

Prescription proforma for Acetylcysteine for the management of oral paracetamol overdose in adults

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Introduction

Paracetamol is the most common drug taken in overdose in the UK, and guidelines recommend Acetylcysteine for certain patients. Acetylcysteine prescribing is complex to complete leading to a potential for prescription errors. In addition, completing the prescription is a time-consuming process which can delay initiation of treatment.

Methods

Patient notes of a sample of patients who received Acetylcysteine for management of Paracetamol overdose were reviewed. Additionally, a qualitative questionnaire was conducted assessing time taken to prescribe Acetylcysteine and confidence levels amongst prescribers.

Results

Analysis of Acetylcysteine prescriptions showed a high error rate with 70% (n=10) of prescriptions containing a prescribing error of any kind. Errors included incorrect infusion volumes and drug concentrations, with 30% of prescriptions either altered or rewritten entirely.

Questionnaire responses showed prescribers lack confidence in Acetylcysteine prescription and find this task time-consuming; 80% (n=34) felt this took longer/much longer than other drugs they regularly prescribe and 65% felt less confident/much less confident in this prescription compared to other prescriptions they regularly complete. Overall, those who completed the questionnaire showed considerable support towards the idea of a prescription proforma for Acetylcysteine for management of paracetamol overdose.

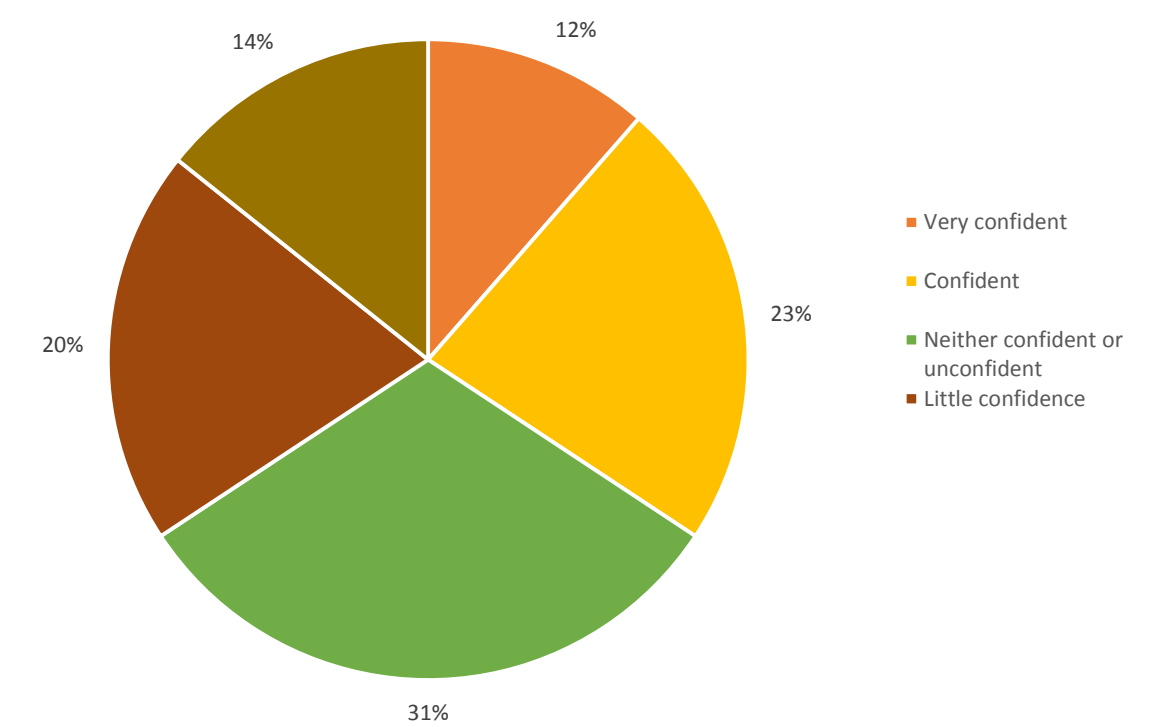
Discussion

Acetylcysteine is a complex prescription which prescribers in our trust currently lack confidence in prescribing.

