

This Patient Group Direction (PGD) must only be used by registered health professionals who have been named and authorised by their organisation to practice under it. The most recent and in date final signed version of the PGD should be used.

Patient Group Direction

For the administration of Lidocaine injection BP with PRESERVATIVE 1% by Registered Nurse-named PICC/Midline Placers for Insertion of Peripherally Inserted Central Catheters and Midlines or Securacath removal in University Hospitals Sussex NHS Foundation Trust (East)

Version number: 3

Change history

Version number	Change details	Date
2	Placed on to the new NICE PGD template	27/07/2020
3	Addition of securacath removal	27/07/2020
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PGD development

Name	Job title and organisation	Signature	Date
Lead author	Geraldine O'Sullivan – Lead Nurse IV Therapy & OPAT Team	Via email	June 2021
Lead Doctor	Dr. Owen Boyd – ITU Consultant	Via email	June 2021
Lead pharmacist	David Annandale	Via email	June 2021
Lead Clinician for area	Geraldine O'Sullivan – Lead Nurse IV Therapy & OPAT Team	Via email	June 2021

Organisational authorisations

University HospitalsSussex NHS Foundation Trust authorises this PGD for use by the services or providers listed below:
UHSFT (East) IV Therapy and OPAT Team
Limitations to authorisation
Only for use by registered nurses with a current and valid UHSFT competency for placement of PICC/Midlines
THE INDIVIDUAL PRACTITIONER MUST BE AUTHORISED BY NAME, UNDER THE CURRENT VERSION OF THIS PGD BEFORE WORKING ACCORDING TO IT

Name	Signature & Name	Date
Chair of PGD Group	Joanne Pendlebury	July 2021
Chief Pharmacist	Michael Cross	Oct 2021
Medicines Governance Group chair	Dr Michael Okorie	Oct 2021

Local enquiries regarding the use of this PGD may be directed to uhs.pgdgroup@nhs.net or PGD group chair.

Appendix 1 provides a practitioner authorisation sheet. Individual practitioners must be authorised by name to work to this PGD.

Training and competency of registered health professionals

	Requirements of registered health professionals working under the PGD
Qualifications and professional registration	<ul style="list-style-type: none"> Registered General Nurse Level 1. 5 years post registration experience in an Acute Area Evidence of competency on PICC/Midline Insertion Evidence of competency on IV Therapy Administration,
Additional requirements	<p>THE INDIVIDUAL PRACTITIONER MUST BE AUTHORISED BY NAME, UNDER THE CURRENT VERSION OF THIS PGD BEFORE WORKING ACCORDING TO IT.</p> <p>The individual practitioner is required to have a working knowledge of adverse reactions to the medication used with the PGD and how to identify drug interactions.</p>
Initial training	<ul style="list-style-type: none"> Competency on PICC/Midline Insertion Competency on IV Therapy Administration and Insertion of Peripheral Cannula with relevant updates as required by UHSFT Has undertaken training appropriate to recognise and manage allergic/anaphylactic reactions. Has undertaken Trust approved resuscitation training. Has read BNF section on Lidocaine 1% w/v Injection and the SPC available at www.medicines.org.uk. <p>Authors need to</p> <ul style="list-style-type: none"> Register and complete PGD training module (certificate can be printed out as evidence) https://portal.e-lfh.org.uk/ (3 yearly)
Competency assessment	Assessment for use of this PGD is carried out as part of PICC/Midline insertion by staff who themselves are competent and have a teaching & assessing qualification
Continued training requirements	<p>Complete NICE Competency PGD Framework PGD e-learning 3 yearly Up to date with mandatory training Maintain knowledge and skills within specialist area</p> <p>Competency on PICC/Midline Insertion along with Competency on IV Therapy Administration and Insertion of Peripheral Cannula with relevant updates as required by UHSFT</p>

Clinical condition

Clinical condition or situation to which this PGD applies	Local anesthesia for subcutaneous injection required for insertion of PICC and/or Midline or for securacath removal when standard removal procedure has been unsuccessful
Inclusion criteria	<ul style="list-style-type: none"> • Patients 8 years and older • Patients who are having PICC or Midline insertion • Securacath removal if standard removal practice has been unsuccessful •
Exclusion criteria	<ul style="list-style-type: none"> • Consent not given • Individual who has received a previous maximum infiltration of local anaesthetic within the last 4 hours • Patients under 8 years • Cardiovascular Disease <ul style="list-style-type: none"> ○ Complete heart block ○ Hypovolaemia • Other conditions <ul style="list-style-type: none"> ○ Porphyria ○ Pregnant women and nursing mothers ○ Patients with Inflamed or infected skin. • Interacting medicines – see current British National Formulary (BNF) www.bnf.org or individual product SPC http://www.medicines.org.uk
Cautions (including any relevant action to be taken)	<p>Inadvertent IV administration can cause systemic effects. Be aware of patients with Bradycardia with Heart rate less than 50 bpm, Myasthenia Gravis, Congestive heart failure, Impaired cardiovascular function and Respiratory depression</p> <ul style="list-style-type: none"> • Epilepsy • Elderly and debilitated patients
Arrangements for referral for medical advice	<p>Refer to Doctor if:</p> <ul style="list-style-type: none"> • The patient is experiencing adverse reactions to the drug • In the event of an adverse reaction, the named PICC/Midline placer must make an emergency referral to the Medical Emergency Team (via Switchboard 2222) if the patient is clinically unstable. In all other circumstances where patient is clinically stable the team doctor or the doctor on call should be contacted via bleep • The maximum dose has been reached

Action to be taken if patient excluded	Document reason for exclusion, discussion with referring medical staff :
Action to be taken if patient declines treatment	Document action taken in medical notes and refer patient back to referring team.

