



Shepherd's Cove Hospice

Medical Teaching Guide

Designed to **educate** you, the caregiver, on **comforting** and **managing** the patient and their symptoms.



Our Heart Sets Us Apart

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KNOWING WHAT TO EXPECT

When you or someone you love has been referred to hospice care, it is understandable that you may feel overwhelmed and experience many emotions. Shepherd’s Cove Hospice (SCH) is here to support you in this time. It is not our intent to “take over” all care but to provide friendly guidance, helping you to find comfort – physically, emotionally and spiritually. SCH has a team of professionals (physician, nurses, nurse practitioners, social workers, aides, chaplains) and volunteers that are ready to work on your behalf. Because members of SCH’s team will not be in your home 24 hrs. /day, this guide is to give you information so that you are comfortable and confident in providing care.

SCH believes most fears can be eliminated if you know what to expect. For most people, knowing what to expect is not as fearful as the unknown. With that in mind, this quick guide is given to you to:

- Explain what physical symptoms might be expected and what can be done to control those symptoms,
- Give you teaching tools for you to refer to as you need,
- Explain how to effectively use prescription medications to manage the comfort of the patient.
- Direct you to additional resources for your own research, if you would like.

Throughout this journey, your SCH team members want to teach and **educate** you, **encourage** you and **empower** you. Educating you on learning how to address symptoms gives you the tools and confidence you need. With SCH here to help, we want you to be encouraged - you are not alone on this journey. We also want to empower you to direct this journey so that it is lived out in the way you desire. SCH respects individual’s unique goals and needs. We want to serve you by assisting you to fulfill your unique goals and needs.



TOPIC

PAGE

Handling and disposal of prescription drugs..... 4

The “Comfort Kit” and how to use it..... 5

Additional drug information..... 6

How to administer medications 7

Symptoms of adverse drug reactions 8

Constipation..... 9

Using Oxygen at home..... 10

ADDITIONAL RESOURCES

- www.shepherdscovehospice.org
- www.nhpco.org
- www.cancer.net
- www.dignitymemorial.com
- www.cancer.org/treatment/end-of-life-care/nearing-the-end-of-life.html
- www.helpguide.org/harvard/dealing-with-a-loved-ones-serious-illness.htm
- Book: Dying Well – Ira Byock, author
- Book: CareGiving: Helping an Aging Loved One – Jo Horne, author

As a hospice patient, you may be receiving prescription drugs for the relief of the uncomfortable symptoms of your illness. Unfortunately, some of these medications are a target for theft, abuse, and illegal sale.

You can help protect yourself from being a victim of theft by remaining quiet about your medications, especially pain medication. Sadly, this may even include keeping the information from some family members.

Although YOU alone are responsible for the proper use and handling of your medications, hospice is taking an extra step to maintain the confidence of the community and to preserve the availability of these medications to patients who need them for symptom control. Your nurse will count particular medications at each visit to show that only the prescribed amount is being taken. An unexplained shortage of these drugs will be reported to your physician, and possibly to law enforcement. Hospice and/or your physician may decide to remove these medications from your plan of care if abuse or mishandling is a problem.

Hospice is required by law to dispose of prescription medications when they are no longer required – whether the patient simply will not be taking the drug anymore, or because of the patient's death. Medications can be dangerous if taken by someone other than the person for whom they are prescribed. For example, children may swallow medications just out of curiosity or thinking the pills are candy.

At the time of disposal, the Shepherd's Cove Hospice (SCH) nurse will explain what she needs to do and ask the family for the patient's drugs. This normally occurs when the nurse comes to attend the patient's death, or as soon as possible afterward. The nurse will make notations of the name and amount of each drug and dispose of most drugs accordingly. The nurse will ask for a family member, or someone designated by the family, to witness the disposal and sign the disposal form.

If any medications cannot be flushed, or if the family does not want the disposal to be done in the home, the drugs can be taken to the SCH office for witnessed disposal. Any drugs taken from the home in this manner will be documented with a statement regarding the proposed method of disposal, and the form witnessed by a family member or designated witness before removing the drugs from the home.

