

Patient Group Direction

Administration of PEPTAC

By Registered Nurses employed at Band 5 (and above) by South Staffordshire & Shropshire Healthcare Foundation NHS Trust

This Patient Group Direction for use in South Staffordshire Healthcare NHS Foundation Trust and is authorised by:

| Position of Signatory | Name | Signed | Date |
|--|-------------------------|--------|------|
| Medical Director | Dr Claire Barkley | | |
| Chief Pharmacist | Cathy Riley | | |
| Director of Nursing | Dr Neil Brimblecombe | | |
| Director of Quality & Clinical Performance | Therèsa Moyes | | |

The named below, being employees of South Staffordshire & Shropshire Healthcare NHS Foundation Trust are authorised to administer Peptac, to patients in In-Patient care, under this Patient Group Direction

| Name | Job Title | Signed | Date |
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This Patient Group Direction is operational from April 2013. Review date: Feb 2015. Expires on 31st March 2015

This PGD replaces PGD 2011

Professional Responsibility

All registered nurses and non medical prescribers being employees of South Staffordshire & Shropshire HealthCare NHS Foundation Trust are authorised to administer Peptac, as specified under this Patient Group direction, in an in-patient setting, following demonstration of the competencies below:

Professional Responsibility / competencies

1. The registered nurse will have undertaken appropriate training to carry out clinical assessment of patient who requires treatment according to the indications listed in the PGD
2. All nurses will have received training in the management and treatment of anaphylactic shock on an annual basis
3. Each nurse will keep a record in their professional portfolio of the updates attended during every 12 month period – This information will also form part of the team's annual training plan
4. The nurse will have due regard for the NMC Code of Conduct, Scope of Professional Practice and Standards for Medicines Management (Nursing & Midwifery Council)
5. Undertaken appropriate training and possess the competencies for working under PGDs for the supply and administration of medicines
6. All registered nurses details and signature must be entered on the PGD
7. Following administration a record of the date, and dose of the medicine should be recorded in the clients records, and within the As Required section of the medicine card, with PGD Number being inserted

For full product information, always refer to the latest SPC (Summary of Product Characteristics).

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| Supply/Administration of | Peptac liquid |
| Legal Classification | GSL |
| Black Triangle? | No |
| Type | Suspension |
| Storage | Locked cupboard |
| Condition to be treated | Indigestion |
| Inclusion Criteria | <ul style="list-style-type: none"> • Adults aged 12 years and over, with: • Moderate to severe indigestion • Alginate-containing antacid previously taken by patient with no adverse effects |
| Exclusion Criteria | <ul style="list-style-type: none"> • Children under 12 years • Hypersensitivity to any of the ingredients |
| Action if excluded or patient declines | Contact duty doctor |
| Reasons for seeking further advice from doctor | If no response, see duty doctor |
| Administration Route | Oral |
| Dose | 10-20ml |
| Administration Schedule | <p>After meals and at bedtime on an as required basis</p> <p>Total dose- no more than 10-20ml four times in a 24 hour period</p> <p>No more than 4 administrations via PGD on the one card during an admission</p> |
| Warnings/Adverse Reactions | <p>Constipation, nausea and vomiting, drowsiness, respiratory depression and dependence, dry mouth, headache, palpitations.</p> <p>For full details see Summary of Product Characteristics</p> |
| Advice/Management of Adverse Reactions & Follow-up Action | <p>Ensure follow up arrangements for further care if relevant are made</p> <p>Ensure side effects are explained</p> |

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| | Ensure administration is recorded in patients notes |
| Use in pregnancy and lactation | May be used during pregnancy and lactation |
| Records | <p>The following should be recorded in the patient's notes:</p> <ul style="list-style-type: none"> • Name of preparation • Dose given • Route of administration • Date and time given • Signature of person administering the medicine • Reason for administration <p>and the administration also recorded in the As Required section of the medicine card, with the PGD Number inserted in place of the prescriber's instructions.</p> |