

Administration**PATIENT GROUP DIRECTION (PGD) FOR****BENZYL PENICILLIN INJECTION 600MG AND 1200MG**

YOU MUST BE AUTHORISED BY NAME, UNDER THE CURRENT VERSION OF THIS PGD BEFORE YOU ATTEMPT TO WORK ACCORDING TO IT

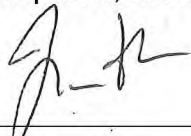

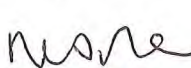
Clinical Condition	
Indication	Patients presenting at MIU with suspected bacterial meningitis or meningococcal septicaemia as indicated by symptoms (e.g. severe headache, photophobia, stiff neck, drowsiness, vomiting, malaise, fever, rash etc).
Inclusion criteria	Patients 1 month or over presenting with clinical symptoms suggestive of bacterial meningitis or meningococcal septicaemia (as above)
Exclusion criteria If any of the following apply the PGD CANNOT be used and the patient must be referred to a prescriber	Patients under 1 month of age Previous serious allergy to penicillin (i.e. anaphylaxis or anaphylactoid reaction or severe rash) NB: Cefotaxime is the alternative (not available in MIU)
Cautions - Seek further advice from doctor before proceeding and document advice	Pregnancy or breastfeeding – penicillins are generally considered safe in pregnancy and only trace amounts are excreted in breast milk. Hypersensitivity to cephalosporins
Further information	Intended as single parenteral dose prior to (immediate) admission to A&E or Paediatric ward.
Action if patient declines or is excluded	Transfer to Accident and Emergency Department immediately

Drug Details	
Name, form & strength of medicine	Benzylpenicillin Injection 600mg and 1200mg by IM injection
Legal status	Prescription Only Medicine (POM)
Route/Method	Intramuscular, contents of vial to be dissolved in Water for Injections
Dosage	Adult and children 10 years and above 1.2g Children 1 – 9 years 600mg Infant 4 - 51 weeks 300mg
Frequency	Once only
Quantity to administer	Single dose
Side effects	Hypersensitivity reactions including urticaria, fever, joint pain, rashes
Follow up	Transfer patient urgently to Accident & Emergency / Paediatric ward

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Staff Characteristics	
Professional qualifications	Registered nurses and paramedics with a minor injuries qualification
Specialist competencies or qualifications	A registered nurse or paramedic with minor injuries qualification, after discussion and agreement with the MIU lead. Has completed the PGD online Open Learning Package and is therefore competent to supply and administer medicines under PGDs in this trust. Is trained in the management of anaphylaxis.
Continuing education & training	The practitioner should be aware of any change to the recommendations for the medicine listed. It is the responsibility of the individual to keep up-to-date with clinical developments as part of their continued professional development.
Referral Arrangements and Audit Trail	
Records/audit trail	Patient's name, address, date of birth, Contact details of GP (if registered), Diagnosis. Dose and form supplied. Advice given to patient (including side effects). Signature/name of staff who supplied the medication. Details of any adverse drug reaction and actions taken including documentation in the patient's medical record. Referral arrangements (including self-care)
References/Resources and comments	Current version of Summary of Product Characteristics, BNF and Worcestershire Guidelines for Antimicrobial Prescribing
Clinical Authorisation	
Lead Doctor	Dr John Devapriam, Medical Director Signature:  Date: 9/4/19
Lead Pharmacist	Dr Alex Johnson, Pharmacist Signature:  Date: 10/4/19
Organisational Authorisation	
On behalf of Worcestershire health and Care NHS trust	Michelle Clarke, Director of Nursing & Quality Signature:  Date: 4/4/19
Patient Group Direction Peer Reviewed by	
Senior Nurses MIU	Senior Nurses MIU

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Individual Authorisation

PGDs DO NOT REMOVE INHERENT PROFESSIONAL OBLIGATIONS OR
ACCOUNTABILITY.

It is the responsibility of each professional to practice only within the bounds of their own competence and in accordance with their own Code of Professional Conduct.

Note to Authorising Managers: authorised staff should be provided with an individual copy of the clinical content of the PGD and a photocopy of the document showing their authorisation. Authorising managers should be sure that staff signed up to use the PGD have the necessary competence, training and knowledge to apply it.

I have read and understood the Patient Group Direction and agree to supply/administer this medicine only in accordance with this PGD. I confirm that I have the necessary competence, training and knowledge to apply it.

Name of Professional	Signature	Authorising Manager	Date