If you have any questions or concerns regarding drug disposal, please feel free to discuss them with your SCH nurse.

The sealed box provided to you is called a "Comfort Kit." Each medication is used to relieve various symptoms for comfort to the patient. Each medication may even help with more than one symptom. This document will tell about the medications, the box and how to give them. Directions are on each medication, but this gives a little more explanation for easier understanding. **Please call Shepherd's Cove Hospice before giving any of the medications in this box for the first time.**

As always, if you have an questions or just need help, please call the Shepherd's Cove Hospice office at 256-891-7724 or toll-free at 1-888-334-9336.

Medications may make the patient sleepy, but that is ok as long as the patient is comfortable

- **Morphine Sulfate liquid (also called Roxanol)-** This medication is used when the patient can no longer swallow pills. It is used to relieve pain, but also helps when patients cannot breathe well or has shortness of breath. It works by relaxing the chest muscles so the patient can take a deeper or easier breath. The liquid works faster than a pill and it is also concentrated, so it only takes a small amount. It gets into the system quickly, but it also out of the system quicker than some medications. The medication can be given to the patient ever 1 to 2 hours as needed. Use the dropper provided in the box and give 0.25mL up to 0.50mL (¼ to ½ of the dropper). The nurse may tell you a specific amount, so please go by his/her directions. AGAIN, before giving for the first time, call Shepherd's Cove Hospice.

If the patient is allergic to the Morphine, this box will Oxyfast. Instructions are the same for morphine.

- **Haloperidol (also called haldol)-** This medication is used for agitation, hallucinations and nausea. It relaxes the patient and helps them to rest. The directions are to take 1 to 2 tablets every 4 to 6 hours as needed. Start with the lower dose, and the dose can be increased if needed. If the patient cannot swallow the tablet, crush is and put a drop of water with it to make a paste. Place the paste inside the patient's cheek (wear a glove if you need to use your finger to do this). A drop or two of water may need to be placed in his/her cheek to help the paste absorb into the lining of the cheek, It may take up to an hour for the medicine to help the patient. If using one tablet does not help, after 1 hour, a second tablet may be given. If the patient remains uncomfortable after the second tablet has time to get into the patient's system, please call the office for further directions.
- **Atropine drops or Hyoscyamine (Levsin)** (the comfort kit will have only one, not both medications) - These medications help to dry up congestion or secretions in the throat or chest that may make a "gurgling" sound. Hyoscyamine also helps with stomach and bladder spasms. For Atropine drops, place 2 to 4 drops inside the patient's cheek or under the tongue every 4 to 6 hours. For Hyoscyamine liquid, give 0.125mg every 4 hours as needed. Because these medication "dries up moisture" in the body, so you may notice a dry mouth and less urine. For a dry mouth, use mouth swabs and mouth moisturizer to help keep the patient comfortable.

Steps to Safely Destroying Fentanyl patches:

- Carefully peel off use Fentanyl patches from the body, using caution to touch just the sides and back of the patch. Fold over on itself so that the side with medication is covered.
- Place into toilet and flush, ensuring that the patch flushes fully and does not remain or resurface in the toilet after the flushing. If the patch does not fully submerge, reflush until it is no longer visible and is safe from retrieval.
- Wash hands thoroughly with soap and warm water. Dispose of all packaging.

Extended Release Medications (Ex: MS Contin, Oxycontin, etc.)

- You should never crush any sustained release tablets.
- Extended release tablets are designed in such a way to release the active medication in the body slowly over a period of time to maintain constant drug level in the body. If you crush it, then it will lose its property.
- This has the advantage of taking pills less often. Also means that there may be fewer side effects as the levels of the drug in the body are more consistent in extended release formulations.

Medication Planner:

SCH nurse cannot set up medication planner according to Government Regulation. They can assist the patient or family in filling pill planners.



