Options for symptom management in last days if there is no syringe driver or manpower to give injectable drugs Refer to York palliative care formulary, symptom control in patients with Covid-19 and information on Anticipatory and syringe driver chart. Seek advice if needed.

Symptom	Non drug approach	Starting doses in opioid naïve patier If on regular opioids see conve	Some SC injections may be given sublingually but unlicensed route (paediatric experience)			
		Oral route (PO) SL= sublingual	Subcutaneous route (SC) (*Some SC inj may be given SL)	Syringe driver route (SD)	Alternative routes: TD, buccal, sublingual(SL), PR OME = oral morphine equivalent	
Pain Consider NSAIDs, Paracetamol and adjuvants if able to	Heat pad over affected area Massage	Morphine sulphate MR (modified release) oral 5 mg (MST) 12 hourly Or Morphine sulphate IR (immediate release)	Morphine sulphate <mark>*</mark> sc 2 to 5mg 2 to 4 hourly prn Start lower if frail, elderly 1 to 2mg	SD Morphine sulphate 10mg/24hour Titrate according to response	TD Buprenorphine 5 to 10microgram/hour every 7 days OME 10 to 20mg/24hour Or TD Fentanyl 12 micrograms OME 40mg/24hour. Takes 72 hours to reach steady state	
swallow If unsure seek advice from palliative care		oral 2 to 5mg 2 to 4 hourly prn eGFR <30 mL/min Oxycodone MR oral 5mg 12 hourly Oxycodone IR oral 1 to 2 mg 2 to 4 hourly prn	eGFR <30 mL/min Use Oxycodone <mark>*</mark> sc 1 to 2mg 2 to 4 hourly prn	eGFR <30 mL/min SD Oxycodone 5mg/24hour Titrate according to response	PR Morphine MR (MST) or Oxycodone MR NB Viral shedding can occur rectally in Covid-19 SL Morphine/Oxycodone use sc injectable dose sublingually. Use same dose SL as for sc	
Nausea and Vomiting In Parkinson's disease only use: Domperidone, Cyclizine Ondansetron	Sea bands	Metoclopramide/ Domperidone 10mg tds Haloperidol 500microgram to 1mg od Levomepromazine 6.25mg od Cyclizine 25 to 50mg tds Ondansetron 4 to 8mg bd or tds	Haloperidol sc 500microgram to 1mg prn 8 hourly Max 3mg/24hour Or Levomepromazine [*] sc 2.5 to 5mg 4 hourly prn Max 12.5mg/24 hour	SD Haloperidol 3 mg/24hour Or SD Levomepromazine 5 to 12.5mg/24 hour	Orodispersible Ondansetron 4 to 8mg bd or tds Buccal Prochlorperazine 3 to 6mg bd TD Hyoscine hydrobromide patches (Scopoderm®) 1.5mg/72hour Apply behind the ear SL Levomepromazine use sc injectable dose	
			Freq & Max for Metoclopramide, Cyclizine, Ondansetron See Anticipatory and syringe driver chart		sublingually 2.5 to 5mg prn Max 12.5mg/24hour	
Agitation/Anxiety	Distraction e.g. music or radio, Relaxation Offer reassurance	Anxiety Lorazepam 250 microgram to 1mg SL qds Max 2mg to 4mg/24hour Lower prn and Max dose if frail or elderly Delirium Haloperidol 500 microgram to 1mg then repeat after one hour and then 8 hourly. Max 5mg over 24 hour	Midazolam [*] sc 2 to 5mg 2 to 4 hourly prn Max 30 to 60mg/24hour Or Levomepromazine [*] sc 6.25 to 25mg 1 to 4 hourly prn Max 100mg/24hour Start lower prn dose if frail or elderly Or Haloperidol sc same dose as oral	SD Midazolam 10mg/24hour Max 30mg/24hour anxiety Max 60mg/24hour agitation eGFR <30: 5 to 30mg/24hour Or SD Levomepromazine 12.5 to 25mg/24hour Max 100mg /24hour lower dose in elderly	SL Lorazepam 250 microgram to 1mg qds SL Midazolam use sc injectable dose sublingually 2 to 5mg 2 to 4 hourly prn Max 30 to 60mg/24hour SL Levomepromazine use sc injectable dose sublingually 6.25 to 25mg prn Max 100mg/24hour	
Respiratory secretions	Positioning Reassurance	N/A	Hyoscine butylbromide [*] sc 10 to 20mg 2 to 4 hourly prn Max 120mg/24hour	SD Hyoscine butylbromide 40 to 60mg/24hour Max 120mg/24hour	TD Hyoscine hydrobromide patches (Scopoderm®) 1.5mg/72hour. Apply behind the ear SL Hyoscine butylbromide use sc injectable dose sublingually 10 to 20mg 2 to 4 hourly	
Breathlessness (at rest or minimal exertion) If unsure seek advice from palliative care Cough Use honey or simple linctus then follow for	Positioning Relaxation techniques Reduce room temperature Cool flannel Reassurance Avoid fan if	Morphine sulphate MR (modified release) oral 5 mg (MST) 12 hourly Max 30mg/24hr Or Morphine sulphate IR (immediate release) oral 2 to 5mg 2 to 4 hourly prn eGFR <30 mL/min Oxycodone MR oral 5mg 12 hourly Oxycodone IR oral 1 to 2 mg 2 to 4 hourly	Morphine sulphate [*] sc 1 to 2mg 2 to 4 hourly prn Start lower if frail or elderly eGFR <30 mL/min Use Oxycodone [*] sc 1 to 2mg 2 to 4	SD Morphine sulphate 10mg/24hour Titrate according to response eGFR <30 mL/min SD Oxycodone 5mg/24hour	SL Morphine/ Oxycodone use sc injectable dose sublingually Use same dose SL as for sc 1 to 2 mg PR Morphine MR (MST) or Oxycodone MR NB Viral shedding can occur rectally in Covid-19	
breathlessness Fever	Covid-19 Cool flannel	prn Max 20mg/24hour Paracetamol 500mg to 1g gds	hourly prn Covid-19 - consider injectable	Titrate according to response	PR Paracetamol suppositories 500mg to 1g qds	
		Naproxen/Ibuprofen - if not Covid-19	NSAID in last days of life. D/W palliative care		NB Viral shedding can occur rectally in Covid-19	
Fits		As per usual prescribed medication	Midazolam sc 2 to 10mg stat	SD Midazolam 10 to 20mg/24hour	Buccal Midazolam solution (Buccolam®) (10mg/2mL) 1 to 2mL stat SL Midazolam use sc injectable dose sublingually	

If you require advice, please contact the Specialist Palliative Care Team directly on the numbers below. There is always access to a consultant on call via your local hospice									
York Specialist Palliative Care team (SPCT)		Scarborough Spe	cialist Palliative Care team (SPCT)	63	NA4				
In hours	Community SPCT 01904 777770 Hospital SPCT 01904 725835 St Leonard's Hospice 01904 708553	In hours	 Community SPCT 01723 356043 Hospital SPCT 01723 342446 St Catherine's Hospice 01723 351421 	Saint Catherine's	St Leonard's Hospice Coring for Local People				
Out of hours	GP OOH 0300 1231 183 St Leonard's Hospice 01904 708553	Out of hours	• GP OOH NHS 111 • Palcall 01723 354506		NHS				
Community nursing	Single point of access (SPA) 01904 721200	Community nursing	S& NHS Community R Community Services (CAS) 01653 609609		York Teaching Hospital NHS Foundation Trust				
Author York Teaching Hospita									

Owner Dr Anne Garry Issue date 7th April 2020 Review date 7th April 2021 Version 1.1