



## Palliative Care Kits for the Communities

### Policy and Procedure

#### **Purpose:**

To facilitate access to the medications needed for palliative treatment of patients living in Nunavut when there is a delay receiving these medications from the retail pharmacies.

#### **Procedure:**

- 1) When a patient is identified as requiring urgent palliative treatment, a physician or nurse practitioner will complete the “Palliative Care Kit Order Form” to indicate which medications will be needed for the patient.
  - a. Medications that can be ordered on the “Palliative Care Kit Order Form” are those that are not part of the regular health centre stock.
  - b. Other medications that may be required for a palliative patient that are part of the regular health centre stock medications shall be used as per the GN Drug Formulary and the prescribing physician/nurse practitioner. Health Centres may ask for increased stock from their Regional Pharmacy when required.
- 2) This order form is to be faxed to the Qikiqtani General Hospital Pharmacy.
- 3) The Pharmacy will prepare the medications requested in a kit for the patient specified and ship the medications to the appropriate community.
- 4) A patient-specific narcotic register will be sent with the kit for recording receipt and administration of the narcotic and controlled drugs.
- 5) Several of the medications which may be ordered and included in the kit are “High Alert” medications, e.g., morphine 50 mg/mL, hydromorphone 10 mg/mL and hydromorphone 50 mg/mL. These medications will be in separate bags with “High Alert” labels affixed to the bags. An independent double check of the dose by a second nurse is required before administration of a high alert medication to the patient. Documentation of the independent double check is required.
- 6) The kit of medications is to be securely locked in the Pharmacy Stock Room of the Health Centre marked for Palliative Care or if in Iqaluit, in the Home Care Office Pharmacy Room.
- 7) Physician or nurse practitioner orders are required for the use of the medications in the kit.
- 8) When the kit of medications is no longer required, it is to be sent back to the Qikiqtani General Hospital Pharmacy along with a copy of the Narcotic Register. The original Narcotic Register is to be stored at the Health Centre (or Home Care Office in Iqaluit) for a period of seven (7) years for audit purposes.



## Palliative Care Kit Order Form

Patient Name: \_\_\_\_\_

Community: \_\_\_\_\_

Date of Birth: \_\_\_\_\_

NU MRN#: \_\_\_\_\_

### Palliative Medications not stocked in Health Centres:

**Note:** All of these medications are covered by NIHB for palliative patients

Medication	Pack Size Availability	Order Quantity
<b>Non-Narcotics:</b>		
Atropine 0.6 mg/mL inj	10 x 1 mL	
Dexamethasone 4 mg tablets	10s	
Glycopyrrolate 0.4 mg/2 mL	10 x 2 mL	
Methotrimeprazine 25 mg/mL inj	10 x 1 mL	
Scopolamine 0.6 mg/mL inj	10 x 1 mL	
<b>Narcotics and Controlled Drugs:</b>		
Fentanyl 12 mcg/hr transdermal patch	5s	
Fentanyl 25 mcg/hr transdermal patch	5s	
Fentanyl 50 mcg/hr transdermal patch	5s	
Fentanyl 100 mcg/hr transdermal patch	5s	
Hydromorphone 1 mg tab	10s	
Hydromorphone CR 3 mg cap	10s	
Hydromorphone CR 12 mg cap	10s	
Hydromorphone 2 mg/mL inj	10 x 1 mL	
Hydromorphone 10 mg/mL inj	10 x 1 mL	
Hydromorphone 50 mg/mL inj *non-formulary*	10 x 1 mL	
Morphine SR 60 mg cap	10s	
Morphine 50 mg/mL inj *non-formulary*	10 x 1 mL	

Physician/NP Signature: \_\_\_\_\_ Date : \_\_\_\_\_

### The following palliative medications are already stocked in Health Centres:

**Note:** Please use health centre stock as required

Non-Narcotics	Narcotics and Controlled Drugs
Atropine 1% ophth drops	Fentanyl 100 mcg/2 mL inj
Dexamethasone 20 mg/5 mL	Ketamine 20 mg/2 mL inj
Dimenhydrinate 50 mg/mL inj	Ketamine 100 mg/2 mL inj
Dimenhydrinate 50 mg supp	Lorazepam 1 mg SL tab
Haloperidol 5 mg/mL inj	Lorazepam 4 mg/mL inj **fridge**
Lidocaine 1,000 mg/250 mL D5W inj	Midazolam 10 mg/2 mL inj
Metoclopramide 10 mg/2 mL inj	Morphine 1 mg/mL oral liquid
Octreotide 0.1 mg/mL inj **fridge**	Morphine IR 5 mg tabs
Ondansetron 4 mg orally disintegrating tablets	Morphine SR 15 mg cap
Ondansetron 4 mg/2 mL inj	Morphine 10 mg/mL inj

Fax this Order Form to the **Qikiqtani General Hospital Pharmacy:**

Tel: 867-975-8600 ext 2306

Fax: 867-975-8606

This kit of medications is to be securely locked in the Health Centre Pharmacy Stock Room. The narcotics and controlled drugs are to be further secured in the Health Centre Narcotic Cupboard.

The narcotic items must be recorded on the narcotic register provided and counted once weekly (or more frequently as directed by the SCHP).

A copy of the narcotic register is to be returned to the Qikiqtani General Hospital Pharmacy upon return of any remaining content of the kit when no longer required. The original narcotic register is to be stored at the health centre for a period of seven (7) years for audit purposes.