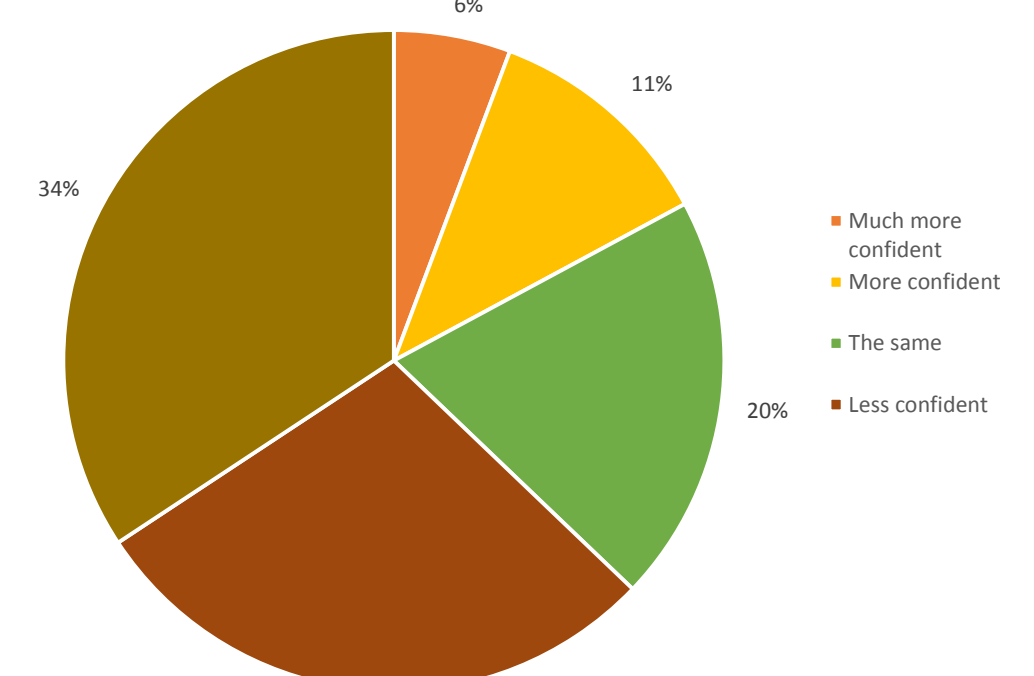
We have developed a proforma based on guidelines from the BNF¹, Toxbase², the Royal College of Emergency Medicine³ and the Hull University Teaching Hospitals Trust guidelines⁴ and propose launching this for use within the trust.

Through this we aim to improve patient safety through preventing drug prescription errors. We also predict this will decrease the time taken for the prescription to be completed, allowing prompt initiation of acute treatment, thus improving patient care. This may also facilitate timely movement of patients through the acute care settings, to help meet national targets.

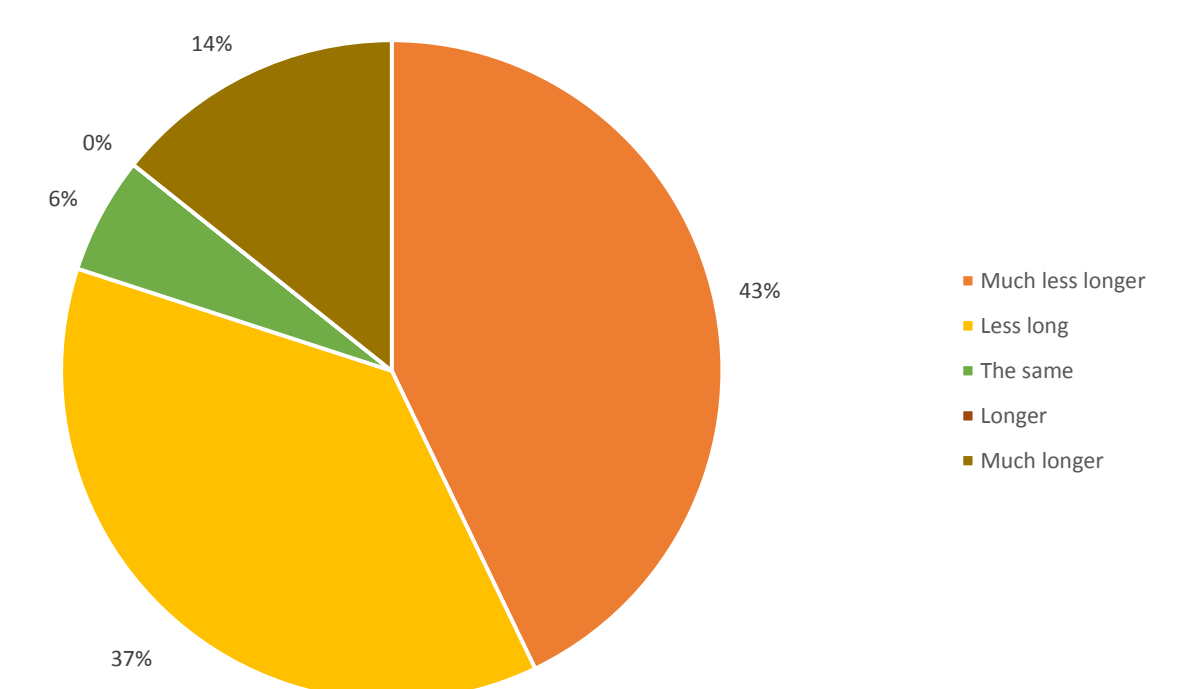
How confident do you feel in prescribing acetylcysteine as part of the management of paracetamol overdose?



