

Please find enclosed some new patient information cards.

These cards support a new patient safety initiative. Some information about the initiative is provided overleaf. Please circulate this information to all health professionals in your team.

This initiative has been developed in collaboration with NHS Salford Clinical Commissioning Group (CCG), Salford Royal NHS Foundation Trust (SRFT), and the NIHR Collaboration for Leadership in Applied Health Research and Care Greater Manchester (CLAHRC GM).

Please support this safety initiative by distributing the cards to patients on the medications as detailed overleaf.

For further supplies of cards or for further information please contact Lorraine Burey, CLAHRC GM Project Manager, via Lorraine.Burey@srft.nhs.uk.

With many thanks for your support.



Salford Royal **NHS** NHS Foundation Trust **NHS** Salford Clinical Commissioning Group

Medicine sick day rules

When you are unwell with any of the following:

- Vomiting or diarrhoea (unless only minor)
- Fevers, sweats and shaking

Then **STOP** taking the medicines listed overleaf

Restart when you are well (after 24-48 hours of eating and drinking normally)

If you are in any doubt, contact your pharmacist, GP or nurse



Medicines to stop on sick days

ACE inhibitors:	medicine names ending in "pril" eg. <i>lisinopril, perindopril, ramipril</i>
ARBs:	medicine names ending in "sartan" eg. <i>losartan, candesartan, valsartan</i>
NSAIDs:	anti-inflammatory pain killers eg. <i>ibuprofen, diclofenac, naproxen</i>
Diuretics:	sometimes called "water pills" eg. <i>furosemide, spironolactone, indapamide, bendroflumethiazide</i>
Metformin:	a medicine for diabetes

Originally developed by NHS Highland

For more information, please visit www.clahrc-gm.nihr.ac.uk/salford-sick-day-rules

MEDICINES AND DEHYDRATION: SICK DAY RULES

BRIEFING FOR HEALTH PROFESSIONALS ON NEW PATIENT INFORMATION CARDS

NHS Salford CCG, in conjunction with SRFT and CLAHRC GM, is launching a new patient safety initiative about medicines during sick days. This briefing explains why there is a need for this initiative and what it will involve.

What is the problem?

Dehydration can be a significant risk for people taking certain medicines. Therefore, “medicine sick day rules” patient information cards have been developed that list the medicines that should be temporarily stopped during illness that can result in dehydration (vomiting, diarrhoea and fever).

What is my role?

Cards will primarily be distributed to patients through community pharmacies and GP practices. Pharmacies and practices are asked to give a card to every patient receiving any of the medicines listed on the card. A supply of cards is also being sent to SRFT to give to patients when initiating one of these medicines.

What advice should I give patients?

To ensure patients understand the information on the card, it is suggested that patients should be offered the following explanation at the time they are given a card:

- Some medicines shouldn't be taken when you have an illness that makes you dehydrated. This is because they can either increase the risk of dehydration or because dehydration can lead to potentially serious side effects of the medicine
- The medicine you are taking that falls into this category is [*tell patient which medicine*]
- Illnesses that can cause dehydration are vomiting, diarrhoea and fever
- This advice does not apply to minor sickness or diarrhoea, which means a single episode
- If you have heart failure, you may stop these medicines for a maximum of 48 hours but after that you need to contact your GP or heart failure team for further advice
- If your heart failure condition has been unstable recently then please contact the heart failure team for advice (0161 206 1321).

Community pharmacists may find that provision of one of these cards could support a consultation under the Medicine Use Review (MUR).

What do the cards look like?

The cards are credit-card sized and printed on both sides (please see overleaf).

Why these medicines?

The list of medicines on the card is not exhaustive but they are highlighted because:

- Diuretics can cause dehydration or make dehydration more likely in an ill patient
- ACE inhibitors, angiotensin II receptor blockers and NSAIDs may impair kidney function in a dehydrated patient, which could lead to kidney failure
- Metformin dehydration increases the risk of lactic acidosis, a serious and potentially life-threatening side effect of metformin.

For more information, please visit www.clahrc-gm.nihr.ac.uk/salford-sick-day-rules