CRITICAL MEDICINES AVAILABILITY

The NPSA Rapid Response Report ‘Reducing harm from omitted and delayed medicines in hospital’ (February 2010) highlights the need for rapid access to medications that are critical for patients. This includes medications that, when administration of doses is delayed, could potentially result in harm to the patient. The aim of the list is to help to identify medicines for which administration should occur +/-2 hours from the next scheduled dose in order to reduce any such risk. These medications may be prescribed on admission, or commenced during an inpatient stay, such as anticoagulants, anticonvulsants, insulin, medicines for resuscitation, medicines used in Parkinson’s disease and anti-infectives.

As it is not practical to store all these medications on a ward or in an out of hours Emergency Drug Cupboard, this list highlights some medicines thought to be critical and of importance to commence/continue at the appropriate time and where these medicines can be sourced both during and out of normal pharmacy working hours.

Where a client brings their own medication (Patient’s Own Drugs or ‘POD’s) to a clinical setting, this should be assessed (refer UHM PGN 16) and used where suitable. This will allow more rapid access to medicine and ensuring treatment can continue.

Key:
✓ Available from Pharmacy during normal working hours and Emergency Drug Cupboard out of hours
★ Contact Pharmacy or Emergency Duty Pharmacist
♦ Available in Emergency Boxes in clinical areas (Orange Emergency Box)
● Available from Pharmacy or Schedule 3 & 4 Access Wards

(CKH only) Available from Cherry Knowle Hospital Pharmacy/Cherry Knowle Emergency Drug Cupboard
■ Refer to UHM PGN 42 : Order, storage and return of Oxygen Cylinders

Anticoagulants
✓ Enoxaparin Sodium
(150mg/1.5ml) (CKH only)
✓ Tinzaparin Sodium (4500 units/0.45ml, 18000 units/0.9ml)
✓ Warfarin 1mg, 3mg tablets
★ Phenindione
★ Acenocoumarol

Anticoagulant Reversing agents
✓ Phytomenadione 10mg/1ml (suitable for oral administration)

Anti-convulsants
✓ Carbamazepine (200mg, 200mg MR tablets)
★ Elicarbazepine
★ Oxcarbazepine
★ Ethosuximide
★ Gabapentin
★ Pregabalin
★ Lacosamide
✓ Lamotrigine (25mg dispersible tablets)
★ Levetiracetam
★ Levetiracetam
★ Phenobarbital
★ Primidone
✓ Phenytoin (25mg capsules, 100mg capsules, 30mg/5ml Suspension)
★ Rufinamide
★ Tiagabine
★ Topiramate
✓ Sodium Valproate (200mg/500mg EC, 200mg/300mg Chrono)
★ Vigabatrin
★ Zonisamide
★ Clobazam
★ Clonazepam

Insulin
✓ Actrapid (Soluble Insulin)
✓ NovoRapid (Insulin Aspart)
✓ Lantus (Insulin Detemir)
★ Insulartard (Isophane Insulin NPH)
★ Novomix30 (Biphasic Insulin aspart)
★ All other insulins

Resuscitation medicines
★ Epinephrine (adrenaline)
(100 micrograms/1ml, 1:10,000)
★ Atropine (3mg in 10ml)
★ Aspirin (300mg tablets)
★ Chlorphenamine
(chlorpheniramine) 10mg/ml
★ Epinephrine (adrenaline) (1mg/ml, 1:1000)
★ Flumazenil (100 micrograms/ml)
★ Gelofusine
★ Glucagon (1mg vial)
★ Glyceryl trinitrate spray
★ Hydrocortisone (100mg powder as sodium succinate for reconstitution)
★ Naloxone (400 micrograms/ml)
■ Oxygen

Medicines for parkinson’s disease
Dopamine Agonists
✓ Cocareldopa 12.5/50 (Sinemet 62.5)
✓ Cocareldopa 25/250 Tablets (Sinemet-275 tablets)
✓ Cocareldopa 50/200 MR tablets (Sinemet CR)
★ Other cocareldopa preparations available
✓ Cobenylodopa 25/50 (Madopar dispersible)
★ Othercobenylodopa preparations available
★ Selegeline
★ Entacapone
★ Amantadine
★ Orphenadrine
★ Trihexyphenidyl
★ Procyclidine
★ Apomorphine
★ Bromocriptine
★ Cabergoline
★ Pergolide
★ Pramipexole
★ Ropinerole
★ Rotigotine
★ Rasagiline
★ Tolcapone

Medicines for rapid
Tranquilisation
✓ Haloperidol injection
✓ Olanzapine Injection
★ Lorazepam Injection