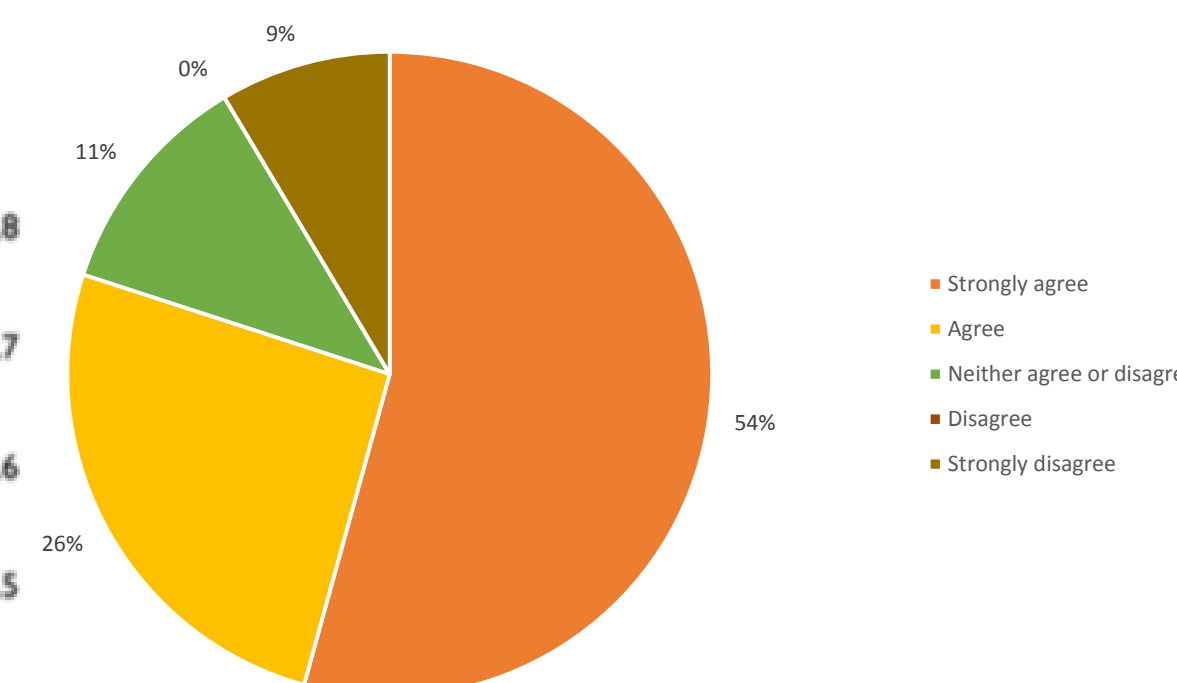
How does this compare to other drugs you regularly prescribe?



