
Applies to

All clients seen by Total Care Health Services [TCHS] Registered Nurses where the nurse is responsible for administering IV medication or vaccination in a community setting

Indications for use

Adrenaline is indicated for the treatment of ANAPHYLAXIS. Defined as being;

A rapid onset of life threatening respiratory and cardiovascular symptoms brought about by hypersensitivity to an allergen such as a medication, foreign protein or toxin. Where Anaphylaxis is suspected the IV medication (if by infusion) or Vaccination should be immediately stopped, emergency services called and adrenaline administered.

Scope

Registered Nurses employed by Total Care Health Services who have met all competency requirements to administer Adrenaline for the treatment of anaphylaxis; being the same competencies as those required for the administration of medication in a community setting

Medicine

ADRENALINE: IM Adrenaline 1:1000 solutions (1mg/1ml)

Dosage

Age Group	IM adrenaline dose	ml of 1:1000 adrenaline
Adults and children > 12 yrs	0.5mg	0.5ml
6-12 yrs	0.3mg	0.3ml

If necessary repeat after 5 minutes this is dependent on patient response

Route

Deep IM injection (Thigh muscle preferred)

Escalation

If after 3 doses of adrenaline the patient is not responding, call 111 again (if required) for further instruction via phone until ambulance arrives.

Further Actions Required

All community patients must be referred to Emergency Care for assessment and observation by ambulance – rebound anaphylaxis can occur 12-24 hours after initial episode. The community nurse will remain with the client until medical assistance arrives. A verbal and written “hand-over” is to be provided to them. The nurse will notify the TCHS Nurse Manager as soon as practical and complete an Incident/Accident form and an exception report for ACC patients.

Persons Authorised

Registered Nurses who have completed competency requirements for medication administration as per the TCHS Medication Administration Policy

Documentation

The nurse will clearly document all symptoms, vital signs and adrenaline given – dose, site and time given. Also to be documented is the sequence of events and response to interventions.

Countersigning/Audit

The standing order does not require counter signing. An audit of records of administration will be conducted following every event requiring Adrenaline administration.

Issued by

Dr: _____

M Ward *AW EDWARDS*
20/5/2021 *NOM 10862*

Date: _____

Received by

RN Juanita West, Clinical Nurse Manger on behalf of all RNs permitted to administer Adrenaline under a standing order

Date: _____

Validity

This standing order is valid for a maximum of 1 year from the date of issue or the standing order is valid until replaced by a new standing order within the issue period or is cancelled by the issuer or the issuer is no longer available.

Additional Information

Total Care Health Services Administration of Medication Policy

Medsafe data

Medical Practitioner Name: _____
Medical Practitioner Signature: _____
Date of signing: _____

Edward
21/5/2021