NHS
Somerset
Clinical Commissioning Group

Patient Group Direction: The administration of Lidocaine (lignocaine) Hydrochloride 1% injection (10mg/ml) and Lidocaine (lignocaine) Hydrochloride 2% injection (20mg/ml) **by HCPC registered physiotherapists providing Musculoskeletal and/or Physiotherapy services in GP practices or CCG commissioned services across NHS Somerset CCG**

- Treatment of intra-articular or extra-articular musculoskeletal lesions

http://www.medicines.org.uk/emc/

Staff involved in the review and development of this PGD for Somerset CCG:

	Name	Signature	Date
Senior Doctor	ANDREW TRESIDDER	Andrew Tresidder	**20th July 2020**
Senior Pharmacist	SHAUN GREEN		**17th July 2020**
Lead Nurse	SANDRA CORRY		**24th July 2020**

Name of original author: Somerset NHS Foundation Trust

Expiry Date: 17th July 2022

Authorised for use across NHS Somerset CCG Practices or CCG commissioned services by:

Sandra Corry, Director of Nursing and Patient Safety for NHS Somerset CCG (Acting as Clinical Governance Lead)

Date of Implementation:

TO BE COMPLETED BY GP SURGERY / Commissioned service:

I, Doctor ……., as clinical lead for …… surgery, have read and approved this PGD for use by appropriate registered nurses / physiotherapists employed at my surgery / commissioned service. I understand that I am responsible for ensuring that staff have adequate training to ensure that this injection is administered to patients in strict accordance with this PGD

Signed……..Dated……

Patient Group Direction: The administration of Lidocaine (lignocaine) Hydrochloride 1% injection (10mg/ml) and Lidocaine (lignocaine) Hydrochloride 2% injection (20mg/ml) **by HCPC Registered Physiotherapists working in GP practices or CCG commissioned services across NHS Somerset CCG**

Expiry Date: 17th July 2022

The HCPC Registered Physiotherapists named below are authorised to administer as specified under this Patient Group Direction, being employees of …… …… (INSERT SERVICE / PRACTICE NAME)

In signing this document I confirm the following:

- I have read and understood the above mentioned PGD.
- I agree to practice only within the bounds of my own competence and in accordance with my Code of Professional Conduct.
- I have the qualifications required under the staff characteristics detailed in the PGD
- I am competent to operate under this PGD.
- I agree to administer/supply the above preparations in accordance with this PGD

NAME *(please print)*	TITLE	SIGNATURE	AUTHORISING MANAGER *(please print)*	MANAGER'S SIGNATURE	DATE

- **Complete additional pages as necessary.**
- **Retain original signed pages (1) and (2) with authorising manager.**

Patient Group Direction: The administration of Lidocaine (lignocaine) Hydrochloride 1% injection (10mg/ml) and Lidocaine (lignocaine) Hydrochloride 2% injection (20mg/ml) **by HCPC Registered Physiotherapists working in GP practices or CCG commissioned services across NHS Somerset CCG**

N.B. You must be authorised by name, under the current version of this PGD before you attempt to work in accordance with it.

1. Clinical Condition

Definition of condition/situation	• Treatment of patients with intra-articular or extra-articular musculo-skeletal lesions usually used with a local corticosteroid injection. • NB. This PGD is not for the treatment of the defined conditions in spinal joints or Hip joints.
Criteria for inclusion	• Adult patients, aged 18 years and over, seen in GP practice or referred to the Physiotherapy Musculoskeletal Service & Orthopaedic Assessment Service suffering with joint or soft-tissue pain • To be used in conjunction with a corticosteroid injection • Use as a diagnostic local anaesthetic block • Valid consent from patient has been obtained
Exclusion criteria	• Allergy / hypersensitivity to lidocaine or any amide type local anaesthetic • Complete heart block • Hypovolaemia • Patients under the age of 18 years • Infection in the joint to be treated or suspicion of infection in the joint to be treated • Local sepsis over injection site • Osteomyelitis adjacent to the joint to be treated • Haemarthrosis • Prosthetic joint in the adjacent area • Spinal joints • Hip joints
Caution	• Known supra-ventricular tachycardia • Bradycardia or other conduction problem • Severe shock • Acute porphyria • Epilepsy • Respiratory impairment • Myasthenia gravis • Hepatic or renal impairment • Pregnancy

	• Breastfeeding • Debilitated patients • Elderly patients • Post cardiac surgery • Congestive heart failure • When the patient is unable to tolerate Lidocaine Hydrochloride as local anesthetic.
Action if excluded	• Discuss other options including use of steroid on its own
Action if patient refuses medication	• Refer to medical practitioner as appropriate. • Offer patient a copy of any referral letters written, document outcome of offer (acceptance or refusal) in patients notes • Document advice given and / or patient's decision

2. Characteristics of Staff

[Type text]