Details of the medicine

Name, form and strength of medicine <i>Include ▼ for black triangle medicines</i>	Lidocaine Injection BP with Preservative 1% w/v (10mg/ml)
Legal category	Prescription Only Medicine
Indicate any off-label use (if relevant)	None
Route/method of administration	Subcutaneous injection
Dose and frequency	Adults and children over 8 years old 1mg to 10mg (0.1mL to 1mL) according to patient's weight and nature of procedure MAX dose 10mg per procedure
Maximum or minimum treatment period	One episode of treatment
Adverse effects	<p>A single use of Lidocaine does not generally cause systemic side effects.</p> <p>Although rare, signs of local anaesthetic toxicity to be aware of are:</p> <ul style="list-style-type: none"> • Sudden alteration in mental status • Severe agitation or loss of consciousness • Cardiovascular collapse <p>Cardio-pulmonary resuscitation equipment MUST be available when administering should allergic or anaphylactic reactions occur</p> <ul style="list-style-type: none"> • If toxicity side effects are severe, intralipids may be required. Intralipids are located in the A&E department. • Medical personnel must be called. • Intralipids to be administered by medical personnel. <p>A detailed list of adverse reactions is available in the SPC, which are available from the electronic Medicines Compendium website: www.medicines.org.uk.</p> <p>BNF/C also has information on adverse effects.</p> <ul style="list-style-type: none"> • Suspected adverse reactions to be reported via the Yellow card Scheme at www.mhra.gov.uk/yellowcard

Drug interactions	<p>A detailed list of drug interactions is available in the SPC (summary of product which are available from the electronic Medicines Compendium website: www.medicines.org.uk)</p> <p>BNF/C also has drug interaction information</p>
Supplies	<p>Obtained from stock in clinical area or from stock kept locally by IV Therapy & OPAT Team</p>
Storage	<p>To be kept in accordance with local policy</p>
Reporting procedure of adverse reactions	<p>Healthcare professionals and individuals/parents/carers are encouraged to report suspected adverse reactions to the Medicines and Healthcare products Regulatory Agency (MHRA) using the Yellow Card reporting scheme on: http://yellowcard.mhra.gov.uk</p> <p>For Black triangle any suspected adverse reactions should be reported via the Yellow Card Scheme.</p>
Special considerations / additional information	<p>N/A</p>
Records to be kept	<p>Record:</p> <p>that valid informed consent was given; name of individual, address, date of birth and GP with whom the individual is registered Drug history for patient including medical history name of HCP name of medication date of administration dose, form and route of administration quantity administered batch number and expiry date advice given details of any adverse drug reactions and actions taken supplied via PGD</p> <p>A record of all individuals receiving treatment under this PGD should also be kept for audit purposes in accordance with local policy. OR the patients should be identifiable in a timely manner for audit purposes.</p>
Written information to be given to patient or carer	<p>Verbal advice given to patient on the following:</p> <ul style="list-style-type: none"> • Discuss procedure with patient prior to insertion • Infiltration may be uncomfortable • Full sensation should return within 2 hours • Consider oral analgesia as required following line insertion <p>Patient information leaflet (PIL) available: https://www.nhs.uk/medicines/</p>

Follow-up advice to be given to patient or carer	Patients seen on an outpatient basis must not drive or operate heavy machinery for 24 hours post procedure. Advice given to carer and to the accepting community team on recognising side-effects, local reactions and other adverse effects and what to do, for example seek emergency help by dialling 999.
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Audit

Plan for audit , It is essential for PGD renewal that audits have occurred.	Retrospective audit of compliance with PGD to be completed using the Trust PGD audit tool
Frequency	One year prior to expiry date of PGD
Nominated lead to manage audit	Geraldine O'Sullivan – Lead Nurse IV Therapy & OPAT Team

Key references

Key references	<ol style="list-style-type: none"> 1. BSUHT IV Team. Competency Assessment for Placement of a Peripherally Inserted Central Catheter v2 May 2019 2. Lidocaine 1% w/v solution for injection, Summary of Product Characteristics Lidocaine Hydrochloride Injection BP 1% w/v - Summary of Product Characteristics (SmPC) - (emc) (medicines.org.uk) Accessed on 25/06/21 3. Management of severe local anaesthetic toxicity, AAGBI Safety guideline, 2010
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Appendix 1 Health professionals' agreement to practise

PGD Title **Administration of Lidocaine injection BP with PRESERVATIVE 1% by Registered Nurse-named PICC/Midline Placers**

Practitioner, by signing this patient group direction you are indicating that you agree to its contents and that you will work within it.

Patient group directions 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 professional code of conduct.

I confirm that I have read and understood the content of this Patient Group Direction and that I am willing and competent to work to it within my professional code of conduct

Name of health professional	Role	Signature	Date

Authorising manager

I confirm that the practitioners named above have declared themselves suitably trained and competent to work under this PGD. I give authorisation on behalf University Hospitals Sussex Foundation Trust for the above named health care professionals who have signed the PGD to work under it.

Name	Role	Signature	Date