

AIM:

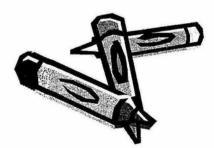
- Revision of driver set up (same as Graseby rep Dec 03)
- To increase understanding of set-up procedure.
- Promote confidence in using driver.



MS26 Syringe driver Features

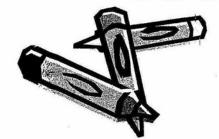
- Driver has green label stating 24 HR.
- Boost button Do NOT use boost
 - amount of drug delivered will not be sufficient to relieve pain.
 - Drugs are often used in combination, you will boost all of the drugs.
 - Multiple boosting → You cannot predict when the driver will run out.
- Driver delivers drugs by the length travelled over time = Rate = <u>fluid length (mm</u>)

Time (1 day)



Current method Nov 04

- 1. Use 10ml Luer lock syringe.
- 2. Approx 8ml = 48mm length in 10ml syringe.
- 3. Measure 48mm in length & note where this is on syringe barrel.
- 4. Make up final solution of drug(s) to 48mm in length.
- 5. Set Rate = 48mm/1 day and do not alter.
- 6. Prime line <u>DO NOT</u> change rate after line is primed.
- 1st infusion will <u>ALWAYS</u> run through in less than 24hr. This is the method you have been taught by the Graseby rep in Dec 2003.



Reminders

- Set up syringe driver as directed (previous slide). 1.
- Complete syringe driver chart fully. 2.
- 3. Check volume of infusion in syringe & monitor patient at regular intervals.
- When approx. <1ml is left in syringe, be ready to 4. set up new syringe.
- Check battery status at each syringe change. 5.
- A new syringe chart must be completed each time 6. syringe is changed.
- check solution in syringe for crystallization or 7. cloudiness = precipitation = drug incompatible.

NB: change butterfly needle & extension tube & re-site after every 72hrs.

PS apart from 1st set-up, expect driver to run out in ~ 1day (24hr). 5

6

Calculations

Rate 48mm/1day = 48mm/24hr Infusion will travel along syringe barrel at 2mm/hr.

To calculate how long the first infusion will last (x): [original vol – vol for priming] = x hrOriginal vol 24hr

x hr = (volume in syringe after priming) x24 hr Original volume

To calculate actual concentration administered:

y = (volume in syringe after priming) x prescribed drug strength Original volume



Why Rate is set BEFORE priming line.

- If you prime the line then measure the fluid length & set the rate
- you are <u>diluting</u> drug/s & infusion will last for approximately 24hrs.

Therefore you will NOT be giving the concentration that is prescribed.

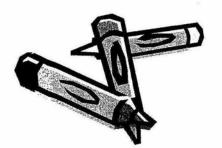


See example

Scenario 1: priming line then set rate.

- Rx 40mg diamorphine in 24 hr csci.
- Make volume to 8mls. (= 40mg/8ml = 5mg/ml)
- Priming line loses 3ml leaving 5ml.
- Measure 5ml fluid = 30mm. Rate is 30mm/1 day.
- Set rate at 30mm. Drug will run through in 24hr.

Actual concentration of drug in 5ml administered = (5ml/8ml)x40mg = 25mg of diamorphine in 24hr. Patient has received 15mg less than what is prescribed.



9

Scenario 2: Set rate then prime line

- Rx 40mg diamorphine in 24 hr csci.
- Make volume to 8mls. (= 40mg/8ml = 5mg/ml)
- Measure 8ml fluid = 48mm. Set Rate 48mm/1 day.
- Priming line loses 3ml leaving 5ml.
- Infusion will run through in less than 24hr.

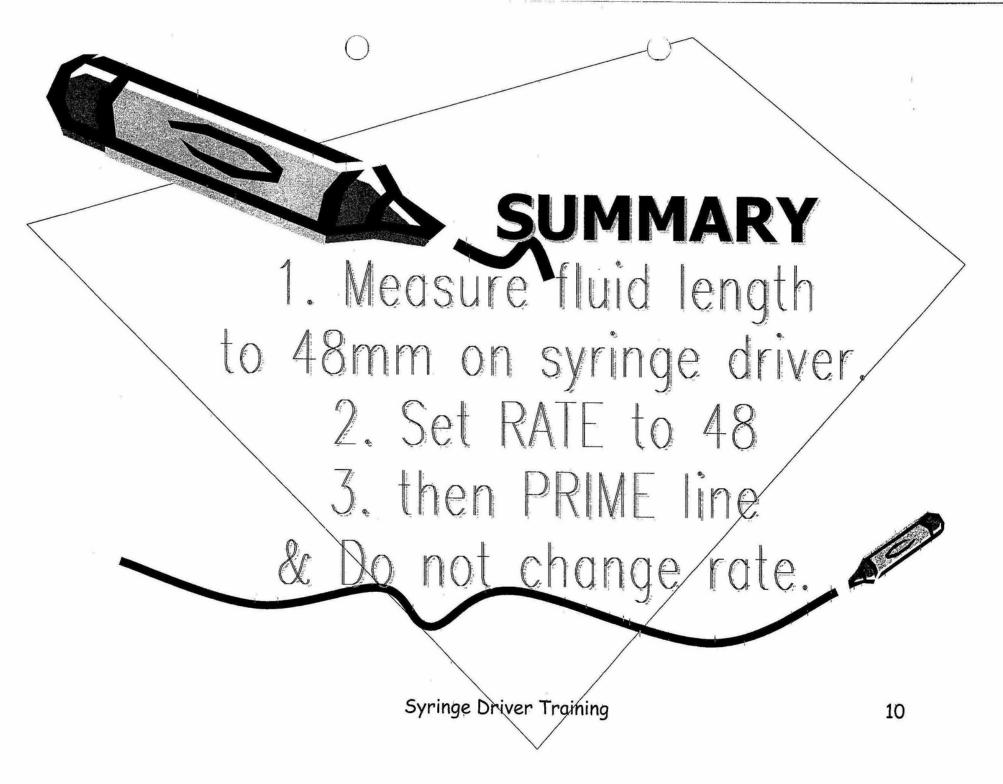
Actual concentration of drug in 5ml administered = 25mg of diamorphine.

The infusion lasts: <u>5ml</u> x24hr = 15hrs.

8ml

If you extrapolate the time to 24hr, the patient will have received the prescribed dose.

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11

New 42 day Rx charts

- 1. Start: Monday 8th November 2004
- **2. 3 months** trial end Feb 2005.
- 3. On wards: Daedalus, Dryad & Sultan.
- 4. How:
 - a. New patients start new chart
 - b. When re-write chart.
 - Remove old charts & continuation sheets to safe place for future use.
- Evaluation after 3 months: complete questionnaire with your comments on chart. Audit of chart.

6. **Difference**: for non-administration – write