University Hospitals of Derby and Burton NHS Foundation Trust

PATIENT GROUP DIRECTION (PGD)

Administration of Sodium Chloride 0.9% for suctioning of endotracheal tubes
By Registered Nurses and Midwives on the Neonatal Units at UHDB

Documentation details

Reference no:	UHDB101
Version no:	V2.0
Valid from:	07/11/2024
Review date:	07/05/2027
Expiry date:	06/11/2027

Change history

Version number	Change details	Date
1	New individual template, Sodium Chloride added	March 2021
2	Dose changed	August 2024

Glossary

Abbreviation	Definition

1. PGD template development (PGD Working Group)

PGD Working Group Membership (minimum requirement of consultant, pharmacist and a registered professional who can work under a PGD (or manages the staff who do). If this is a review of existing PGD, replace previous names with the individuals involved for this version

Name	Designation
Dr Balasubramaniam	Consultant
Lisa Taylor	Advanced Pharmacist
Vicki Baldwin	Neonatal Matron
Sally Shipley	Clinical Nurse Educator

Where an antimicrobial is included, confirm the name, designation and date of the antimicrobial pharmacist who has reviewed this version

Name of antimicrobial pharmacist	Designation	Date Reviewed

2. Organisational authorisations

The PGD is not legally valid until it has had the relevant organisational authorisation.

University Hospitals of Derby & Burton NHS Foundation Trust authorises this PGD for use by the services or providers listed below:

Authorised for use by the following organisation and/or services
Royal Derby Hospital Neonatal Intensive Care Unit (NICU) Queens Hospital Burton Neonatal Unit (NNU)
Limitations to authorisation

Organisational Authorisation (legal requirement).			
Role	**Name**	**Sign**	**Date**
Medicines Safety Officer (Pharmacist) *Pharmacist: Medicines Safety Officer, Chief Pharmacist or assigned deputies)*	James Hooley	Signed copy held by Pharmacy	07/11/2024

Additional signatories (required as per legislation and locally agreed policy)			
Role	**Name**	**Sign**	**Date**
Advanced Pharmacist – W&C *Clinical Pharmacist from PGD working group*	Lisa Taylor	Signed copy held by Pharmacy	13/09/2024
Consultant Paediatrician /Neonatologist *Doctor*	Dr Balasubramaniam	Signed copy held by Pharmacy	05/11/2024
Matron, NICU *Registered Professional representing users of the PGD*	Vicki Baldwin	Signed copy held by Pharmacy	04/10/2024

Local enquiries regarding the use of this PGD may be directed to UHDB.PGDgovernance@nhs.net

Section 7 provides a registered health professional authorisation sheet. Individual professionals must be authorised by name to work to this PGD.

3. Characteristics of staff

Qualifications and professional registration	- NMC Registered Nurse - NMC Registered Midwife
Initial training	- Completion of all Essential-to-role training as outlined in the UHDB PGD policy. - Individual has read and understood full content of this PGD and signed authorisation (section 7) - Training which enables the practitioner to make a clinical assessment in order to establish the need and supply the medicine according to the PGD.
Competency assessment	Staff operating under this PGD are encouraged to review their competency using the NICE Competency Framework for health professionals using patient group directions Individuals operating under this PGD are personally responsible for ensuring they remain up to date with the use of all medicines included in the PGD - if any training needs are identified these should be discussed with the either authorising manager (section 7) or the manager within the PGD working group (section 1) so that further training can be provided as required.
Ongoing training and competency	Staff operating under the PGD must be compliant with medications management training for Paediatrics.
The decision to supply any medication rests with the individual registered health professional who must abide by the PGD and any associated organisation policies.	

4. Clinical condition or situation to which this PGD applies

Clinical condition or situation to which this PGD applies	In the event of thick tenacious secretions in babies who are intubated and ventilated.
Criteria for inclusion	Babies who are intubated and ventilated with thick secretions thought to be causing obstruction.
Criteria for exclusion	Previous sensitivity or intolerance to the drug or any ingredient Hypernatraemia – seek medical advice prior to administration
Cautions including any relevant action to be taken	Must reflect local and/or national clinical guidelines or policies where available. Sterile sodium chloride 0.9% should not be routinely instilled during endotracheal suctioning Suction should be avoided in the first 3-4 hours after intubation and if Curosurf (surfactant) has been administered within the last 12 hours.
Action to be taken if the patient is excluded	Record reasons for exclusion in patient notes Refer to medical staff
Action to be taken if the patient or carer declines treatment	Document advice given Refer to medical staff
Arrangements for referral for medical advice	Seek medical review using the bleep system if secretions are frequently causing an obstruction. Consult medical advice if an adverse event occurs.

