/Anginal Pain	Cardiovascular Nitrates Glyceryl Trinitrate Spray	3 3.1 3.1.2
Dry irritating cough	Respiratory Cough Preparations Simple Linctus	4 4.1 4.1.1
Acute nicotine withdrawal	Nicotine Replacement Therapy Nicotinell® patches	5 5.1.1

All medicines given must be approved by the nurse in charge prior to administration.

Before any medicines in this policy are administered, the Medicine Prescription Sheet must be checked to determine that:

- a similar medicine has not already been prescribed
- there is no recorded contra-indication e.g. allergy to the medicine to be administered
- the medicine itself has not already been prescribed.

1.1 Analgesics

1.1.1 Paracetamol Tablets 500mg/Liquid 250mg/5ml (Preferred choice)

Indications:	Mild to moderate pain or fever
Contra-indications:	Hepatic or renal impairment, alcoholism or glutathione deficiency (chronic malnourishment, chronic alcoholism, alcohol dependence), hypersensitivity to paracetamol (rare). History of paracetamol overdose
Cautions:	Ensure patient has not received other paracetamol containing preparations before administration, if uncertain what medicines contain paracetamol please check with pharmacist and do not administer until determined.
Side effects:	Rare – blood disorders, acute pancreatitis, rashes
Route:	Oral
Dose:	500mg to 1g (1-2 tablets) 10ml-20ml of liquid to give appropriate dose. Dose reduction required in patients with low weight ($\leq 50\text{kg}$) to 15mg/kg up to four times daily (max 60mg/kg/day)
Frequency:	Every 4-6 hours, minimum of 4 hours between doses
Maximum number of doses without prescription:	Maximum: Two doses. If patient below 50kg maximum dose should not exceed 500mg per dose
Active Ingredients:	Paracetamol

1.1.2 Paracetamol Suppositories 500mg

Indications:	Mild to moderate pain or fever
Contra-indications:	Hepatic or renal impairment, or glutathione deficiency (chronic malnourishment, chronic alcoholism, alcohol dependence), hypersensitivity to paracetamol (rare). History of paracetamol overdose
Cautions:	Ensure patient has not received other paracetamol containing preparations before administration. If uncertain what medicines contain paracetamol please check with pharmacist and do not administer until determined.
Side effects:	Rarely – rashes, blood disorders, acute pancreatitis
Route:	Rectal
Dose:	500mg to 1g (1-2 suppositories)
Frequency:	Every 4-6 hours, minimum of 4 hours between doses
Maximum number of doses without prescription:	Two doses. If patient below 50kg maximum dose should not exceed 500mg of paracetamol.
Active Ingredients:	Paracetamol

1.2 Local Anaesthetic

1.2.1 Chlorhexidine with lidocaine (Instillagel®)

Sterile syringe (6mg/11ml) for instillation (single use only)

Indications:	Lubricant with anaesthetic and antiseptic properties, prevention of pain prior to catheterisation (urethral and suprapubic) and cystoscopies
Contra-indications:	Previous reaction to a local anaesthetic. Allergy/hypersensitivity to any ingredients. Not to be used if severe bleeding of urethra.
Cautions:	In patients with epilepsy, liver or cardiac disease
Side effects:	Slight stinging after use. Undesirable effects of lidocaine are possible in cases of severe injury to the urethra – hypotension, bradycardia or convulsions
Route:	Intraurethral/Suprapubic catheter sites
Dose:	1 syringe
Frequency:	Once only
Maximum number of doses without prescription:	One
Further information:	The anaesthetic takes about 5 minutes to work after the gel has been inserted
Active Ingredients:	Lidocaine hydrochloride 2% Chlorhexidine gluconate 0.25% Methyl hydroxybenzoate Propyl hydroxybenzoate In a gel made with hydroxyethylcellulose, propylene glycol and water

1.2.2 Lidocaine with Prilocaine Cream (Emla Cream®)

(Total Formulary)

