



# Arohanui Hospice referral/discharge process

[www.arohanuihospice.org.nz](http://www.arohanuihospice.org.nz)



# Arohanui Hospice-Whanganui Hospital Discharge Process

DOES YOUR PATIENT REQUIRE SPECIALIST PALLIATIVE CARE IN THE COMMUNITY?

Discuss with your patient/ whānau first to gain consent

**Complete an Arohanui Hospice Referral Form**  
Search Arohanui Hospice referral online, complete the form with as much information as possible and email to the address provided on the form.

**Is your referral urgent?**  
Phone Arohanui Hospice directly on 0800666676 or (06) 3566606 and ask to speak to the referrals nurse.

IS YOUR PATIENT DISCHARGING HOME ON A CONTINUOUS SUBCUTANEOUS INFUSION? (CSCI)

## NURSING PROCESS

Phone Arohanui Hospice directly on 0800666676 or (06) 356 6606 and ask to speak to the referrals nurse.

Phone the District Nursing Service directly on (06) 348 1274 as soon as a discharge date is known.

Complete a District Nursing Referral and email to: [districtnurses@wdhb.org.nz](mailto:districtnurses@wdhb.org.nz)

Ensure there are 2 subcutaneous (SC) lines sited

If the patient is being discharged home for end of Life (EOL), has a MDT assessment been completed – package of care & equipment organized?

IS YOUR PATIENT DISCHARGING HOME ON A CONTINUOUS SUBCUTANEOUS INFUSION? (CSCI)

## MEDICAL TEAM PROCESS

Phone Arohanui Hospice directly on 0800666676 or (06) 356 6606 and ask to speak to the referrals nurse.

Complete prescriptions for CSCI medications (10 day supply)

Complete prescriptions for SC, PRN medications (as per prescribing guidelines, 10 day supply)

Email prescriptions to the patients nominated pharmacy and inform patient & family to collect these on discharge.  
**Public holiday?**  
Ensure prescriptions are sent to an available pharmacy and inform patient / whānau to collect these on discharge

## Prescribing for symptom management in the last days of life

Symptom		PRN medication dose range and charting	Ampoule strength	Packaged as a box of	How long does it take for medication to work?	Common side effects
Pain (if opioid naïve)	Rx	<b>morphine</b> 2.5-5mg subcut q4 hourly PRN for pain	10mg/1ml	5 ampoules	20 mins to take effect, peaks around 30-60 minutes.	constipation, nausea and vomiting, dry mouth, itchy skin, drowsiness, confusion
	Rx	<b>oxycodone</b> 2.5-5mg subcut q4 hourly PRN for pain	10mg/1ml	5 ampoules	20 mins to take effect, peaks around 30-60 minutes	constipation, nausea and vomiting, dry mouth, drowsiness, confusion.
Distress, agitation or restlessness	Rx	<b>midazolam</b> 2.5-10mg subcut q4 hourly PRN for distress/agitation	15mg/3ml	5 ampoules	5-10 minutes to take effect	drowsiness, forgetfulness, can irritate the skin - give slowly
	Rx	<b>midazolam nasal spray</b> 1-2 puffs each nostril q1 hourly	15mg/3ml	5 ampoules in nasal spray	within a few minutes	as above - can irritate nasal passages in which case suggest buccal use
Respiratory tract secretions	Rx	<b>hyoscine butylbromide</b> 20mg subcut q4 hourly PRN for secretions	20mg/1ml	5 ampoules	rapid acting, lasts about 2 hours	dry mouth, blurred vision, rash, drowsiness, agitation
Nausea or vomiting	Rx	<b>levomepromazine</b> 2.5mg-5mg subcut q8 hourly PRN for nausea or vomiting	25mg/1ml	10 ampoules	60 mins to take full effect	drowsiness, rash, dry mouth
		<b>olanzapine wafers</b> 2.5-5mg sublingually at night for nausea	5mg	10 wafers	10 minutes	drowsiness
Breathlessness	Rx	<b>morphine</b> 2.5-5mg subcut q4 hourly PRN for breathlessness	10mg/1ml	5 ampoules	20 mins to take effect, peaks around 30-60 minutes.	as above
	Rx	<b>oxycodone</b> 2.5-5mg subcut q4 hourly PRN for breathlessness	10mg/1ml	5 ampoules	20 mins to take effect, peaks around 30-60 minutes.	as above

A **syringe driver** is indicated if the patient has difficulty swallowing, poor absorption of oral medicines, multiple symptoms, or if their symptoms are not controlled by ongoing subcut PRN medications (i.e. more than 3 doses of subcut PRN medications in 24 hours). For advice about starting or adjusting a syringe driver, contact Arohanui Hospice (063566606, anytime) or the Hospital Palliative Care Team (ext 7484, Mon-Fri 8.30-4.30). If a person is already on regular opioids, the PRN morphine or oxycodone dose range may be different from the doses recommended above.

- PRN medication should be used alongside a syringe driver for symptom management - calculate the appropriate opioid PRN dose using 1/6 of the total daily dose of opioid in the syringe driver.