

**THE PATIENT IS NOT CURRENTLY TAKING REGULAR STRONG OPIOID AND IS UNABLE TO SWALLOW**

CSCI=continuous subcutaneous infusion via a syringe driver  
 PRN = when required  
 S/c = subcutaneously

Prescribe s/c morphine as per algorithm below

If the patient is known to be intolerant to morphine, SEEK SPECIALIST ADVICE via Palliative Care Team 0161 419 4215 (Office hours, Mon – Fri) or out of hours contact St. Ann’s Hospice 24-hour advice line (0800 970 7970)

Is the patient in pain?

YES

**PRN S/C MORPHINE**  
 Give morphine 2.5 – 5mgs s/c 2-4 hourly PRN for pain until CSCI commenced at earliest opportunity.

**CONTINUOUS S/C MORPHINE**  
 Start a CSCI over 24 hours with dose of morphine guided by previous prn requirements or start at 10-20mgs morphine via a CSCI over 24 hours if prn doses not given. **N.B** It takes 6 hours for a syringe driver to take effect therefore give a PRN dose when commencing syringe driver

**NEW PRN S/C MORPHINE**  
 To calculate the ‘when required’ (prn) dose of s/c morphine, divide total daily dose of s/c morphine by 6.  
 Prescribe dose 2-4 hourly PRN.

Review patient every 24 hours. If patient needed less than 4 prn doses over previous 24 hours recalculate CSCI dose by adding prn doses given to amount in CSCI. (i.e. 3 PRN doses is equivalent to increase in total opioid dose of 50%)

If patient needed 4 or more doses, SEEK SPECIALIST ADVICE via Palliative Care Team (0161 ..... ) or out of hours contact St. Ann’s Hospice 24-hour advice line (0800 970 7970)