Indications:	Local anaesthetic for topical use to produce surface anaesthesia of the skin for prevention of pain prior to injection or insertion of cannula. (May be used for patients with a needle phobia).
Contra-indications:	Previous reaction to a local anaesthetic, Allergy/hypersensitivity to any ingredients. Not to be used on wounds, mucous membranes, atopic dermatitis.
Cautions:	Should not be used near eyes or middle ear
Side effects:	Transient paleness, redness and oedema
Route:	Topical
Dose:	5g tube (1-2 grams on each site with occlusive dressing)
Frequency:	Single dose, multiple area
Maximum number of doses without prescription:	One dose over multiple areas
Further information:	The cream should be applied thickly to one or more sites for venepuncture and an occlusive transparent dressing applied for a minimum 60 minutes and maximum of 5 hours prior to procedure. Procedure should begin soon after dressing has been removed.
Active Ingredients:	Lidocaine hydrochloride 2.5% Prilocaine 2.5% See Patient Information Leaflet (PIL) for list of excipients

Gastro-Intestinal

2. Antacids

2.1.1. Co-magaldrox Suspension

(Preferred list)

Indications:	Dyspepsia and Gastro-oesophageal reflux (Preferred List)
Contra-indications:	Hypophosphataemia, patients taking doxycycline
Cautions:	Antacids should not be taken at the same time as other drugs since it may impair absorption. See BNF for full information.
Side effects:	May cause constipation
Route:	Oral
Dose:	10-20ml
Frequency:	Two times daily
Maximum number of doses without prescription:	Two
Further information:	Shake the bottle well before use
Active ingredients:	Co-magaldrox 195/220 Each 5ml contains: Magnesium hydroxide 195mg Dried aluminium hydroxide 220mg

2.1.2. Peptac Liquid®

(Preferred list)

Indications:	Heartburn Gastro-oesophageal reflux
Contra-indications:	Salt restriction, patients taking doxycycline
Cautions:	Antacids should not be taken at the same time as other drugs since it may impair absorption. See BNF for full details
Side effects:	Very rare: allergic manifestations – urticaria or bronchospasm. Overdosage may lead to abdominal distension.
Route:	Oral
Dose:	10–20ml
Frequency:	After meals and at bedtime
Maximum number of doses without prescription:	Two
Further information:	Shake bottle well before use
Active Ingredients:	Each 5ml contains: Sodium Alginate 250mg, Sodium Bicarbonate 133.5mg, Calcium Carbonate 80mg. Each 5ml contains 3.1mmol sodium

**2.1.3. Peppermint Oil Capsules 0.2ml
(Total Formulary)**

Indications:	Flatulence
Contra-indications:	None
Cautions:	Sensitivity to menthol Note: Colpermin® brand contains arachis (peanut) oil
Side effects:	May cause heartburn
Route:	Oral
Dose:	One capsule before meals
Frequency:	Two daily before meals
Maximum number of doses without prescription:	Two
Further information:	Swallow whole. Capsules must not be broken or chewed. Take with small amount of water before meals, but <u>not</u> immediately after food. Do not take indigestion remedies at the same time of day as this medicine.
Active Ingredients:	Peppermint Oil BP 0.2ml

2.2. Laxatives

2.2.1. Senna 7.5 mg tablets

(Preferred list)

Indications:	Constipation (short-term use)
Contra-indications:	Bowel obstruction Recent gastrointestinal surgery, abdominal pain
Cautions:	Ensure patient is not receiving other stimulant laxatives e.g. bisacodyl, co-danthramer, docusate sodium, sodium picosulphate
Side effects:	Abdominal cramp
Route:	Oral
Dose:	1-2 tablets
Frequency:	Once daily (usually at bedtime)
Maximum number of doses without prescription:	Once
Further information:	Prolonged usage can result in loss of muscle tone and chronic constipation Time to effect: 8-12 hours
Active Ingredients:	Sennosides from de-seeded senna fruit (Calculated as sennoside B) 7.5mg

2.2.2 Glycerin Suppositories 4 grams

(Total Formulary)

