Palliative Care Services
PO Box 21
WARRAWONG NSW 2502
Telephone: 4223 8380
Facsimile: 4223 8388



18 April, 2016

Dear Dr ,

Re: Palliative Care project 'Driven to Change: Making medications work'.

This project has been operating in the Illawarra for nearly 2 years, with the much appreciated co-operation of a large proportion of GPs. We are now in a position to extend this to the Shoalhaven region, and this letter is intended to provide you with initial information. GPs are the care managers of community patients and this project aims to provide support for your primary care of patients who are linked with the palliative care service and are approaching the end stage of their disease.

When a patient is linked with the Shoalhaven palliative care service, a link is also made to the Primary Health Nurses (PHNs) (aka Community Nurses). The protocol for this project is that after the initial visit, the PHN will fax information to the patient's GP and kindly request the completion, by signature, of a standard crisis medication chart and scripts for the 4 parenteral medications on the chart. These orders are kept in the patient's home and the scripts are held at the patient's pharmacy. Medications are dispensed when required and kept in the patient's home for administration by a PHN for timely symptom management. If medications are not required in the home at the time of referral, the PHNs have a strict protocol to trigger the appropriate scripts to be filled. The availability of crisis orders and scripts is essential for patients on a PEACH package for end-of-life care at home. The project has been approved by the ISLHD Drugs and Therapeutics Committee.

We have kept to a small number of medications and kept them consistent with those listed on the ISLHD End of Life plan. For analgesia, we chose Hydromorphone to avoid the GIT side effects of Morphine and to avoid toxicity in patients with renal failure. Midazolam is used to manage anxiety and agitation. We chose Haloperidol as an anti-emetic in view of the small volume required for injection and its broad efficacy. We are happy to discuss an alternative medication for patients with Parkinson's Disease. We have recently changed the anti-cholinergic drug from Glycopyrrolate to Buscopan, as GPs are more familiar with Buscopan. We have avoided Hyoscine Hydrobromide to prevent potential problems with delirium.

I would be very grateful for your support with this project. Please contact me if you have any questions or if there are any issues you would like clarified. I can be contacted on 0411 256851 (or contact Dr Laura Pearce in Shoalhaven on 0488 083000).

Yours sincerely

Greg Barclay FRACGP FAChPM

Director Palliative Care Services ISLHD