

M: Administering medication from a remote prescription/direction to administer.

- M.1 Standard 11 of the 2008 Nursing and Midwifery Council document “Standards for Medicines Management” indicates that nurses must not accept verbal orders from doctors for:
- (i) the addition of new drugs to a patient’s drug chart, or
 - (ii) amendments to the existing drug instructions on a patient’s drug chart.
- M.2 However, in both these instances in the context of palliative care, if the doctor cannot immediately come in to directly assess the patient and hand-write the relevant instructions on the patient’s drug chart, then the use of Information Technology may be used to provide the inpatient nursing staff with a printed instruction that must be stapled to the patient’s drug chart until such time as the doctor can come in and hand-write the instructions onto the drug chart.
- M.3 The doctor has a maximum of 24 hours (72 hours at weekends and Bank Holidays) to come in and replace these printed instructions with hand-written instructions on the drug chart.
- M.4 The NMC considers the inpatient nurse accountable for ensuring that all relevant information is communicated to the doctor whenever remote prescribing of this nature is undertaken, and the nurse may refuse to accept a remote prescription if it compromises patient care. In this instance, the nurse should document accurately the communication that has taken place.
- M.5 Any instructions received using Information Technology must be received in a secure place and the printout must include the complete text message, telephone number or email address it was sent from and the time it was sent. It must be dated and signed by the receiving nurse and a second signatory upon receipt.
- M.6 The transmitted instructions themselves must be regarded as a patient contact and should be handled in keeping with the NMC Guidelines on Record Keeping.
- M.7 In order to maintain high standards of confidentiality, the incoming message must be deleted from the machine that received it once it has been printed off.
- M.8 If the doctor is sending the message from their own home, then they can use a Personal Computer to email the required information to ward@khh.org.uk.
- M.9 If the doctor has no immediate access to a computer with email facilities but they do have a mobile telephone with text facilities, then they can send a text-to-email message via the number 07766-404142. The first word in the text message must be ward@khh.org.uk , followed by a space and then the message.
- M.10 Whether an email or text-to-email is sent, the recommended and simplest layout of the message is:
- “From (Name of Doctor), regarding Hospice Number (XXXX). Please start: Drug name, drug dose, dosage frequency, route of administration”.
- Any message lacking any of these details will not be acceptable.*

- M.11 Particular care must be taken with the text message if it contains instructions for starting, changing or stopping more than one drug, and in such instances the sending of more than one message may be preferable. As this is a legal document, clear English must be used and no texting abbreviations or “smileys” must be used. The basic template for this text can be programmed into a mobile phone, and the text-to-email telephone number can be added to its telephone directory. There is a charge for each text-to-email message but, as this service is for the convenience of the on-call doctor rather than the patient or the hospice, it is expected that the on-call doctor will bear the cost of this.