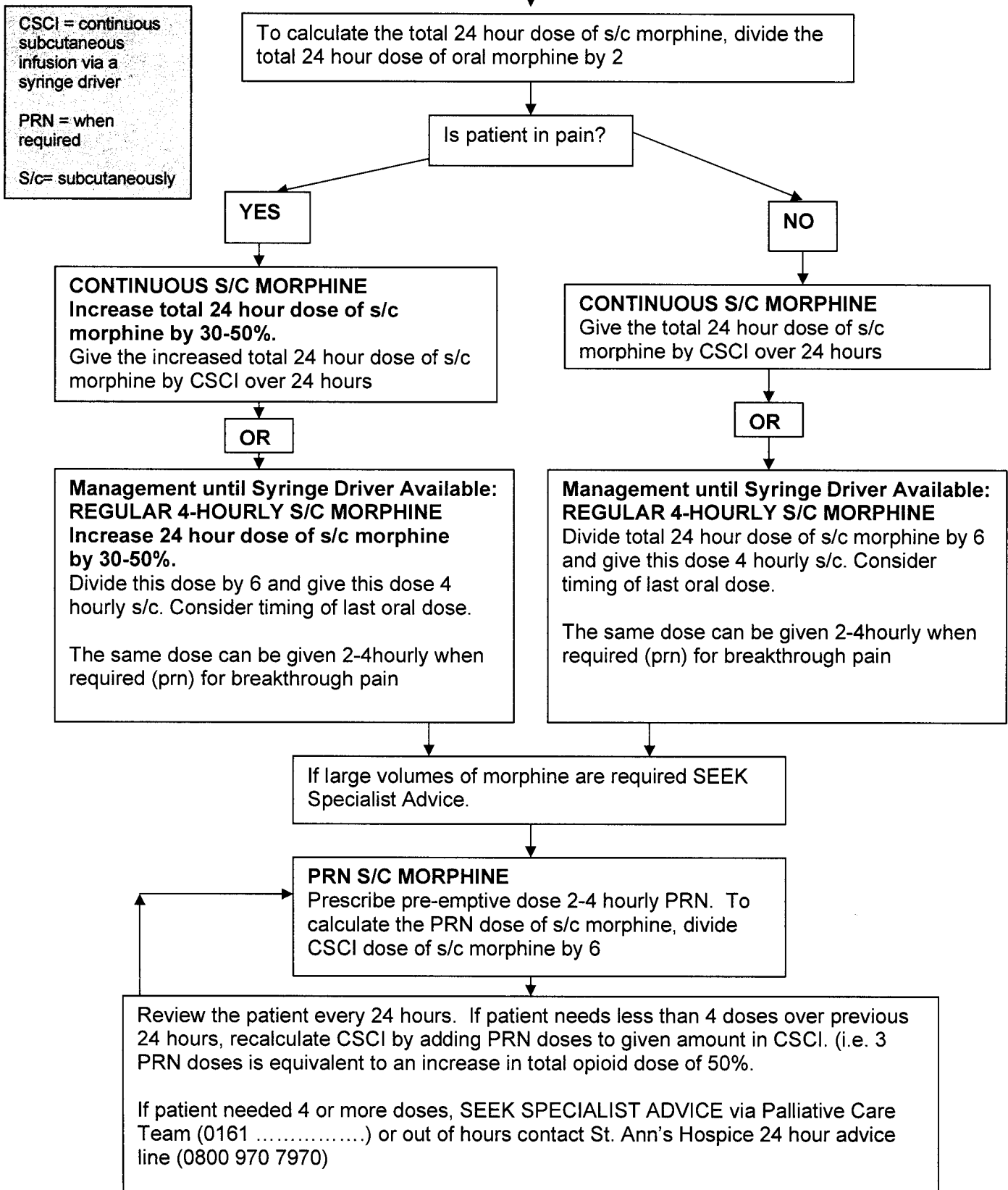
NO

**PRE-EMPTIVE PRESCRIBING**  
 Prescribe morphine 2.5 -5mgs s/c PRN 2-4hrly in case pain occurs.

If pain occurs, give PRN pre-emptive dose. If 2 or more doses are required over 24 hours, commence CSCI at earliest opportunity

**N.B. If Morphine requirement via CSCI is greater than 600mg over 24 hours, Seek Specialist Advice.**

# THE PATIENT HAS BEEN TAKING REGULAR ORAL MORPHINE BUT THEN BECOMES UNABLE TO SWALLOW



**PATIENT NOT IN PAIN USING FENTANYL PATCHES  
AND IS NOW UNABLE TO SWALLOW**

CSCI = continuous  
subcutaneous infusion  
via a syringe driver

PRN = when required

S/c = subcutaneously

If the patient is known to be intolerant to morphine SEEK  
SPECIALIST ADVICE via Palliative Care Team (0161 ..... ) or out  
of hours contact St. Ann's Hospice 24-hour advice line (0800 970  
7970)

Continue to use and change patch as previously prescribed.

Patient Not in Pain

**PRE-EMPTIVE PRESCRIBING**

Calculate or consult conversion chart for the PRN  
dose of s/c morphine. Prescribe the dose 2-4  
hourly PRN in case pain occurs.

If pain occurs, give PRN  
pre-emptive dose. If 2  
or more PRN doses are  
required over 24 hours,  
commence CSCI

**SEE PATIENT IN PAIN  
AND ON FENTANYL  
ALGORITHM**

## PATIENT IN PAIN USING FENTANYL PATCHES AND IS NOW UNABLE TO SWALLOW

CSCI = continuous subcutaneous infusion via a syringe driver

PRN = when required

S/c = subcutaneously

If the patient is known to be intolerant to morphine SEEK SPECIALIST ADVICE via Palliative Care Team (0161 ..... ) or out of hours contact St. Ann's Hospice 24-hour advice line (0800 970 7970)

Continue to use and change patch as previously prescribed.

Patient in Pain

Calculate or consult conversion chart for the PRN dose of s/c morphine. Administer 4 hourly Morphine dose s/c prn until syringe driver commenced

**Example**  
A patient with a 100 microgram/ hour Fentanyl patch requires 30mg s/c 4 hourly prn

**CONTINUOUS 24 hour S/C MORPHINE (in addition to patch)**  
Commence CSCI to administer the equivalent of 2 prn doses of s/c morphine over 24 hours. (This gives an increase in the total daily dose of opioid of 30%). Please see conversion chart.

