South Staffordshire & Shropshire Healthcare NHS
NHS Foundation Trust

PATIENT GROUP DIRECTION (PGD)
FOR THE SUPPLY AND ADMINISTRATION OF SUBCUTANEOUS LIDOCAINE HYDROCHLORIDE INJECTION BP 1% w/v TO FACILITATE SUBDERMAL IMPLANT INSERTION AND/OR REMOVAL

by registered nurses and midwives in Integrated Sexual Health services employed by South Staffordshire and Shropshire NHS Foundation Trust

This Patient Group Direction for use in South Staffordshire & Shropshire Healthcare NHS Foundation Trust and is authorised by:

Position of Signatory	Name	Signed	Date
Medical Director	Dr Abid Khan		
Chief Pharmacist	Cathy Riley		
Director of Quality & Clinical Performance	Therèsa Moyes		
Director of Nursing	Alison Bussey		

The named below, being employees of South Staffordshire & Shropshire Healthcare NHS Foundation Trust are authorised to supply and administer lidocaine injection 1% to patients in Integrated Sexual Health Services under this Patient Group Direction

Name	Job Title	Signed	Date

This Patient Group Direction is operational from: 1st October 2017
Review date: Aug 2019. Expires on 31st Oct 2019
Replaces PGD 3616

Professional Responsibility

All registered nurses and non medical prescribers being employees of South Staffordshire & Shropshire Healthcare NHS Foundation Trust are authorised to administer Lidocaine 1% as specified under this Patient Group direction following demonstration of the competencies below;

Professional Responsibility / Competencies

1. The registered nurse will have undertaken appropriate training in order to carry out clinical assessments of patient that requires treatment according to the indication listed in the PGD
2. Qualification in contraception/sexual health (university modules/FSRH): **Note:** an introduction to contraception/ sexual health is not sufficient. Has had training in the use of PGDs
3. Is competent in the assessment of individuals using Fraser guidelines
4. Has undergone regular training and updating in safeguarding children and vulnerable adults
5. All nurses will have received training in the management and treatment of anaphylactic shock on an annual basis
6. Each nurse will keep a record in their professional portfolio of the updates attended during every 12 month period – This information will also form part of the team's annual training plan
7. The nurse will have due regard for the NMC Code of Conduct, Scope of Professional Practice and Standards for Medicines Management (Nursing & Midwifery Council)
8. Undertaken appropriate training and possess the competencies for working under PGDs for the supply and administration of medicines
9. All registered nurses details and signature must be entered onto the PGD
10. Following administration a record of the date, strength, brand and dose of the medication should be recorded in the clients records and documented in the medicine card with PGD number recorded as authorisation

For full product information, always refer to the latest SPC (Summary of Product Characteristics).

If the anaphylaxis is related to a medication, please remember to report to the CSM, via a Yellow Card Report (http://emc.medicines.org.uk)

Supply/Administration of	Lidocaine Hydrochloride BP 1% w/v subcutaneous injection
Legal Classification	Prescription Only Medicine
Black Triangle?	No
Type	Injection
Storage	Supplies will be available from central stock location. Information leaflets must be given. Any relevant documentation must be completed.
Condition to be treated	Local anaesthetic for insertion and/or removal of subdermal contraceptive implant (see PGD for the supply and insertion of Etonogestrel (Nexplanon®) subdermal implant by nurses in Sexual & Reproductive Health Services)
Inclusion Criteria	• Any individual requiring the insertion and/or removal of subdermal contraceptive implant. • Individual requiring insertion and/or removal of subdermal contraceptive implant should also meet the inclusion criteria of the subdermal contraceptive implant PGD
Exclusion Criteria	**Personal Characteristics & Reproductive History** • Known hypersensitivity to Lidocaine Hydrochloride • Individual who had received a previous maximum infiltration of local anaesthetic within 4 hours • Individuals under 16 years of age and assessed as not competent using Fraser guidelines • Individuals 16 years and over and not competent to consent • Existing implant cannot be palpated (for removals only) **Cardiovascular Disease** • Complete heart block • Hypovolaemia **Other conditions** • Porphyria • Inflammation or infection in the tissues to be injected

	• Individual wishes to see a doctor <u>Cautions:</u> • If under 13 years of age follow local safeguarding policy • Discuss with appropriate doctor/independent non-medical prescriber any medical condition or medication of which the nurse is unsure/uncertain • Ensure emergency drugs and equipment, including adrenaline are available for the treatment of anaphylaxis and emergencies according to local policy
Action if excluded or patient declines	• Refer to appropriate doctor / independent non-medical prescriber • Document all actions taken • Record the refusal in the clinical record • Refer to appropriate doctor/independent non-medical prescriber where required.
Reasons for seeking further advice from doctor	• Discuss with appropriate doctor/independent nurse prescriber any medical condition or medication of which the nurse is unsure • Should the patient meet any of the exclusion criteria
Administration Route	Subcutaneous or intradermal surface infiltration only
Dose	Lidocaine (Lignocaine) 1% w/v (10 mg in 1 mL) in 5 mL or in 10 mL ampoules Maximum dose not to exceed 2mL for insertion and/or removal
Administration Schedule	Single episode of treatment
Warnings/Adverse Reactions	Refer to current Summary of Product Characteristics (SPC) of relevant product and current British National Formulary (BNF) for full list and further information. This list may not represent all reported side effects of this medicine. **Serious symptoms** When used for surface anaesthesia rapid and extensive absorption may result in systemic side effects.

	CNS effects include: • Confusion • Respiratory depression • Convulsions • Hypotension • Bradycardia • Hypersensitivity In the event of untoward or unexpected adverse reactions: • If necessary seek appropriate emergency advice and assistance • Document in the individual's clinical record and inform appropriate doctor/independent nurse prescriber • Complete incident procedure if adverse reaction is severe (refer to local organisational policy) • Use yellow card system to report serious adverse drug reactions directly to the Medicines and Healthcare products Regulatory Agency (MHRA). Yellow cards are available in the back of the BNF or obtained via Freephone 0808 100 3352 or online at www.yellowcard.mhra.gov.uk. The public can report adverse effects directly to the MHRA via the yellow card scheme and should be encouraged to do so.
Advice/Management of Adverse Reactions & Follow-up Action	• Provide Manufacturer's Patient Information Leaflet (PIL) and discuss • Explain mode of action, side effects, and benefits of the medicine • Ensure individual has the contact details of the service • Individual to return to clinic if she has any concerns
Use in pregnancy and lactation	Appropriate for PGD
Records	The authorised registered nurse must ensure the following is documented in the clinical record: • Individual's name, address and date of birth • GP contact details where appropriate • Attendance date • Reason for attendance • Relevant past and present medical and family history, including drug history

	• Any known allergy • Relevant examination findings (where appropriate) • Inclusion or exclusion from PGD • A statement that supply or administration is by using a PGD and PGD number recorded • Advice given about the medication including side effects, benefits, and when and what to do if any concerns • Details of any adverse drug reactions and what action taken • Any referral arrangements • Any administration outside the terms of the marketing authorisation • The consent of the individual • If individual is under 13 years of age, record action taken • If individual is under 16 years of age document competency using Fraser guidelines • If individual is 16 years of age and over and not competent, record action taken • Record the name/brand, dose of the medication and quantity supplied • Record batch number and expiry date according to local policy or national guidelines • Record follow up and/or signposting arrangements • Any other relevant information that was provided to the individual • Name and signature (which may be an electronic signature) of the nurse supplying or administering the medicine