Indications:	Rectal use for constipation
Contra-indications:	Recent gastro-intestinal surgery
Cautions:	
Side effects:	Local irritation
Route:	Rectal
Dose:	One 4 gram suppository
Frequency:	Once only
Maximum number of doses without prescription:	One
Further information:	Time to effect: 15–30 minutes Moisten suppository with water prior to use.
Active Ingredients:	Gelatine 140mg Glycerol 700mg Purified water to 1g

2.2.3. Lactulose

(Preferred list)

Indications:	Constipation/Hepatic encephalopathy
Contra-indications:	Galactosaemia/intestinal obstruction
Cautions:	Lactose intolerance
Side effects:	Nausea, vomiting, flatulence, cramps
Route:	Oral
Dose:	15ml
Frequency:	Twice daily
Maximum number of doses without prescription:	Two
Further information:	Nausea can be reduced by administration with water, fruit juice or meals.
Active Ingredients:	Lactulose either 666.667mg/ml or 680mg/ml depending on preparation

2.2. Enemas

2.2.4. Sodium Citrate Micro-enema (e.g. Micralax®) (Total Formulary)

Indications:	To relieve constipation or in preparation for examination
Contra-indications:	Inflammatory bowel disease, recent gastro-intestinal surgery Known allergy to any of the ingredients.
Cautions:	Elderly and debilitated patients
Side effects:	Local irritation
Route:	Rectal
Dose:	1 dose
Frequency:	Once
Maximum number of doses without prescription:	1
Further information:	Time to effect 5-15 mins. Patient should have immediate access to toilet. Administer the contents of one micro-enema rectally, inserting the full length of the nozzle. No lubricant is needed as a drop of the mixture is sufficient.
Active Ingredients:	Sodium alkylsulphoacetate 0.90% w/v Sodium citrate BP 9.0% w/v Excipients: Sorbitol solution 70% w/v Glycerine PhEur, Sorbic Acid BP and Purified Water PhEur

2.2.5. Phosphate Enema (Total formulary)

Indications:	Rectal use in constipation
Contra-indications:	Acute gastro intestinal conditions, undiagnosed GI pathology, congestive heart failure, dehydration, clinically significant renal impairment, hypersensitivity to ingredients or excipients
Cautions:	Renal impairment
Side effects:	Local irritation, electrolyte disturbances
Route:	PR
Dose:	1 enema in the morning
Frequency:	
Maximum number of doses without prescription:	2 enemas in 24 hours
Further information:	
Active Ingredients:	Sodium acid phosphate/sodium phosphate

2.3. Haemorrhoid Preparations

2.3.1. Anusol® Suppositories (Preferred list)

Indications:	Painful haemorrhoids
Contra-indications:	Known sensitivity to any of the constituents.
Side effects:	Transient local burning
Cautions:	
Route:	Rectal
Dose:	1
Frequency:	Twice daily or after a bowel movement
Maximum number of doses without prescription:	Two
Further information:	
Active Ingredients:	Bismuth oxide 24mg Bismuth subgallate 59mg Peru balsam 49mg Zinc oxide 296mg

2.3.2. Anusol® Cream (Preferred list)

Indications:	Painful haemorrhoids
Contra-indications:	Known sensitivity to any of the constituents
Cautions:	
Side effects:	Transient local burning
Route:	Topical
Dose:	Apply thinly
Frequency:	Twice daily or after a bowel movement
Maximum number of doses without prescription:	Two
Further information:	
Active Ingredients:	Bismuth oxide 2.14 grams Balsam Peru Ph Eur 1.8 grams Zinc oxide 10.75 grams