Professional qualification to be held by staff working under this Patient Group Direction	HCPC Registered Physiotherapists
Additional requirements	• Diploma in Injection Therapy, with evidence of CPD in musculo-skeletal injection therapy • Resuscitation skills, with evidence of annual updates • Facilities for resuscitation should be available when administering lidocaine. • Training and competence in all aspects of drug administration including contraindications and the recognition of anaphylaxis. • The healthcare professional has undertaken appropriate training to carry out clinical assessment of a patient leading to diagnosis that requires treatment according to the indications listed in this PGD • The healthcare professional has undertaken Provider approved training in the supply of medicines under PGDs • You must be authorised by name, under the current version of this PGD before working under it. • Injectors must be fully authorised as competent to inject without supervision to administer the drug under this Patient Group Direction. • The healthcare professional must be willing to be professionally accountable for this work and maintain their skills, knowledge and be working within his/her level of competence; as per the relevant Professional standards of practice and conduct. • The practitioner should be aware of any change to the recommendations for the medicine listed • Maintenance of own level of updating with evidence of professionals respective continued professional development requirements

Requirements for staff training and competency assessment for administering medicine under this Patient Group Direction.	• Provider PGD Training and theory competency assessment • Competency assessment for this PGD • Successful completion of any medicines management and drug calculation training and competency assessment required for the relevant professional group and area of practice as required by the Trust
System for recording names of individuals authorised to supply and / or administer drugs under this Patient Group Direction	For commissioned service staff Healthcare Professional to complete Individual Authorisation (page 2 of PGD) signed by authorising manager. Copies to be kept by / sent to: • Authorising manager in GP practice • Individual HCPC Registered Physiotherapist • Provider Physiotherapy service lead manager • Provider Medicines Management Team

3. Description of Treatment

Name of Medicine	Lidocaine (lignocaine) Hydrochloride 1% injection (10mg/ml) Lidocaine (lignocaine) Hydrochloride 2% injection (20mg/ml)
Legal Class	POM (Prescription Only Medicine)
Storage	Store in a locked medicines cupboard. Do not store above 25°C. Do not freeze. Keep in outer carton.
Method or route of administration	**Intra-articular or extra-articular** injection using an appropriately sized needle, anaesthetic is injected prior to administration of any corticosteroid. As per injection therapy policy **NB: The injections must not be given intravenously or intrathecally**
Dose to be used (including criteria for use of differing doses)	The dose and volume of local anaesthetic injection is clinically determined for each individual patient by the named Physiotherapist depending on the joint size, size of the intra-articular or extra-articular musculo-skeletal lesion and the severity of the condition • Lidocaine 1% (10mg in 1ml) injection Max advised amount 100 mg (10ml) Max licensed dose 200 mg (20ml) • Lidocaine 2% (20mg in 1ml) injection Max advised dose 40mg (2ml) Max licensed dose 200 mg (10ml)
Frequency and Dose	Lidocaine is supplied in 2ml and 5ml vials. Where there is multiple joint involvement, treatment may be by intra-articular or extra-articular injection to multiple sites as appropriate.
Other information	Supplied in packs of 10 individual 2ml or 5ml vials

Advice and information to patient/carer including follow-up	Patient advised to continue with all current prescribed medication. Refer to the current BNF and/or SPC for further information on drug interactions with the patient's concurrent medication. Relevant warnings including potential adverse reactions: • Hypotension • Bradycardia • Hypersensitivity • CNS Effects include confusion/respiratory depression/convulsions • With intra-articular or other local injections, the most common adverse effect is a temporary local exacerbation with increased pain and swelling. Normally, this subsides after a few hours. • Subsequent analgesia • Relevant advice sheet • Patients should be given the Product Information Leaflet for the drug. • That patients may experience a temporary local exacerbation with increased pain and swelling for two to three days after injection and may need oral analgesia e.g. paracetamol, ibuprofen. (Please refer to BNF for a list of cautions and contra-indications regarding any analgesia recommended) • That there is a possibility of an immediate anaphylactic reaction and it is therefore recommended that the recipient of the injection remain in the clinic location for up to 30 minutes following the injection to allow for observation of such reactions • The site and route of injection will affect the onset of anaphylactic reactions, which may be delayed for up to 72 hours

Specify method of recording supply /administration including audit trail	The following will be recorded in the patient's clinical records: • Patient's name/address/date of birth and consent • Indications for use • Advice given to patient/carer (to include side effects). • Brand, batch number and expiry date of medicine • Name of medicine / dose/ quantity supplied • Signed and dated. (Where computer records are used nurses/health professionals must have individual identifier to enable audit trail) • Document any adverse reactions • All significant events/incidents/near misses occurring in relation to the supply / administration of a medicine under this PGD must be reported to the Trust on the relevant incident form in a timely manner
References used in the development of this PGD:	• BNF (current version) • Summary of Product Characteristics accessed from emc: www.medicines.org.uk

Please refer to the summary of product characteristics for full information

This Patient Group Direction is operational from 17th July 2020

Version History

Version	Date	Brief Summary of Change	Owner's Name
2.1	May 2020	Somerset Partnership PGD full review	Paul Aldwinckle, Orthopaedic Specialist Podiatrist, SPFT
2.2	July 2020	Minor amendments and transfer to CCG template	
2.3	Aug 2020	Minor amendment to allow all qualified physiotherapists and amend typo	