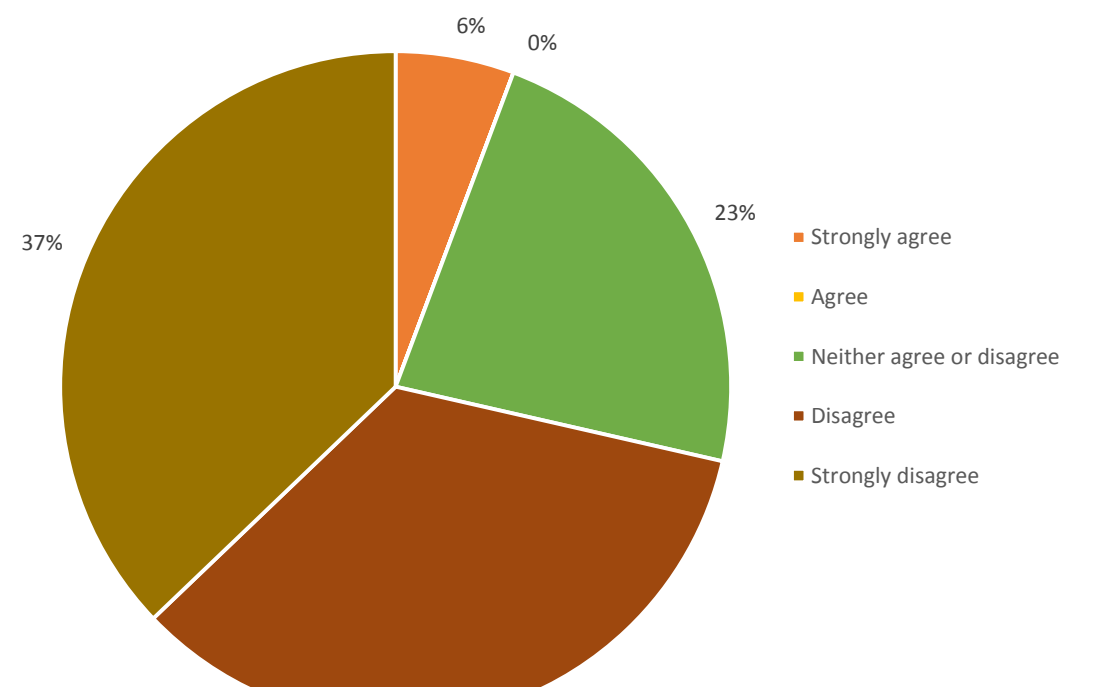
How long does it take you to prescribe Acetylcysteine compared to most other drugs you regularly prescribe?



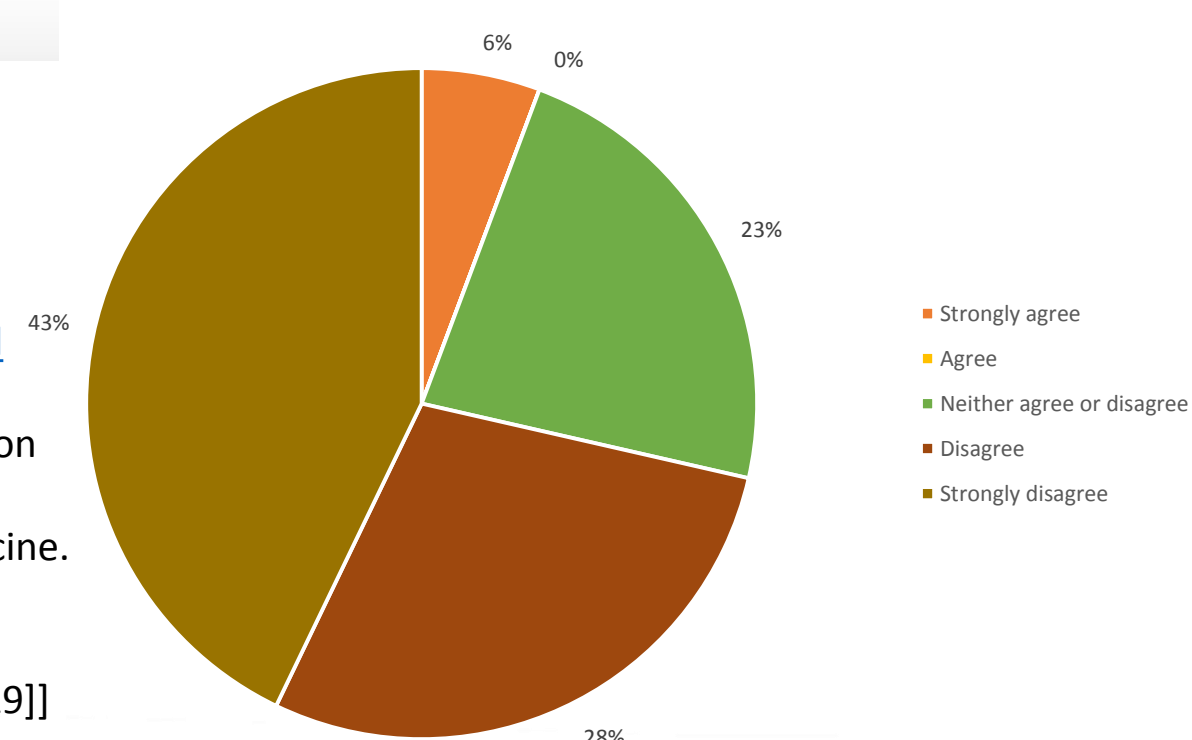
A proforma for prescribing acetylcysteine prescription for paracetamol overdose would be save me time



