

Drugs Overview [883–893]

1. Introduction

- The guidelines contained in this section are the current medicines that can be administered by registered paramedics^a.
- The Medicines Act 1968 governs what paramedics can administer and this is regulated by The Medicines and Healthcare products Regulatory Agency (MHRA).
- Where a Prescription-Only Medicines (POMs) exemption exists the MHRA has agreed a Patient Group Direction (PGD) is no longer required for paramedics to administer drugs where a JRCA drug protocol is issued. Currently POMs exemptions have not been issued for tranexamic acid, therefore a PGD is required. A POMs exemption is not required for dexamethasone as the intravenous preparation is administered orally.
- The drugs administered by ambulance clinicians fall into two categories:
 - Non-prescription drugs** e.g. aspirin
 - Prescription-only medicines (POMs)** e.g. morphine. POMs can only be prescribed by a qualified doctor (or dentist) and non-medical prescribers but exemptions exist under Part III of Schedule 5 to the Prescription Only Medicines (Human Use) Order 1997 allows suitably trained paramedics to administer these drugs in specified circumstances.

1.1 Safety aspects

- Always check the following:
 - the drug type
 - the drug strength
 - whether the packaging is intact
 - the clarity of fluid
 - the expiry date.

1.2 Prescribing terms

In the case of prescription medicines, a variety of abbreviations are used, some of which are described – refer to Table 6.2.

NB Internationally recognised units and symbols should be used where possible.

Table 6.2 – COMMON ABBREVIATIONS

Abbreviation	Translation
ac	ante cibum (before food)
approx	approximately
bd	twice daily
CD	preparation subject to prescription requirements control – The Misuse of Drugs Act
ec	enteric-coated (termed gastro-resistant in British Pharmacopoeia)
f/c	film-coated
IM	intramuscular
IV	intravenous
m/r	modified-release
MAOI	monoamine-oxidase inhibitors
max	maximum
NSAID	non-steroidal anti-inflammatory drug
o. d	omni die (every day)
o. m	omni mane (every morning)
o. n	omni nocte (every night)
p. c	post cibum (after food)
PGD	patient group direction
POM	prescription only medicine
pr	per rectum (rectally)
prn	when required
q.d.s	quater die sumendus (to be taken four times daily)
q.q.h	quarta quaque hora (every four hours)
s/c	sugar-coated
SSRI	selective serotonin re-uptake inhibitor
SOS	when required
SR	slow release
stat	immediately
t.d.s	ter die sumendus (to be taken three times daily)
t.i.d	ter in die (three times daily)
top	topical

Table 6.1 – DOCUMENTATION

Note the following:	✓	✗
Avoid unnecessary use of decimal points	3 mg	3.0 mg
Quantities of 1 gram or more should be written as	1 g	–
Quantities less than 1 gram should be written in milligrams	500 mg	0.5 g
Quantities less than 1 mg should be written in micrograms	100 micrograms	0.1 mg
When decimals are unavoidable a zero should be written in front of the decimal point where there is no other figure	0.5 mL	not .5 mL
Use of the decimal point is acceptable to express a range	0.5 to 1 g	–
‘Micrograms’ and ‘nanograms’ should not be abbreviated nor should ‘units’	–	–
The term ‘millilitre’ is used	ml or mL	cubic centimetre, c.c., or cm ³

^aParamedic is defined as being on the register of paramedics maintained by the Health and Care Professions Council pursuant to paragraph 11 of Schedule 2 to the Health Professions Order 2001.