

**Supply of Medicine**

PATIENT GROUP DIRECTION (PGD) FOR

**CO-AMOXICLAV 375 AND 625MG TABLETS, 125/31 AND 250/62  
SUSPENSION****YOU MUST BE AUTHORISED BY NAME, UNDER THE CURRENT VERSION OF THIS PGD BEFORE  
YOU ATTEMPT TO WORK ACCORDING TO IT**

<b>Clinical Condition</b>	
<b>Indication</b>	Individuals presenting at MIU following animal or human bites or puncture wounds either (a) needing prophylaxis against infection or (b) treatment of an infection due to a bite or puncture wound (ie delayed presentation).
<b>Inclusion criteria</b>	Individuals presenting with penetrating bites or puncture wounds suitable for treatment as an outpatient
<b>Exclusion criteria</b> If any of the following apply the PGD CANNOT be used and the patient must be referred to a prescriber	<b>Superficial bites where the skin is not broken – these require local treatment only.</b> Children under one year of age History of drug-induced cholestatic jaundice or hepatitis. Previous course of antibiotics for the same episode. Severe renal impairment Concurrent treatment with probenecid or methotrexate <b>In genuine penicillin allergy use doxycycline and metronidazole. If a child use clarithromycin in place of doxycycline.</b> If there is no PGD you may require a prescriber.
<b>Cautions - Seek further advice from doctor before proceeding and document advice</b>	If bitten abroad and rabies is a possibility contact Health Protection Agency, CCDC or local microbiologist Pregnancy – no known problems but use only if potential benefits outweigh potential risk Concurrent treatment with warfarin –INR monitoring Any concerns about the severity of the infection For human bites consider blood-borne viruses. Follow the blood borne contamination incident policy (see link below).
<b>Further information</b>	Check tetanus status. The blood borne contamination incident policy can be found on the Worcestershire Health Services website: <a href="http://www.worcestershirehealth.nhs.uk/infection-control-service/policies-procedures/">http://www.worcestershirehealth.nhs.uk/infection-control-service/policies-procedures/</a> (Blood Borne contamination incident Appendix i)
<b>Action if patient declines or is excluded</b>	Refer to doctor / A & E as appropriate. Document refusal or action taken in patient's records.

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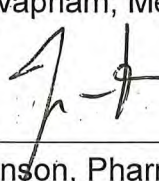
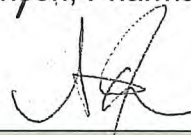
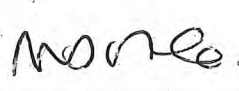
**CO-AMOXICLAV 375 AND 625MG TABLETS, 125/31 AND 250/62  
SUSPENSION**

<b>Drug Details</b>	
<b>Name, form &amp; strength of medicine</b>	Co-amoxiclav tablets 250/125 (375mg) and 500/125 (625mg) Co-amoxiclav suspension 125/31 in 5ml and 250/62 in 5ml
<b>Legal status</b>	Prescription Only Medicine (POM)
<b>Route/Method</b>	Oral
<b>Dosage / frequency</b>	1 to 6 years                      Suspension 125/31 (5ml) 7 to 12 years                    Suspension 250/62 (5ml) or One 375mg tab 12 – adult (ie over 40kg)    One 625mg tablet All doses are to be given three times daily
<b>Duration of treatment</b>	7 days
<b>Quantity to supply</b>	21 tablets or 100ml suspension sufficient for 7 days treatment (discard any remainder)
<b>Side effects</b>	Side-effects may include nausea, vomiting and diarrhoea - seek medical advice if severe May cause a rash. If this happens, stop the antibiotic and seek immediate advice from GP. Suspension may cause staining of teeth, which can be removed by brushing.
<b>Advice to patient/carer</b>	Take the complete course Take at start of a meal to maximise effect Shake suspension well before use and store in the fridge Patient information leaflet should be given  INR can be altered following a course of antibiotics in patients taking warfarin. The patient should be advised to have an INR measured during the time they are on the antibiotic.  If the infection appears to be spreading or getting worse in any way or if fever develops, immediate medical advice must be sought.

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<b>Staff Characteristics</b>	
<b>Professional qualifications</b>	Registered nurses on the NMC Register
<b>Specialist competencies or qualifications</b>	A registered MIU nurse, 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 in adults & children
<b>Continuing education &amp; training</b>	It is the responsibility of the individual to keep up-to-date with clinical developments as part of their continued professional development.
<b>Referral Arrangements and Audit Trail</b>	
<b>Records/audit trail</b>	Patient's name, address, date of birth, Contact details of GP (if registered), Diagnosis, Dose and form administered 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)
<b>References/Resources and comments</b>	Current version of Summary of Product Characteristics, BNF and Worcestershire Guidelines for Antimicrobial Prescribing
<b>Clinical Authorisation</b>	
<b>Lead Doctor</b>	Dr John Devapriam, Medical Director  Signature:  Date: 8/6/19
<b>Lead Pharmacist</b>	Dr Alex Johnson, Pharmacist  Signature:  Date: 12/6/19
<b>Organisational Authorisation</b>	
<b>On behalf of Worcestershire Health and Care NHS Trust</b>	Michelle Clarke, Director of Nursing & Quality  Signature:  Date: 6/6/19
<b>Patient Group Direction Peer Reviewed by</b>	
Senior Nurses MIU	

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**CO-AMOXICLAV 375 AND 625MG TABLETS, 125/31 AND 250/62  
SUSPENSION****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.

<b>Name of Professional</b>	<b>Signature</b>	<b>Authorising Manager</b>	<b>Date</b>