A proforma for prescribing acetylcysteine prescription for paracetamol overdose would be prevent prescribing errors



A proforma for prescribing acetylcysteine prescription for paracetamol overdose would improve patient safety



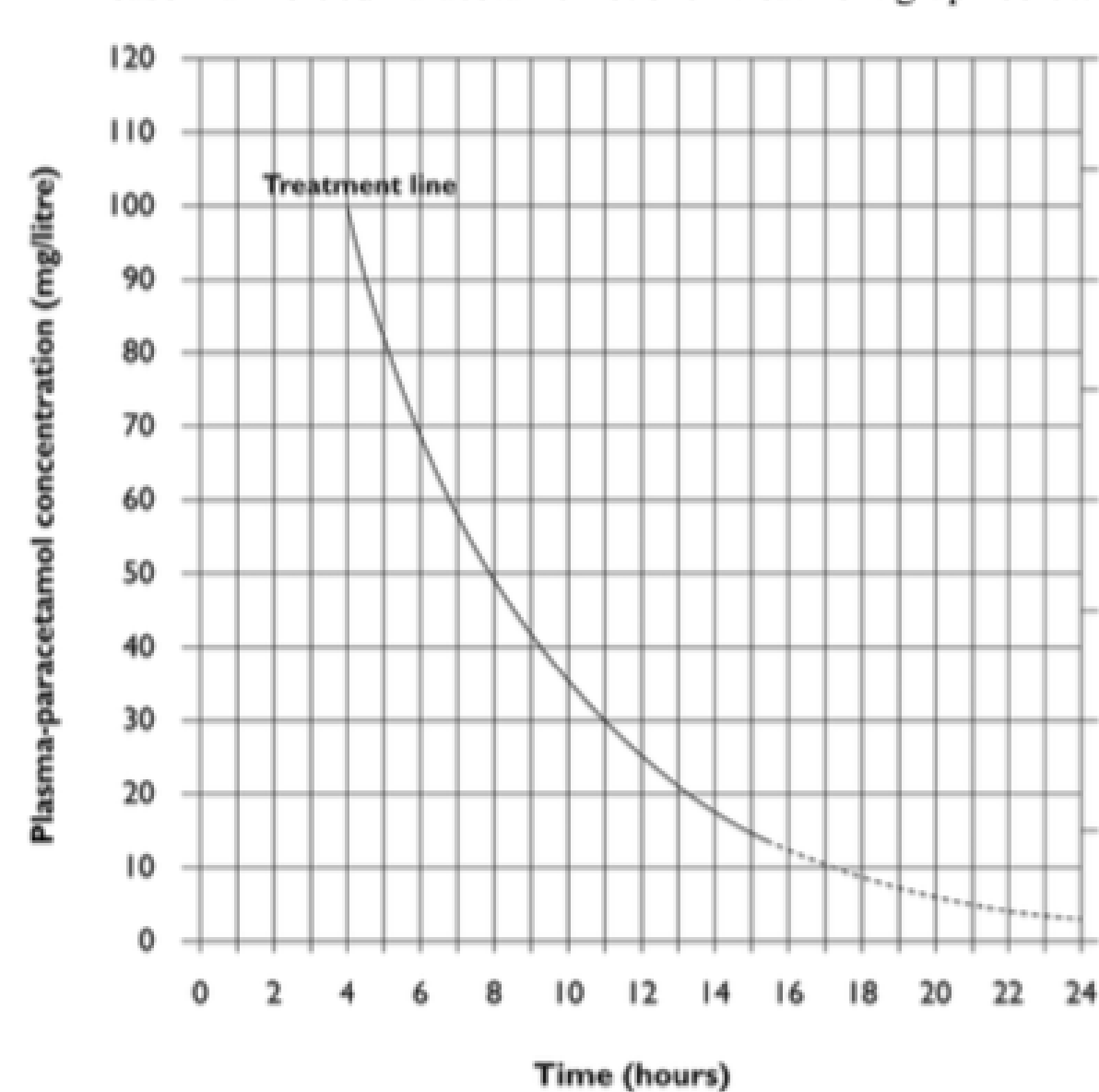
Acetylcysteine Infusion for the Management of Oral Paracetamol Overdose in Adults