**Example**  
A patient with a 100 microgram/ hour Fentanyl patch requires 60mg s/c over 24 hours via syringe driver

### PRN S/C MORPHINE

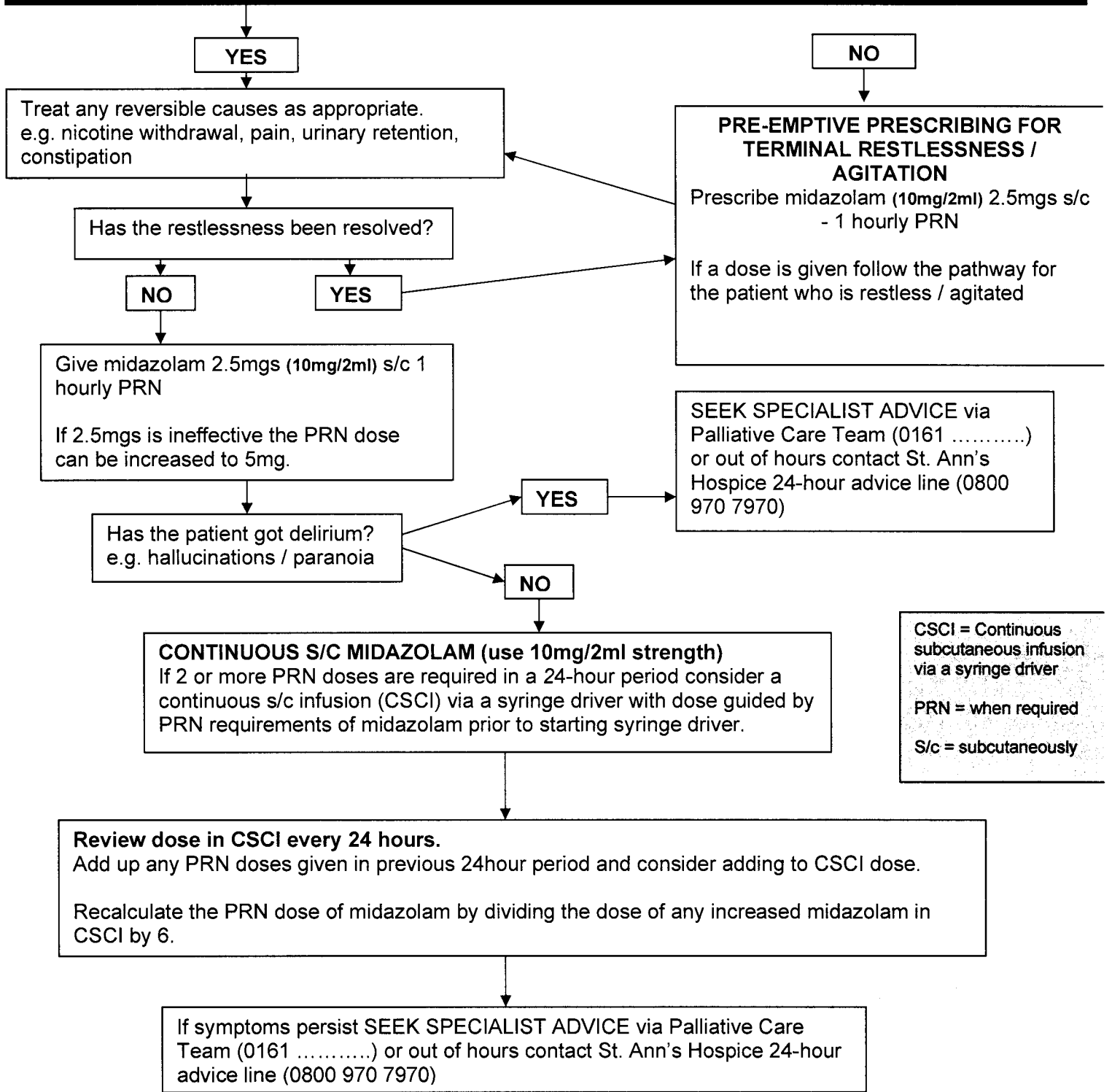
Recalculate the prn dose of s/c morphine  
Step 1 – calculate prn dose to cover patch using conversion chart = a  
Step 2 – calculate prn dose to cover CSCI by dividing dose in CSCI by 6 = b  
Step 3 – add a + b to give new prn dose of s/c morphine to cover patch and syringe driver.

