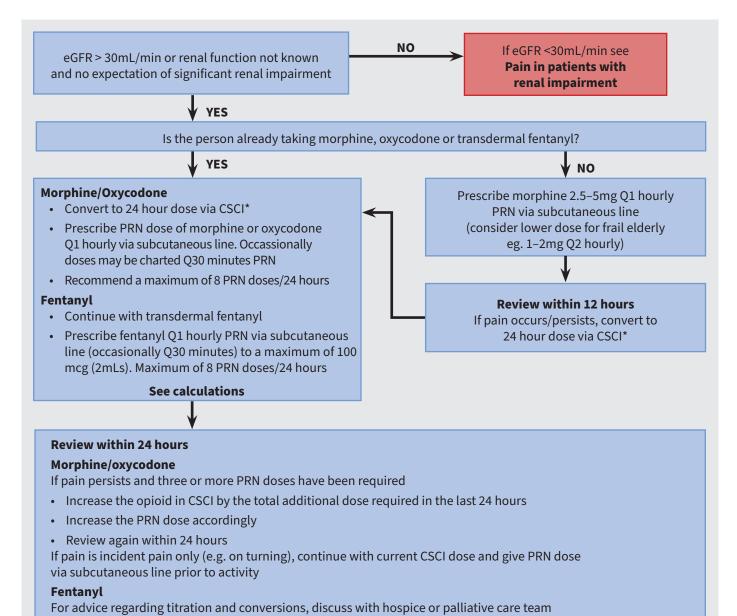
Pain in patients with no/limited prior pain







Calculations

Morphine/oxycodone

To CONVERT from oral morphine to subcutaneous morphine: subcutaneous dose = 1/2 oral dose

To CONVERT from oral oxycodone to subcutaneous oxycodone: subcutaneous dose = 2/3 oral dose

To CONVERT to 24 hour *continuous subcutaneous infusion (CSCI): total (regular + PRN) subcutaneous doses required in last 24 hours

To CALCULATE PRN subcutaneous doses (morphine or oxycodone): prn dose = 1/6 total 24 hour dose, Q1 hourly prn

Fentany

• For patients established on transdermal fentanyl the subcutaneous PRN dose is roughly equivalent to the **hourly** transdermal dose, to a maximum of 100 mcg (2mLs) e.g. 25 mcg/hr patch = 25 mcg subcutaneously PRN Q1 hourly

If symptoms persist or support required, contact your local hospice or palliative care team.

See Palliative Care Requests / Palliative Care Advice section on HealthPathways

Anticipatory prescribing ensures that in the last hours and days of life there is no delay responding to a symptom if it occurs.

Please refer to the Te Ara Whakapiri Holistic Considerations for further information.