Teaching Guide on Administering Medications

Medication	Used for	How Much	How Often	Instructions	RII/Date
A B H Gel or D A R Gel or ____ Gel	ANXIETY or RESTLESSNESS or NAUSEA or PAIN	_____ syringe _____ ml	Every _____ hours as needed	<ol style="list-style-type: none"> 1. Put on gloves. 2. Squirt out contents of syringe (or amount as directed) in gloved hand. 3. Rub gel, like lotion, onto patient's bend of arm, inner wrist, or under jaw on neck. Refer to teaching guide for more details. 4. (Pain Gel): Rub gel like lotion onto patient's area of pain. 	Teaching Guide # _____
Roxanol Or Oxyfast	PAIN or SHORTNESS OF BREATH	 _____ mg	Every _____ hours as needed	<ol style="list-style-type: none"> 1. Squeeze up the amount of medicine you need to give. 2. Give drops under tongue or between cheek and gums. (OK to swallow) 3. <u>Keep a Journal:</u> Please write down the date, time, and dose you give of this medicine so that your nurse will be able to see how much medication will be needed to help improve symptoms. 4. <u>Call Hospice</u> if you have to give more than 3 doses in 24 hours unless instructed otherwise – the dose may be adjusted. 	Teaching Guide # _____
Levsin/ Hyoscyamine or Atropine Drops	RESPIRATORY CONGESTION or BLADDER SPASMS	1 to 2 ml = 4 to 8 droppers full as directed  _____ tabs _____ drops	Every _____ hours as needed	<p><i>(RII to circle which form of medication you will receive)</i></p> <p>Liquid:</p> <ol style="list-style-type: none"> 1. Give drops under tongue (OK to swallow). If using Levsin/hyoscyamine liquid, a full dropper equals 0.25 ml (or cc) on the dropper (see picture to left). This means you would give 4 to 8 droppers full in order to give the right amount. [2.5 ml (cc) = ½ ml (cc)] <p>SL (sublingual or under tongue) tabs:</p> <ol style="list-style-type: none"> 1. Moisten mouth before giving tabs. 2. Place tablets (as written on bottle) under tongue and allow to dissolve. 	
Scopolamine Patch	RESPIRATORY CONGESTION or NAUSEA	1 to 3 patch(es) as directed	Every 3 days as needed	<ol style="list-style-type: none"> 1. Apply the number of patches (as instructed on prescription label) behind ear lobe as pictured on box of medication. 2. Each patch lasts three days. When it is time to re place, place new patch on opposite side, behind ear lobe, and remove old one(s) unless otherwise directed. 3. Call hospice if patient perspires profusely or runs a fever. 	
Duragesic Patch	PAIN	_____ patch(es)	Every 72 hours	<ol style="list-style-type: none"> 1. Apply patch to front part of body where you can feel muscle. Avoid bony areas. (Good places are usually on chest above the left or right breast or upper outer side of arm.) 2. Remove old patch when placing new one on. 3. Call hospice if patient perspires profusely or or has a temperature above 100.5. 4. Do not use a heating pad or an electric blanket. 	

Occasionally a person will experience a response to a medication which is not pleasant and/or not intended. This is called an “adverse reaction.”

Not all unpleasant responses mean that there is an “allergy.” Many of these responses can be remedied by a change in dosage, taking medication with food, time-of-day the medication is taken, or by another medication taken with the offending medication.

However, some responses experienced are symptoms of an allergy. Allergic responses can range from a mild rash to severe breathing difficulties and cardiovascular (heart) irregularities. For this reason, it is important that you tell the hospice nurse about any reactions you have had to medications or other substances in the past.

1. Some symptoms of adverse reaction include:

A. Central Nervous System:

tremors	dizziness
muscle spasms	confusion
anxiety	headache

B. Gastrointestinal System:

nausea	diarrhea
vomiting	abdominal pain
cramps	

C. Skin:

rash	hives
flushing	intense itching
swelling of eyelids and lips	

D. Cardiovascular:

irregular heart beat	blue coloration of the skin
extreme high/low blood pressure	chills
profuse sweating	weakened pulse

E. Respiratory:

wheezing	dyspnea
respiratory	depression

2. Systemic symptoms of an impending life-threatening (anaphylactic) response include:

weakened pulse	rapid heart rate
severe	anxiety chills
profuse sweating	extreme high/low blood pressure
difficulty breathing	blue discoloration
hives	facial swelling

Please notify the Shepherd’s Cove Hospice nurse if you experience any of the symptoms listed above when taking a medication, particularly if it is a medication you have not taken in a while or if you have never taken it before. Call 256-891-7724 or 1-888-334-9336.