**Example**  
A patient with a 100 microgram/ hour Fentanyl patch a) and 60mg s/c over 24 hours via syringe driver b):  
a)= 30mg s/c 4 hourly prn  
b)= 10mg s/c 4 hourly prn  
New prn dose = 40mg s/c 4 hourly prn

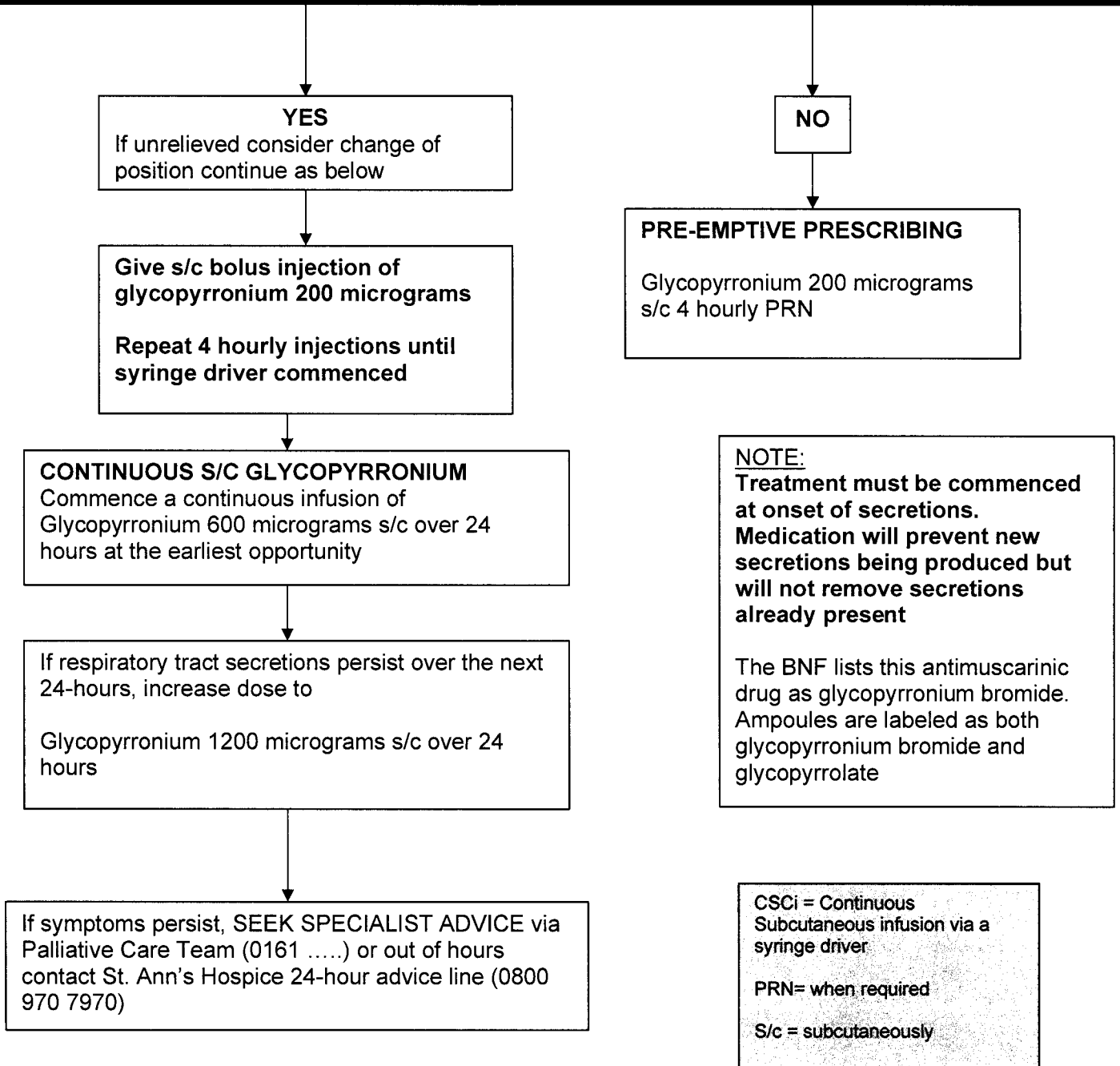
Review patient every 24 hours. If patient needed less than 4 prn doses in previous 24 hours recalculate CSCI dose by adding prn doses to amount in CSCI. (i.e. 3 prn doses is equivalent to increase in total opioid dose of 50%)

