

Completion of Highland Hospice Medicine Discharge Chart

- Prescribed medicines are recorded horizontally across the chart.
- The details for each medicine should be contained within the one line.
- If details exceed one line, the unused spaces on the chart relating to that medicine should be short ruled.
- The details should be printed clearly and legibly in block capitals.
- Start filling in the chart with medicines taken in the morning only, then go on to twice a day, three times a day etc onto those taken at night. That way the chart appears logical.
- Use the chart to help you work through the medicines with the patient. At the end ask the patient to use the chart to show you how they will take their medicines.

1. Medicine name, form and strength

Medicines which are taken on a regular basis. The generic name for the medicine should be used where possible. Combination preparations and modified release preparations may be described by brand names where this is approved practice, identified within the BNF.

The form of the medicine is specified e.g. tablets, capsules, solution, patch etc.

The strength of the preparation is that of the dose unit in which the medicine is manufactured e.g. 5mg tablets, 20mg capsules, 10mg/5ml etc.

2. Special Instructions

Some medicines require to be taken in a specific way to ensure that they work properly, for example swallowed whole or taken before or with food. This additional information should be written in this space. Some special instructions can be found in appendix 9 of the BNF.

3. When to take it and how much - Breakfast, Lunch, Tea, Bedtime

This is the dose ie number of tablets, capsules, volume etc the patient has to take and when it has to be taken e.g. prescribed dose is dexamethasone 8mg daily then the column under the administration time would be completed with '4 tabs' where the medicine name, form and strength are completed as Dexamethasone Tablets 2mg. For liquids the quantity to be taken may be expressed as 10ml. It is vital to include the units to avoid confusion.

4. Other

If a medicine is required to be taken at any time other than those specified, the time should be written in the 'Other' column. Use the 24 hour clock.

5. Purpose

The indication for the medicine should be written in this column in language the patient will understand. Refer to list provided in unit with patient friendly descriptions.

6. Syringe driver medicine name and dose

The names and doses of medicines contained within a syringe driver should be stated clearly, listed one under the other with doses lines up appropriately and bracketed together. Information on diluent is added along with minimum volume stated and directions to administer by continuous subcutaneous infusion over 24 hours. Where more than one syringe driver is in use, this should be clearly identified e.g. driver 1, driver 2 etc. and the contents of each

7. If additional medicine is required

This section is to record additional medicines, which the patient may require to take on an occasional basis. The medicine name, strength and form are stated along with the dose to be taken. The maximum frequency and/or maximum dose must be stated along with the indication and other special instructions.

8. Identify which type of dressings have been supplied including details of size, with or without border etc. If any of these dressings or appliances are not available on prescription, ensure advice is included as to how these will be supplied and who to contact for replacements.

9. The nurse (pharmacist) completing the chart should sign and date it as indicated. The chart should then be checked by a doctor and signed and dated before being given to the patient along with an explanation of what it means. Check the patient's understanding and ability to use the chart correctly before discharge.
10. As medicines are supplied to the patient, tick the check box to the left hand side of the drug name to indicate that these have been supplied.
11. Ask the patient or carer receiving the medicines to sign the copy of the chart which is to be retained in the notes accepting the supplies of medicines as indicated.
12. Copies of the chart are given to the patient, district nurse and community pharmacist. GPs are notified by doctor's discharge letter.