Constipation is a term for difficulty in eliminating stool. It usually is associated with dry, hard stools.

Should everyone have a bowel movement daily?

The frequency of bowel movements varies greatly. It is not necessary to have a bowel movement every day; some healthy people have bowel movements every 2 or 3 days, whereas others may move their bowels twice or more a day. Bowel movements are considered normal as long as the stool is soft and easily eliminated.

What causes constipation?

Constipation may result from a number of conditions, but the most common causes are constipating diets, constipating medications, poor bowel habits, and inactivity. Constipating diets are low in fiber, or roughage, lack of fiber contributes to hard, dry stools that are difficult to pass. Inactivity and pain medications contribute to constipation because they slow the bowel down and result in delayed passage of hard stools.

Poor bowel habits involve failure to respond to the urge to have a bowel movement; delay causes increased absorption of water from the stool, which makes the stool harder to eliminate. Painful anorectal conditions such as hemorrhoids also result in constipation by causing the person to delay bowel movements.

What are the complications of constipation?

Prolonged constipation can result in impaction, or being unable to empty the rectum. This may be accompanied by paradoxical diarrhea, in which watery stool is passed around the mass of hard stool. Impaction requires medical treatment.

How is constipation treated?

Treatment of constipation depends on its cause. Any painful condition, such as hemorrhoids, must be relieved. A diet containing plenty of fiber should be followed, and breakfast should be a meal of adequate bulk. Fiber can be found in cereal bran, the skins of fruits and potatoes, whole grain breads, and vegetables such as beans, celery and broccoli. Fiber, or roughage, is important to your diet because it provides the bulk your large intestine needs to carry away body wastes.

If you are unable to eat enough high-fiber foods, you may need a bulk laxative or bran mixture. Bulk laxatives are available in powder form, capsule form, and water form; the dose must be individualized according to your response (the goal is to create soft stools that are easily eliminated). A suitable bran mixture is made from 1 cup of miller’s bran, 1 cup of applesauce, and ¼ cup of prune juice. You should take 1 to 2 tablespoons of this mixture daily; you may increase the dose if needed to create soft stools.

It is essential that you get adequate fluids when adding bulk to your diet; you should drink at least 8 to 10 8-oz. Glasses of fluid a day. This prevents clumping of the bulk laxative and help keeps your stools soft.

You should also increase your activity as much as possible; a simple walking program is very effective in stimulating normal intestinal activity. Another very important step in preventing constipation is to establish regular bowel habits and to respond promptly to the urge to defecate.

A common approach to constipation is routine use of stimulant laxatives or enemas; this is not recommended because chronic use of stimulants creates bowel dependency, a state of reduced intestinal activity.

Your doctor has prescribed extra oxygen at a flow rate of _____ liters per minute for _____ hours every day. The medical supply company will show you how to set the flow rate and how to care for the equipment. Keep the supplier's phone number handy so that you can call if the system doesn't work properly.

You will be using a liquid oxygen tank, an oxygen tank, or an oxygen concentrator. You will breathe the oxygen through either a mask or a nasal cannulae (two short prongs that fit just inside your nostrils). The system will also have a humidifier to warm and moisturize the oxygen.

It's a good idea to also have a small portable oxygen tank for an emergency backup system in case of power failure.

Here are some general guidelines and safety tips for using oxygen equipment.

General Guidelines

Always keep your oxygen flow rate where your doctor prescribes.

Sometimes it's hard to tell whether oxygen is flowing through the tubes. If you have doubts, check to be sure that the system is turned on and there are no kinks in the tubing. If you still aren't sure, place the nasal cannulae in a glass of water with the prongs up and watch for bubbles. (Always shake the water off before inserting the cannulae into your nostrils.) If no bubbles appear, oxygen is not flowing through the tubes and you need to call your supplier.

