

Palliative care guidance in the community

For the management of patients with severe COVID-19

Symptom	Drug	Route	Starting dose (if not already on regular opioid*)	Frequency
■ Breathlessness	Morphine (use together with midazolam)	sc/im	2.5mg	PRN up to hourly
	Midazolam (use together with morphine)	sc	Typically 10mg	Over 24h by sc infusion
	Lorazepam (use 1st line if no one to inject)	Oral	5mg	PRN up to hourly
	Oxygen	sc/im	2.5mg	PRN up to hourly
■ Anxiety & agitation	Midazolam	sc/im	2.5mg	PRN up to hourly
	Lorazepam (use 1st line if no one to inject)	Sublingual	500 micrograms	PRN up to hourly
■ Agitation (if hallucinations or if treating as for anxiety hasn't worked)	Haloperidol 1st line	sc/im	1.5mg	PRN up to hourly
		PRN up to hourly	Typically 3mg	Over 24h by sc infusion
	Levomepromazine	sc/im	12.5mg	PRN up to hourly
		sc	25mg	Over 24h by sc infusion
■ Nausea & vomiting	Haloperidol	sc/im	1.5mg	PRN hourly
■ Pain	Morphine	sc/im	2.5mg	PRN up to hourly
		Po	5mg	PRN up to hourly
■ Respiratory secretions	Hyoscine hydrobromide	sc	400 micrograms	PRN up to 4 hourly
	Glycopyrronium	sc	200 micrograms	PRN up to 4 hourly

*If already on a regular opioid, bigger starting doses may be needed. Follow usual practice to calculate morphine doses if the patient is already on a regular opioid or phone for specialist advice.