Patient Name	
HEY number/NHS number	
Date of Birth	

Allergies	
Reaction	
Name	GMC Date
Patient's weight	kg Date recorded

	Infusion 1	Infusion 2	Infusion 3			
Drug Name	Acetylcysteine	Acetylcysteine	Acetylcysteine			
Doseml of 200mg/mlml of 200mg/ml ml of 200mg/ml			
Infusion fluid* (Please tick)	<input type="checkbox"/> 200ml 5% dextrose <input type="checkbox"/> 200ml 0.9% sodium chloride	<input type="checkbox"/> 500ml 5% dextrose <input type="checkbox"/> 500ml 0.9% sodium chloride	<input type="checkbox"/> 1000ml 5% dextrose <input type="checkbox"/> 1000ml 0.9% sodium chloride			
Infusion rateml/hourml/hourml/hour			
Infusion duration	1 hour	4 hours	16 hours			
Prescriber's Name						
Prescriber's signature						
Date						
Administrator signature						
Second administrator						
Date and time						
Weight (kg)	Volume (ml)	Infusion rate (ml/hr)	Volume (ml)	Infusion rate (ml/hr)	Volume (ml)	Infusion rate (ml/hr)
<input type="checkbox"/> 40-49kg	34	234	12	128	23	64
<input type="checkbox"/> 50-59kg	42	242	14	129	28	64
<input type="checkbox"/> 60-69kg	49	249	17	129	33	65
<input type="checkbox"/> 70-79kg	57	257	19	130	38	65
<input type="checkbox"/> 80-89kg	64	264	22	131	43	65
<input type="checkbox"/> 90-99kg	72	272	24	131	48	66
<input type="checkbox"/> 100-109kg	79	279	27	132	53	66
<input type="checkbox"/> ≥110kg	83	283	28	132	55	66

Please mark blood Paracetamol level on treatment graph below



Indication for treatment (please tick)

- Paracetamol level above treatment line
- Staggered overdose
- Timing uncertain
- Other (please specify).....

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References:

1. Joint Formulary Committee. British National Formulary. [Online]. London: BMJ Group and Pharmaceutical Press. Available from: <https://bnf.nice.org.uk/drug/acetylcysteine.html> [Accessed on [3/2/2019]]
2. Toxbase. Paracetamol. [Online]. Available from: <https://www.toxbase.org/poisons-index-a-z/p-products/paracetamol/> National Poisons Information Service. [Accessed on [3/2/2019]]
3. Royal College of Emergency Medicine. 2012. Paracetamol overdose: new guidance on the use of intravenous acetylcysteine. [Online]. London: Royal College of Emergency Medicine. Available from: https://www.rcem.ac.uk/RCEM/Quality-Policy/Clinical_Standards_Guidance/RCEM_Guidance.aspx?WebsiteKey=b3d6bb2a-abba-44ed-b758-467776a958cd&hkey=862bd964-0363-4f7f-bdab-89e4a68c9de4&RCEM_Guidance=6 [Accessed on [3/2/2019]]
4. Hull University Teaching Hospitals trust guidelines available from: <https://pattie.info/Interact/Pages/Content/Document.aspx?id=7117&SearchId=528561> [Accessed on [3/2/2019]]