3. Cardiovascular

3.1. Nitrates

3.1.1. Glyceryl Trinitrate Spray 400 micrograms per metered dose

Indications:	Anginal pain or before activity which may cause angina
Contra-indications:	Hypersensitivity to nitrates: severe hypotension, haemorrhage or head injury; stroke; pregnancy; closed angle glaucoma; mitral stenosis or obstructive cardiomyopathy
Cautions:	Interactions: Sildenafil, Tadalafil, Vardenafil (avoid concomitant use) Sublingual apomorphine lozenges
Side effects:	Throbbing headache, flushing, dizziness, postural hypotension, tachycardia, bradycardia
Route:	Sublingual
Dose:	One or two puffs under the tongue then close mouth
Frequency:	There should be a gap of at least 5 minutes before the spray is used again
Maximum number of doses without prescription:	Two
Further information:	Medical staff should be informed following administration. If first dose ineffective seek medical staff immediately.
Active Ingredients:	See product information for excipients

4. Respiratory

4.1. Cough Preparations

4.1.1. Simple Linctus, BP (Sugar free)

(Preferred list)

Indications:	Dry, irritating cough
Contra-indications:	None known
Cautions:	None
Side effects:	None known
Route:	Oral
Dose:	5ml
Frequency:	3–4 times daily
Maximum number of doses without prescription:	Four
Further information:	
Active Ingredients:	Citric acid monohydrate 2.5% in a suitable vehicle. See Patient Information Leaflet (PIL) for list of excipients

5. Nicotine Replacement Therapy

5.1.1. Nicotinell® patch

Indications:	Symptomatic relief of acute nicotine withdrawal
Contra-indications:	Patches should not be placed on broken skin
Side effects:	Skin irritation, bloating, blurred vision, constipation, coughing, diarrhoea, dry mouth
Cautions:	Warnings for NRT also apply to continued smoking but the risk of continued smoking outweighs any risks of using NRT. Diabetes mellitus – Blood glucose should be monitored when initiating treatment.
Route:	Transdermal
Dose:	If >20 cigarettes/day smoked – 21mg patch If <20 cigarettes/day smoked – 14mg patch
Frequency:	Once daily
Maximum number of doses without prescription:	One
Further information:	See Appendix 1 – NRT in the NHS GGC Therapeutics Handbook Link
Active Ingredients:	Nicotine

Appendix 1 NHS GGC Symptomatic Relief Policy Authorisation Form to be retained within the Ward or Clinical area of responsibility.

Name of Nurse	Grade/Band	I confirm that I understand the policy and procedure for the administration of SRP (Signature)	Approved by line manager (Name)	Signature of line manager (Signature)	Date

DOCUMENT PRODUCED BY: Elaine Paton, Lynne Watret
DATE OF LAST REVISION: August 2019
DOCUMENT APPROVED BY:
DATE APPROVED:
PLANNED REVIEW DATE:

SUM SUB-COMMITTEE OF ADTC
 April 2021
 April 2024

Appendix 2. NHS Greater Glasgow and Clyde Symptomatic Relief Policy

Assessment competency criteria and record

It is the responsibility of each professional to practice only within the bounds of their own competence and in accordance with their own Code of Professional Conduct.

The registered nurse should demonstrate appropriate knowledge and/or skills in relation to:

Competency Criteria	Date achieved
Explain the medico-legal aspects of the registered nurses role in relation to the: <ul style="list-style-type: none">• Symptomatic Relief Policy• Medicines Management and GGC Policy• Safe and Secure Handling of Medicines in Hospital Wards, Theatres and Departments	
Conducts a comprehensive assessment of the patient prior to administering drugs from the Symptomatic Relief Policy.	
Identifies and utilises a range of appropriate sources of information in administering symptomatic relief.	
Demonstrates knowledge of the drugs being administered through effective monitoring of the patient by describing functions, actions and possible side effects.	

The undersigned has achieved competency in administering drugs from the symptomatic relief policy.

Name:.....

Signature of assessor:.....

Date:.....

I (signature of candidate).....acknowledge my competence in administration according to the NHS GGC symptomatic relief policy.

Pro-Forma Request

(Appendix 3)

Drug Name:	
Indications:	
Contra-indications:	
Side effects:	
Route:	
Dose:	
Frequency:	
Maximum number of doses without prescription:	
Further information:	
Cautions:	
Active Ingredients:	

Reason for Request:	
Requested By:	
Contact Details:	

Signature

Date