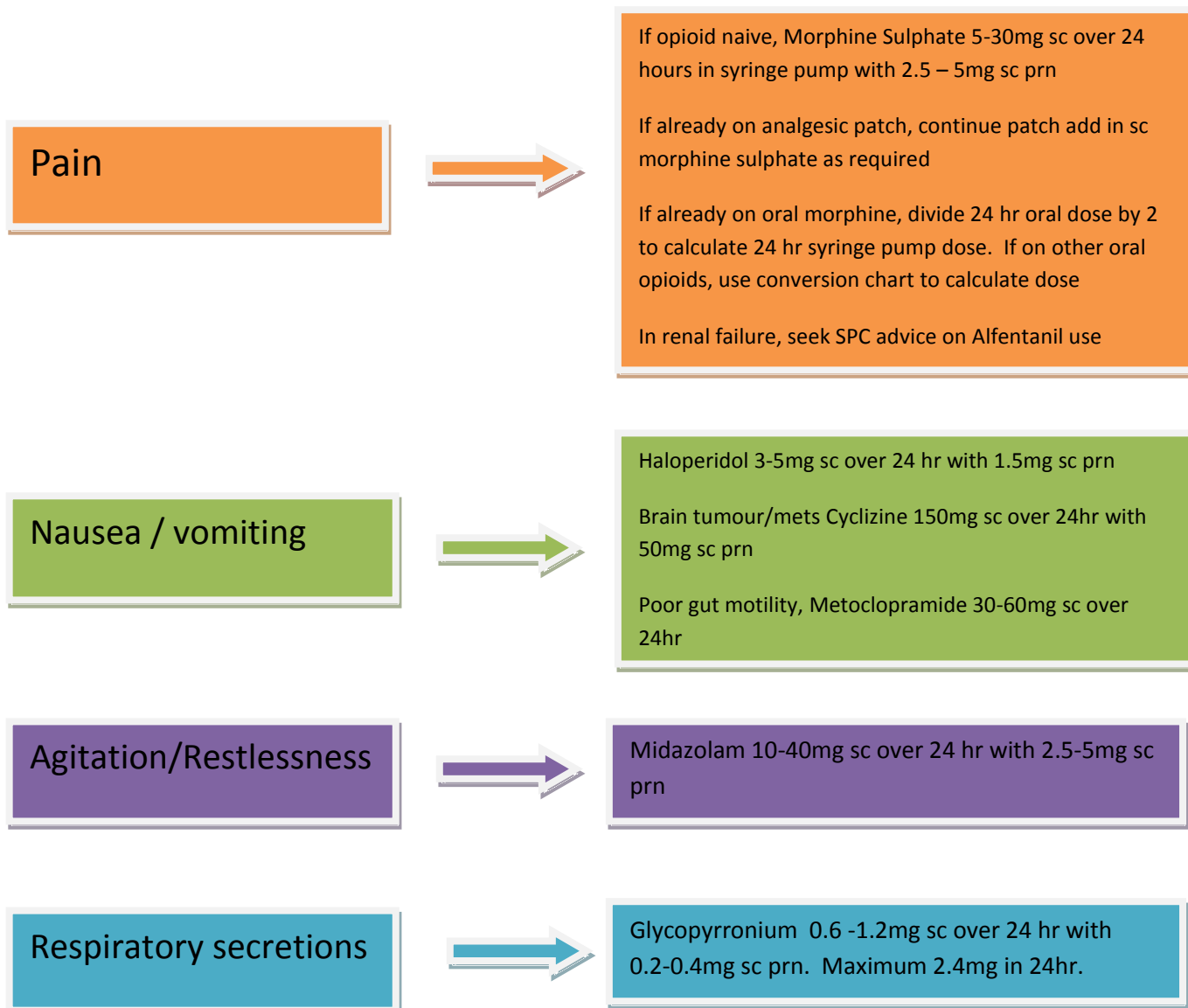
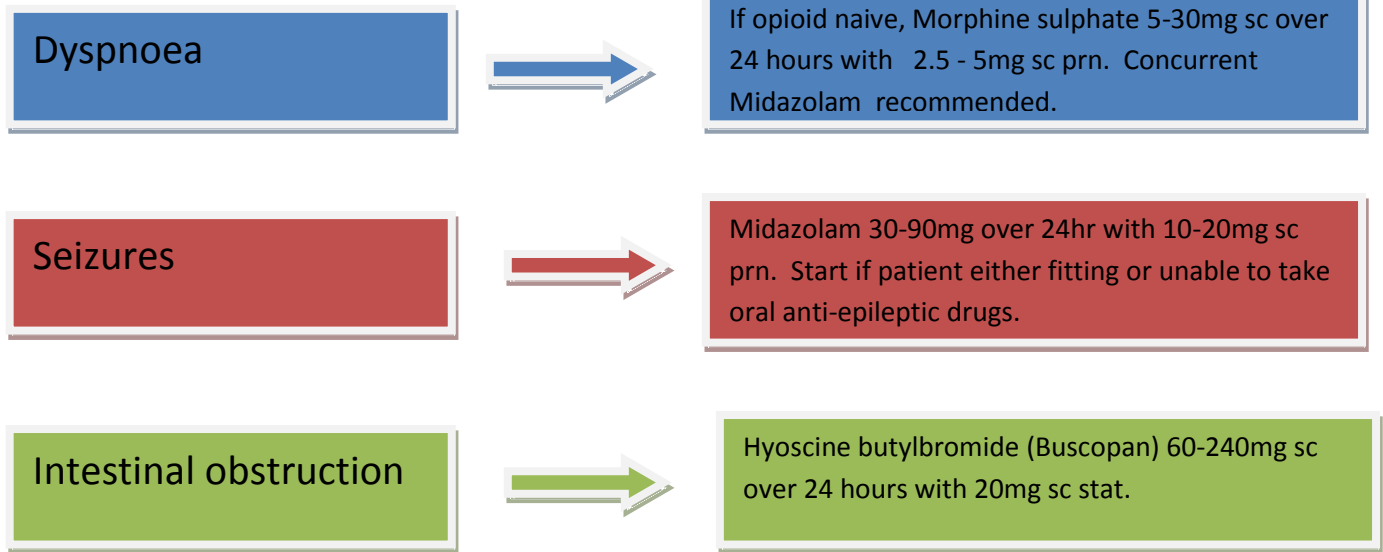


Anticipatory Prescribing at the End of Life

Anticipatory prescribing forms a key part of good pro-active End of Life Care and should be initiated as the patient enters the last few weeks of life.

- Ensure that in the last days or hours of life there is no delay in responding to symptoms
- Administer medication if and when needed, but no more than is required to relieve symptoms
- Review all medication including doses and frequency
- Commence a syringe pump if several prns required in 24 hours. Not all dying patients require a continuous subcutaneous infusion
- Contact the Specialist Palliative Care Team if symptoms persist





Prescribing advice:

Suggestions for the initial prescription for injectables:

- Morphine sulphate 10mg/2ml x 10 amps (30mg/ml if on larger doses)
- Haloperidol 5mg/ml x 10 amps
- Midazolam 10mg/2ml x 10 amps
- Glycopyrronium 600mcg/3ml x 10 amps
- Remember to prescribe water for injection 10mls x 10amps

Other injectables:

- Oxycodone 10mg/ml or 10mg/2ml. For large doses, 50mg/ml available if greater concentration required to fit in syringe pump but much more expensive
- Hyoscine butylbromide (Buscopan) 20mg/ml for bowel obstruction
- Hyoscine hydrobromide 600mcg/ml – alternative to Glycopyrronium