If needed 4 or more doses or you require support with calculations, SEEK SPECIALIST ADVICE via Palliative Care Team (0161 .... ) or out of hours contact St. Ann's 24 hour advice line (0800 970 7970)

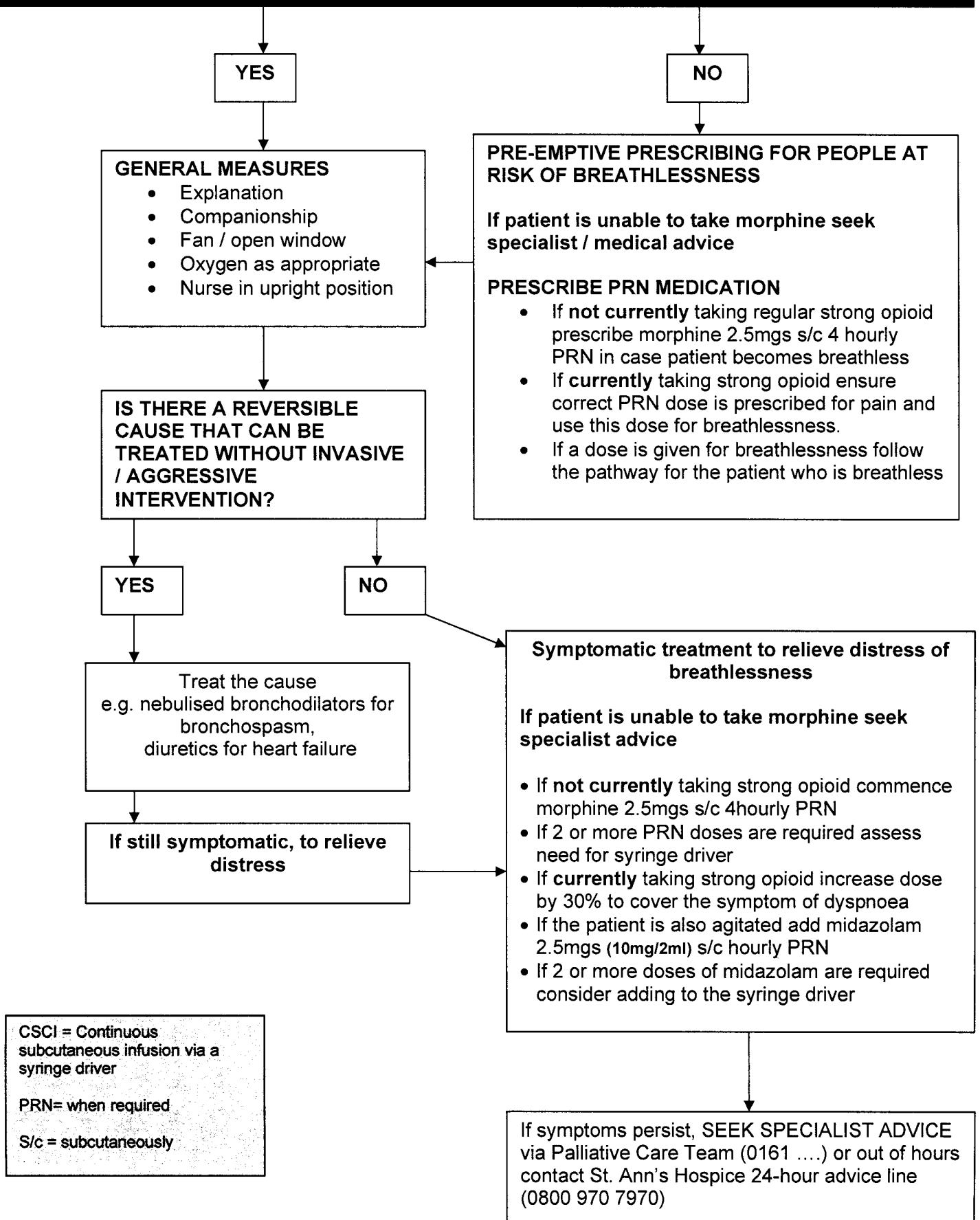
# IS THE PATIENT EXPERIENCING TERMINAL RESTLESSNESS AND / OR AGITATION?



