

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 or supply of

Naproxen 250mg tablets

By registered health care professionals for

Pain

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

PGD NUMBER 135

1. Change history

Version number	Change details	Date
1	Original PGD ratified	June 2021
2	Minor Word changes to improve clarity of document	September 2023

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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 <u>PGD website FAQs</u>

3. PGD development

Refer to the <u>NICE PGD competency framework for people developing PGDs</u>

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

4. PGD authorisation

Refer to the <u>NICE PGD competency framework for people authorising PGDs</u>

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

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

Refer to the <u>NICE PGD competency framework for health professionals using PGDs</u>

	Requirements of registered Healthcare professionals working under the PGD	
Qualifications and professional registration	 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 Pharmacists must be practising in Manx Care authorised premises i.e. contracted pharmacy premises 	
Initial training	 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 PGD's 	
Competency	Staff will be assessed on their knowledge of drugs and clinical	
assessment	assessment as part the competency framework for registered health professionals using PGD's	
Ongoing training and	The registered health care professionals should make sure they	
competency	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	

6. Clinical Conditions

Clinical condition or	Pain	
situation to which this		
PGD applies		
Inclusion criteria	Patients aged 16 years and over.	
	• Pain	
Exclusion criteria	Patients under 16 years	
	 History of hypersensitivity to aspirin or other NSAIDs, or where asthma, angioedema, urticaria, or rhinitis has been precipitated by aspirin or any other NSAID Active gastro-intestinal bleeding or gastrointestinal ulceration History of gastro-intestinal bleeding or perforation related to previous NSAID therapy 	
	 History of recurrent (2 distinct episodes) of gastrointestinal bleeding or gastrointestinal ulceration Severe Hepatic impairment Renal impairment Pregnancy Any known allergy or hypersensitivity to any component of the medicine Severe heart failure 	

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Cautions (including any	Elderly patients more susceptible to side effects	
relevant action to be	Breast feeding	
taken)	Allergic disorders	
	Cardiac Impairment	
	Cerebrovascular disease	
	Coagulation defects	
	Connective tissue disorders	
	Dehydration (eisk of renal impairment)	
	Heart failure	
	History of gastrointestinal disorders (e.g. ulcerative colitis,	
	crohns disease)	
	Ischemic heart disease	
	May mask symptoms of infection	
	Peripheral arterial disease	
	Risk factors for cardiovascular events	
	Uncontrolled hypertension	
	A detailed list of cautions is available in the SPC, which is	
	available from the electronic Medicines Compendium website:	
	www.medicines.org.uk and BNF https://bnf.nice.org.uk	
Arrangements for referral	Patient should be referred to a more experienced clinical	
for medical advice	practitioner for further assessment	
Action to be taken if	Patient should be referred to a more experienced clinical	
patient excluded	practitioner for further assessment	
Action to be taken if	A verbal explanation should be given to the patient on: the	
patient declines	need for the medication and any possible effects or potential	
treatment	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	

7. Details of the medicine

Name, form and strength	Naproxen 250mg tablets
of medicine	
Legal category	Prescription Only Medicine (POM)
Indicate any off-label use	None
(if relevant)	
Route/method of	Oral
administration	
Dose and frequency	500mg (two tablets) initially then 250mg (one tablet) every 6-8
	hours as required (do not exceed 4 doses in 24 hours)
Quantity to be	Administered: 500mg (two tablets)
administered and/or	Supplied: One original pack
supplied	

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Maximum or minimum	Maximum 7 days		
treatment period	Barrier and the second		
Storage Adverse effects	Room temperature		
Adverse effects	Agranulocytosis	Muscle weakness	
	Alopecia	Myalgia Navasa	
	Angioedema	Nausea Nausea	
	Aplastic anaemia	Nephritis tubulointerstitial	
	• Asthma	Nephropathy	
	Cognitive impairment	Neutropenia	
	Concentration impaired	Oedema	
	• Confusion	Optic neuritis	
	Constipation	Oral disorders	
	Corneal opacity	Palpitations	
	• Depression	Pancreatitis	
	Diarrhoea	Papillitis	
	• Dizziness	Papilloedema	
	• Drowsiness	Paraesthesia	
	Dyspnoea	Photosensitivity reaction	
	Erythema nodosum	Platelet aggregation	
	• Fatigue	inhibition	
	Gastrointestinal discomfort	Pulmonary oedema	
	Gastrointestinal disorders	Rash pustular	
	Glomerulonephritis	Renal failure (more common in notice to with the coviction	
	Haemolytic anaemia	in patients with pre-existing	
	Haemorrhage	renal impairment)	
	Hallucination	Renal papillary necrosis Respiratory disorders	
	Headache	Respiratory disordersSeizure	
	Hearing impairment		
	Heart failure	 Severe cutaneous adverse reactions (scars) 	
	Hepatic disorders	Skin reactions	
	Hyperhidrosis		
	Hyperkalaemia	Sleep disordersThirst	
	Hypersensitivity		
	Hypertension	ThrombocytopeniaTinnitus	
	Increased risk of arterial	Vasculitis	
	thromboembolism		
	Infertility female	VertigoVisual impairment	
	Inflammatory bowel disease	Visual impairmentVomiting	
	Malaise	G	
		vith connective-tissue disorders	
	such as systemic lupus erythe susceptible)	matosus may be especially	
	A detailed list of adverse reactions available from the electronic Med	icines Compendium website:	
	www.medicines.org.uk and BNF h		
Records to be kept	The administration of any medica	_	
	recorded within the patient's med	lical records	

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8. Patient information

Verbal/Written information to be given to patient or carer	 Naproxen should be taken with or after food, it should not be taken on an empty stomach. 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 If symptoms do not improve or worsen or you become unwell, 	
Follow-up advice to be	to be If symptoms do not improve or worsen or you become unwell,	
given to patient or carer seek medical advice immediately		

9. Appendix A

References

- 1. British National Formulary (BNF) available online: https://bnf.nice.org.uk
- 2. Nursing and Midwifery "The code" available online: https://www.nmc.org.uk
- 3. Current Health Care Professions Council standards of practice
- 4. General Pharmaceutical Council standards
- 5. Electronic medicines compendium available online: https://www.medicines.org.uk

10. Appendix B

Health professionals agreed to practice

- 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

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