5. Description of treatment

Name, strength & formulation of drug	Sodium Chloride 0.9% 10 ml ampoule for injection
Legal category	Prescription only medicine
Route / method of administration	Via endotracheal tube
Indicate any off-label use (if relevant)	

Dose and frequency of administration	0.25 - 0.5 ml Dose can be repeated once if needed.
Duration of treatment	Only when necessary
Quantity to be supplied (leave blank if PGD is administration ONLY)	
Storage	Stored at room temperature. New ampoule should be used for each episode of suction and any remaining solution discarded.
Drug interactions	No interactions reported
Identification & management of adverse reactions	May cause damage to airway mucosa, acts as a foreign body, does not lead to effective cough, may contribute to lower airway colonisation. Escalate to Tier 2 medic or above and nurse in charge if any adverse effects during suction.
Management of and reporting procedure for adverse reactions	• Healthcare professionals and patients/carers are encouraged to report suspected adverse reactions to the Medicines and Healthcare products Regulatory Agency (MHRA) using the Yellow Card reporting scheme on: https://yellowcard.mhra.gov.uk • Record all adverse drug reactions (ADRs) in the patient's medical record. • Serious adverse reactions (moderate harm or above as per NRLS definition) should be reported via trust incident management system (e.g. Datix) to ensure duty of candour and learning from harm during clinical use.
Written information to be given to patient or carer	Verbal advice on why suction has been done and subsequent management of the condition
Patient advice / follow up treatment	As arranged/required by physician.

Records	Administration of sodium chloride 0.9% via endotracheal tube should be documented in the 'Once only' section of the prescription drug chart (RDH) or in the nursing notes on Meditech (QHB). Either the system holding the record, or the healthcare practitioner working under the PGD, must capture/document all of the following: • name of individual, address, date of birth and GP with whom the individual is registered (if relevant) • name of registered health professional • name of medication supplied/administered • date of supply/administration • dose, form and route of supply/administration • quantity supplied/administered • batch number and expiry date (if applicable e.g. injections and implants) • advice given, including advice given if excluded or declines treatment • details of any adverse drug reactions and actions taken • Confirm whether supplied and/or administered via Patient Group Direction (PGD) Records should be signed and dated (or a password controlled e-records). All records should be clear, legible and contemporaneous.

6. Key references

Key references	*Endotracheal suctioning SOP - NICU* ***https://www.medicines.org.uk/emc/medicine/20890*** *Shorten, D., Byrne, P., Jones, R. (1991) Infant Responses to Saline Instillations and Endotracheal Suctioning. Journal of Obstetric, Gynecologic and Neonatal Nursing. 20(6) pp.464-469. Available at:* https://doi.org/10.1111/j.1552-6909.1991.tb01712.x

7. Registered health professional authorisation sheet

PGD Name [version]: Sodium Chloride by registered nurses and midwives [v2.0]
PGD ref: UHDB101
Valid from: 07/11/2024 Expiry date: 06/11/2027

Before signing check that the document you have read is published on Koha or is an in-date hard-copy with all necessary authorisations signed in section 2. The Name/Version/Ref of the document you have read MUST match this authorisation form.

Registered health professional

By signing this patient group direction you are indicating that

a) You agree to and understand all content and commit to only work within this framework.
b) You have completed any core PGD e-Learning or training records on My Learning Passport or within your department.
c) You meet the staff characteristics and have completed any additional learning/competency outlined in Section 3 of this PGD.

Patient group directions do not remove inherent professional obligations or accountability.
It is the responsibility of each professional to practise 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	**Designation**	**Signature**	**Date**

Authorising manager / Assessor

I confirm that the registered health professionals named above have declared themselves suitably trained and competent to work under this PGD. I give authorisation on behalf of University Hospitals of Derby & Burton NHS Foundation Trust for the above named health care professionals who have signed the PGD to work under it.			
Name	**Designation**	**Signature**	**Date**

Note to authorising manager

Score through unused rows in the list of registered health professionals to prevent additions post managerial authorisation.

This authorisation sheet must be retained by a manager in the clinical department where the PGD is in-use to serve as a record of those registered health professionals authorised to work under this PGD.