



This patient group direction (PGD) must only be used by registered health professionals who have been named and authorised by their organisation to practice under it. The most recent and in date final signed version of the PGD should be used.

Patient Group Direction (PGD)

For the administration of

Midazolam 1mg/ml – IV/IO

By registered health care professionals for

Sedation of critically ill patients requiring pre-hospital intensive care

Throughout the Manx Care and those contracted by the Manx Care where appropriate within practice

PGD NUMBER 51

1. Change history

| Version number | Change details | Date |
|----------------|--------------------------|------------|
| 1 | Original PGD ratified | June 2021 |
| 2 | Minor wording amendments | March 2022 |
| | | |

2. Medicines practice guideline 2: *Patient group directions*

Refer to the relevant sections of NICE medicines practice guideline 2: *Patient group directions* as stated in the blank template notes. For further information about PGD signatories, see the NHS and Manx Care [PGD website FAQs](#)

3. PGD development

Refer to the [NICE PGD competency framework for people developing PGDs](#)

| Job Title & organisation | Name | Signature | Date |
|---------------------------------|------|-----------|------|
| Author of the PGD | | | |
| Member of the PGD working group | | | |

4. PGD authorisation

Refer to the [NICE PGD competency framework for people authorising PGDs](#)

| Job Title | Name | Signature | Date |
|--|------|-----------|------|
| Medical Director | | | |
| Chief Pharmacist/ Pharmaceutical Adviser | | | |
| Senior Paramedic | | | |
| Director of Nursing | | | |
| GP Adviser | | | |
| Senior Microbiologist (if PGD contains antimicrobials) | N/A | N/A | N/A |

5. PGD adoption by the provider

Refer to the [NICE PGD competency framework for people authorising PGDs](#)

| Job title and organisation | Signature | Date | Applicable or not applicable to area |
|----------------------------|-----------|------|--------------------------------------|
| | | | |

6. Training and competency of registered healthcare professionals, employed or contracted by the Manx Care, GP practice or Hospice

Refer to the [NICE PGD competency framework for health professionals using PGDs](#)

| | Requirements of registered Healthcare professionals working under the PGD |
|---|---|
| Qualifications and professional registration | <ul style="list-style-type: none"> Registered healthcare professionals, working within or contracted by the Manx Care, GP practice or Hospice who are permitted staff groups outlined within the current PGD policy |
| Initial training | <ul style="list-style-type: none"> Knowledge of current guidelines and the administration of the drug specified in this PGD/BNF and of the inclusion and exclusion criteria Training which enables the practitioner to make a clinical assessment to establish the need for the medication covered by this PGD Local training in the use of PGDs |
| Competency assessment | Staff will be assessed on their knowledge of drugs and clinical assessment as part the competency framework for registered health professionals using PGDs |
| Ongoing training and competency | The registered health care professionals should make sure they are aware of any changes to the recommendations for this medication; it is the responsibility of the registered health care professionals to keep up to date with continuing professional development. PGD updates will be held every two years |

7. Clinical Conditions

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| Clinical condition or situation to which this PGD applies | Sedation of critically ill patients requiring pre-hospital intensive care |
| Inclusion criteria | Sedation of critically ill patients requiring pre-hospital intensive care |
| Exclusion criteria | <ul style="list-style-type: none"> • Patients under eighteen (18) years old • Known hypersensitivity to midazolam • Known pregnancy |
| Cautions (including any relevant action to be taken) | <ul style="list-style-type: none"> • Known cardiac disease, in particular, heart failure and arrhythmias • Pulmonary hypertension • Infective endocarditis • Rheumatic or Carcinoid heart disease • Congenital abnormalities (e.g. tetralogy of Fallot, ventricular septal defect, valvular pulmonic stenosis) • Pulmonary valve repair • Chronic obstructive pulmonary disease • Extra caution should be exercised in the presence of any other form of cerebral depressant |
| Arrangements for referral for medical advice | Patient should be referred to a more experienced clinical practitioner for further assessment |
| Action to be taken if patient excluded | Patient should be referred to a more experienced clinical practitioner for further assessment |
| Action to be taken if patient declines treatment | <ul style="list-style-type: none"> • A verbal explanation should be given to the patient on: the need for the medication and any possible effects or potential risks which may occur as a result of refusing treatment • This information must be documented in the patients' health records • Any patient who declines care must have demonstrated capacity to do so • Where appropriate care should be escalated |

8. Details of the medicine

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|--|---|
| Name, form and strength of medicine | Midazolam 1mg/ml |
| Legal category | Prescription Only Medicine (POM) schedule 3 |
| Indicate any <u>off-label use</u> (if relevant) | None |
| Route/method of administration | Intravenous (IV) or intraosseous (IO) |

| | |
|--|---|
| Dose and frequency | <p>18 years old to 59 years old:</p> <ul style="list-style-type: none"> • 1mg IV/IO followed by a 10ml saline flush • Dose interval 3 minutes • Maximum cumulative dose 5mg <p>60 years and older:</p> <ul style="list-style-type: none"> • 0.5 IV/IO followed by a 10ml saline flush • Dose interval 3 minutes • Maximum cumulative dose 2.5mg |
| Quantity to be administered | For administration only: As per dose |
| Maximum or minimum treatment period | Single episode of care |
| Storage | Store at Room temperature |
| Adverse effects | <ul style="list-style-type: none"> • Respiratory depression • Apnoea • Coma • Drowsiness • Confusion and agitation • Paradoxical reactions including aggressive behaviour, hallucinations and increased anxiety • Hypotension • Chest pain • Bradycardia • Cardiac arrest • Slurred speech • Tremor • Appetite suppression • Sleep disturbance • Transient retrograde amnesia • Dry mouth • Jaundice |
| Records to be kept | The administration of any medication given under a PGD must be recorded within the patient's medical records |

9. Patient information

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|---|--|
| Verbal/Written information to be given to patient or carer | <ul style="list-style-type: none"> • Verbal information must be given to patients and or carers for all medication being administered under a PGD • Where medication is being supplied under a PGD, written patient information leaflet must also be supplied • A patient information leaflet is available on request |
| Follow-up advice to be given to patient or carer | If symptoms do not improve or worsen or you become unwell, seek medical advice immediately |

10. Appendix A

| References |
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| <ol style="list-style-type: none">1. British National Formulary (BNF) available online: https://bnf.nice.org.uk2. Nursing and Midwifery “The code” available online: https://www.nmc.org.uk3. Current Health Care Professions Council standards of practice4. General Pharmaceutical Council standards5. The General Optical Council6. Electronic medicines compendium available online: https://www.medicines.org.uk |

11. Appendix B

| Health professionals agreed to practice |
|---|
| <ul style="list-style-type: none">• Each registered healthcare professional will hold their own Competency framework which will be signed and agreed by their mentor• A mentor is defined within the Manx Care policy as any ward/area managers, sisters, senior nurses, GPs, pharmacists or senior paramedics who has completed the PGD training themselves |