## ARE RESPIRATORY TRACT SECRETIONS PRESENT?



# IS THE PATIENT BREATHLESS?

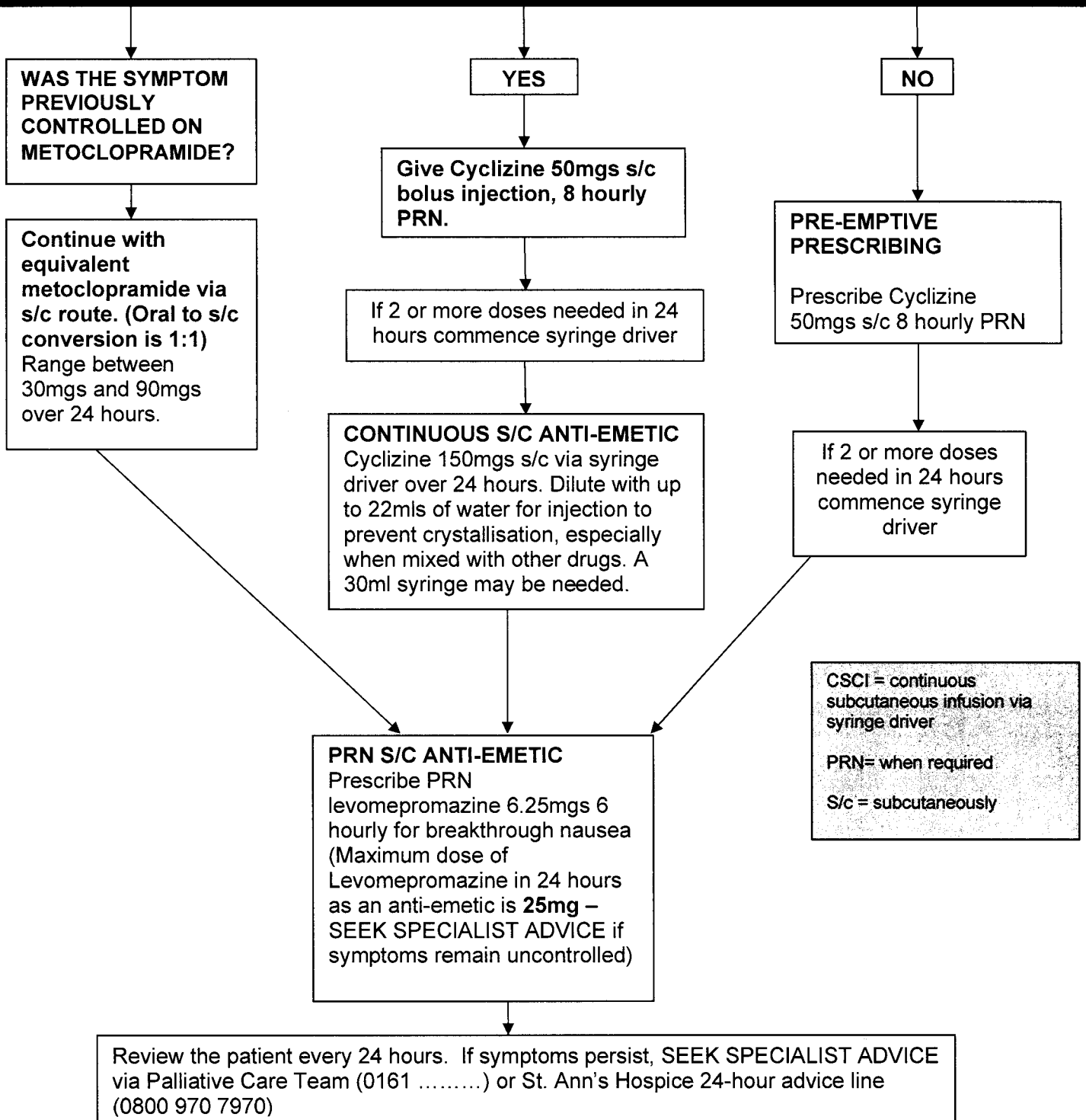


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# IS THE PATIENT EXPERIENCING NAUSEA AND / OR VOMITING?



**NOTE:**  
 Patients with Complete Bowel Obstruction and Nausea or Vomiting should not receive Metoclopramide and should follow Cyclizine algorithm