

Guidance for prescribing 'Just in Case' medication for patients going home for terminal care

'Just in case' (JIC) drugs are prescribed to ensure that medication is readily available if required for symptoms that may develop as a person dies and can cause distress if not addressed. The most common symptoms are pain, nausea / vomiting, rattling secretions and terminal agitation / distress. It is expected that JIC meds are prescribed for patients assessed as being in the **last week of life**.

Patients **transferring home or to a nursing home for terminal care** should have these prescribed by the medical team caring for the patient in the RUH. **A paper prescription document is required** for JIC medications, as this document also authorises community staff to administer the medication. It is valid for 7 days only, by which time the GP or non-medical prescriber will have prescribed medication on a community chart used in their CCG.

Guidance for completion of paper 'Prescription and Administration Instructions' document for discharge JIC medications in last week of life:

1. **JIC Prescription and Administration document available from:**
Palliative Care Team (during working hours) or Pharmacy Department (out of hours)
2. **Check standard medication is appropriate for named patient, for example:**
 - No known intolerance of any medication listed
 - Patients with severe renal failure may need a reduced dose of morphine, or fentanyl as an alternative. Please discuss with pharmacist or palliative care team (bleep 7529)
3. Date and sign **each** drug.
4. **Adjustments to morphine or midazolam dose must be clearly prescribed and countersigned, and quantity of ampoules written in words and figures.**
5. Ensure completed prescription chart reviewed by the ward pharmacist for TTAs.
6. Telephone patient's Primary Health Care Team to update. Sign on prescription / administration form when done:
 - **GP – medical team to contact.**
 - **District Nurse – qualified nurse to contact**
7. Prescribe regular medication patient currently receiving, including medication given in a continuous subcutaneous infusion, on ePMA TTA template.

For further information or advice contact Ward Pharmacist, or Palliative Care Team, ex 5567 or bleep 7529 / 7615