www.palliativedrugs.com survey

Which syringe driver do you use?

January - February 2014

Number of responses = 115 (UK =77)

1) Which syringe driver do you mainly use for CSCI in your palliative care practice? (one_of)

answer	UK votes	% of UK vote	Total votes	% of total vote
Alaris AD	1	1%	1	1%
CADD fixed rate pump	0	0%	2	2%
Graseby MS16	0	0%	3	3%
Graseby MS26A	2	3%	5	4%
CME T34 (McKinley T34)	73	95%	97	84%
Micrel MP mL/h	1	1%	2	2%
Micrel MP daily	0	0%	1	1%
Other	0	0%	4	3%

2) Has your service considered swapping to an alternative device?

(one_of)

answer	UK	% of UK	Total	% of total
	votes	vote	votes	vote
Yes, already swapped	62	81%	75	65%
Yes, currently in progress	2	3%	3	3%
Yes, but decided not to for cost reasons	0	0%	2	2%
Yes, but decided not to for other practical reasons	0	0%	2	2%
No	11	14%	32	28%

The 32 responses of No were associated with the following syringe drivers stated in question1:

21, CME T34 (McKinley T34)

1, CADD fixed rate pump

6, Other 2, Graseby MS26A 1, Micrel MP mL/h 1, Micrel MP daily

3) If you have swapped to an alternative device, have you come across any unanticipated issues or disadvantages with the new syringe driver?

(freetext)

The following issues identified were all for the CME T34 (McKinley T34/Niki T34):

Very short battery life of approximately 3-5 days (mentioned in 40% of responses)

Bulky and heavy; a burden to ambulatory patients (mentioned in 15% of responses)

Cost of dedicated giving sets is very high

Education of other users, e.g. nursing home staff

Very rarely, errors occur when the pump has not been fully reset after taking out syringe. New syringe then uses previous syringes administration program

Issues around lines used and pressure settings needed

Cost of the lockboxes which break relatively easily

Initial procedural problems with where the key is stored and who keeps them

Tight fit in lock box when using 30m L syringes

It took some time to be comfortable with the new syringe driver. We had to have the software changed to accommodate the way they are used

Doesn't recognise all syringe types

Found it tricky to get the machines clean because of all the small moving parts on the back

Frequently require servicing

4) If you have swapped to an alternative device, do you have associated procedures/training procedures/servicing procedures/prescribing documentation/ discharge information that you would be willing to share?

answer	Total votes	% of total vote
Yes	30	26%
No	46	40%

5) Which syringe driver do you mainly use for spinal infusions in palliative care?

(one_of)

(yes_no)

answer	UK votes	% of UK vote	Total votes	% of total vote
Alaris AD	1	1%	1	1%
CADD fixed rate pump	9	12%	21	18%
Graseby MS16	0	0%	0	0%
Graseby MS26A	0	0%	1	1%
CME T34 (McKinley T34)	5	6%	6	5%
Micrel MP mL/h	0	0%	1	1%
Micrel MP daily	0	0%	0	0%
Other	2	3%	4	3%
Do not use spinal infusions	57	74%	78	67%

6) Where do you usually obtain compatibility information when mixing drugs for CSCI?

(many_of)

answer	Total votes	% of total vote
Local compatibility charts / information	52	45
PCF compatibility charts	57	49
Palliativedrugs.comsyringe driver survey database (SDSD)	68	59
Other	41	35

7) Have you ever submitted information on compatibility of mixing drugs for CSCI to the palliativedrugs.com SDSD?

(yes_no)

answer	Total votes	% of total vote
Yes	18	16%
No	93	80%

8) If you have not submitted information on compatibility of mixing drugs for CSCI to the SDSD, which of the following applies?

(many_of)

answer	Total votes	% of total vote
Did not know I could submit information	44	38
Time constraints	18	16
Not at a computer when I have the information	14	12
Submission process not user-friendly	0	0
Don't use the database for checking combinations	13	11
Other	15	13

Editor's note: we encourage all health professionals to enter any unique drug combinations that you have used for which you have had little or no physical laboratory or chemical compatibility data, especially if you have experienced incompatibility.