

SUBCUTANEOUS SYRINGE DRIVER INSTRUCTION AND OBSERVATION CHART FOR MCKINLEY T34

PRESCRIPTION DETAILS [for completion by the prescriber] – a separate form must be completed for each syringe driver

DRUG		DOSE	DILUENT	PHARMACY ^a	ALLERGY STATUS	PATIENT DETAILS [Affix label if available]
Date	1.		Please circle			NHS Number:
Route	2. SC		Water for injection			Surname:
Duration of flow	3. Please circle 12 hours		or			Forename(s):
	24 hours		Normal Saline			Address:
The patient will be reviewed by the attending clinician at each attendance and, where there has been a change of circumstances, will refer to the prescriber for any necessary treatment changes or need for review. If, as the prescriber, you wish to review the patient on a particular date, please stipulate below - Review date:						
Prescriber name: Signature: Practice:						
a. Pharmacy: Only complete if this form is used on a ward. NOT required for community use.						

WARD OR BASEPOINT

ADMINISTRATION & OBSERVATION DETAILS [for completion by administering clinician]

The patient will be reviewed by the attending clinician at each attendance and, where there has been a change of circumstances, will refer to the prescriber for any necessary treatment changes or need for review.

ADMINISTRATION ¹	Day and Date	OBSERVATIONS ²	Time
Start time of infusion:		Site appearance ⁶ :	
Syringe size used	17ml infusion in 20ml syringe	Syringe/line contents clear ³ - OK to continue?	
20ml or 30ml	22ml infusion in 30ml syringe	Infusion rate setting – as at set up? [Y/N]	
Syringe Driver serial No.:	Battery Status [%]:	Infusion time remaining [HH:MM]	
Infusion rate [ml/hr]:		Volume still to be infused (vtbi) [ml]	
Site used ⁵ :	Site Appearance ⁶ :	Is the VTBI correct for time remaining [Y/N]	
Drawn up by:	Checked by:	Volume infused [ml]	
Details of any problems & actions taken:		Battery status [%] ⁴	
If syringe contents discarded:		Is the keypad locked? [Y/N]	
Volume discarded:	Date & time:	Observer's initials	
Discharged by:	Checked:		

- To be completed each time syringe driver is loaded
 - WARD - Completed 30 minutes after loading and then every 4 hours
 infusion COMMUNITY – Complete at set up, at each subsequent visit and at syringe change
 - If contents of syringe look cloudy, precipitation has occurred. STOP infusing and contact (inflammation) prescriber. Refer to policy for guidance on checking compatibility
4. Change battery when less than 10% (ward) or 40% (community)
 5. Document insertion site of winged
 6. Appearance: Use code below
 NP (no problem) P (pain) I
 SW (swelling) B (bleeding) H

SUBCUTANEOUS SYRINGE DRIVER CONTINUATION SHEET

PATIENT NAME	NHS NUMBER
ADMINISTRATION & OBSERVATION DETAILS	
WARD OR BASEPOINT NAME	

The patient will be reviewed by the attending clinician at each attendance and, where there has been a change of circumstances, will refer to the prescriber for any necessary treatment changes or need for review.

ADMINISTRATION ¹	Day and Date	OBSERVATIONS ²	Time [HH:MM]
DAILY SET UP			
Start time of infusion:		Site appearance ⁶ :	
Syringe size used	17ml infusion in 20ml syringe	Syringe/line contents clear ³ - OK to continue? [Y/N]	
20ml or 30ml	22ml infusion in 30ml syringe	Infusion rate setting – as at set up? [Y/N]	
Syringe Driver serial No.:	Battery Status [%]:	Infusion time remaining [HH:MM]	
Infusion rate [ml/hr]:		Volume still to be infused (vtbi) [ml]	
Site used ⁵ :	Site Appearance ⁶ :	Is the VTBI correct for time remaining [Y/N]	
Drawn up by:	Checked by:	Volume infused [ml]	
Details of any problems & actions taken:		Battery status [%] ⁴	
If syringe contents discarded: Volume discarded: _____ Checked: _____		Is the keypad locked? [Y/N]	
Date & time: _____ Discharged by: _____		Observer's initials	

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		MONITORING PROGRESS	

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- Change batter when less than 10% (ward) or 40% (community)
- Document insertion site of winged infusion
- Appearance: use code to the right

- NP (no problem)
P (pain)
I (inflammation)
SW (swelling)
B (bleeding)
H (hardening)

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ADMINISTRATION & OBSERVATION DETAILS			
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