Each time before using your oxygen, check the humidifier bottle. If it's near the fill line, empty the bottle and refill it with sterile or bottled water.

Even with the humidifier, oxygen can dry the inside of your nose. A water-soluble lubricant (such as K-Y Jelly) helps ease dryness and cracking. Don't use petroleum-based products like Vaseline because this will make the dryness worse.

To avoid running out of oxygen, reorder your new supply when the register reads $\frac{1}{4}$ full - 2 or 3 days before you need a new tank.

Safety First

Oxygen is very combustible. By following these rules, you can be confident that your oxygen system is not posing a serious fire hazard:

*Keep your oxygen unit away from open flames and heat. This includes smoking - don't smoke and don't allow others to smoke around you. If you have a gas stove, gas space heater, or kerosene heater or lamp, stay out of the room while it's on.

*To prevent leakage, always keep your oxygen system upright, and make sure the system is turned off when not in use. Don't place carpets, bed clothes, or furniture over the tubing, since this may cause a leak.

*Keep an all-purpose fire extinguisher close by.

*If a fire should occur, turn off the oxygen and leave the house at once.

*Notify your local fire department that you have oxygen in the house. In most areas, the fire department offers free safety inspections, which can help make your home even safer for using oxygen.

Call your doctor immediately if:

*Your breathing is difficult, irregular, shallow, or slow.

*You become restless or anxious.

*You are tired, drowsy, or have trouble walking up.

*You have a persistent headache.

*Your speech becomes slurred, you can't concentrate, or you feel confused.

*Your fingernails or lips are bluish.

These symptoms may arise when you are not getting enough oxygen or when you are getting too much oxygen. Only your doctor can determine how much oxygen you need. Therefore, you must never change the flow rate without instructions from your doctor

Don't forget: Throughout this journey, your SCH team members want to teach and educate you, encourage you and empower you. Educating you on learning how to address symptoms gives you the tools and confidence you need. With SCH here to help, we want you to be encouraged - you are not alone on this journey. We also want to empower you to direct this journey so that it is lived out in the way you desire. SCH respects individual's unique goals and needs. We want to serve you by assisting you to fulfill your unique goals and needs.

If you have any questions, or need assistance please give us a call. We are here to help you and make this journey as smooth as possible.

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It is the mission of **Shepherd's Cove Hospice**, a non-profit agency, to provide, with a servant's heart, exceptional individualized care for those coping with end-of-life issues.



If you should have a concern your Shepherd's Cove Hospice team is not providing the service you expect, please call Stormy Dismuke, Chief Nursing Officer, or Rhonda Osborne, Chief Executive Officer at 256-891-7724 or 1-888-334-9336 (toll free).

You may also contact our Compliance Hotline by phone at 256-279-0549, or email at compliance@shepherdscove.org. After speaking with the Shepherd's Cove Hospice representative, you are not satisfied with the results, you can make a formal complaint through the State of Alabama Department of Licensure by calling 1-800-356-9596 (toll free).

Shepherd's Cove Hospice complies with applicable Federal civil rights laws and does not discriminate on the basis of race, color, national origin, age, disability, or sex. ATTENTION: If you do not speak English, language assistance services, free of charge, are available to you. Call 256-891-7724.

Shepherd's Cove Hospice cumple con las leyes federales de derechos civiles aplicables y no discrimina por motivos de raza, color, nacionalidad, edad, discapacidad o sexo. ATENCIÓN: si habla español, tiene a su disposición servicios gratuitos de asistencia lingüística. Llame al 256-891-7724.

Shepherd's Cove Hospice 은(는) 관련 연방 공민권법을 준수하며 인종, 피부색, 출신 국가, 연령, 장애 또는 성별을 이유로 차별하지 않습니다. 주의: 한국어를 사용하시는 경우, 언어 지원 서비스를 무료로 이용하실 수 있습니다. 256-891-7724 번으로 전화해 주십시오.

Shepherd's Cove Hospice, a non-profit agency, is a member of the following organizations:

