

## Clinical Guideline for Symptom Control for inpatients with COVID-19

The Palliative Care Team (PCT) can be contacted for advice on bleep 070 (9-5pm Monday-Sunday). For advice out of hours contact Princess Alice Hospice via CARELINE (0208 7449414)

**Symptom control should be given early alongside active management. Opioid and anxiolytics should not be withheld due to inappropriate concern about respiratory depression.**

**All patients-Complete and record TEP and DNACPR as appropriate to establish ceiling of treatment.**

### **For all patients**

- Prescribe anticipatory S/C medication (bundle on CRS – End of Life Care Anticipatory Subcutaneous Prescribing)
- Starting doses are recommended in the table below

Symptom	Recommendation
<b>Breathlessness/ Pain/Cough</b> Opioids reduce the sensation of breathlessness	If opioid naïve & eGFR>30: Morphine sulphate injection 2.5mg-5mg SC PRN  Give 2.5mg SC. If no effect after 15 minutes, please give 5mg SC. If no effect after 15 minutes, then phone palliative care team.  If opioid naïve & eGFR<30: Oxycodone injection 1.25mg-2.5mg SC PRN  Give 1.25mg SC. If no effect after 15 minutes, give 2.5mg SC. If no effect after 15 minutes, then phone palliative care team.  <b>If on regular opiates, please contact palliative care team for advice on dosing</b>
<b>Respiratory secretions</b>	Glycopyrronium 200mcg SC PRN, max 1.2mg /24hours.
<b>Agitation</b>	Midazolam 2.5mg-5mg SC PRN  Give midazolam 2.5mg SC. If no effect after 15 minutes, give 5mg SC. If no effect after 15 minutes then phone palliative care team.
<b>Nausea/vomiting</b>	Anti-emetic first Line Haloperidol 0.5mg S/C PRN max 5mg/24 hours.  Consider Cyclizine 50mg S/C PRN max TDS if haloperidol contraindicated.

### **Syringe driver for patients presenting with respiratory distress or needing > 2 PRN doses of above medication**

For opioid naïve patients with symptoms, start a syringe driver:

Morphine 10mg and Midazolam 10mg **OR** if eGFR<30 use Oxycodone 5mg and Midazolam 10mg

**For acutely distressed patients e.g RR >30, agitation start with morphine 20mg and midazolam 20mg OR EGFR<30 use Oxycodone 10mg and midazolam 20mg.**

- In dying patients please complete the Recognition of Dying and Medical Daily Review of the Dying Proformas
- Remember the five priorities of care at the end of life