Canterbury District Health Board
Te Poari Hauora ō Waitaha

Patient Label

Authority for Administration of Subcutaneous Medicines Infusion (Adult)

Known Drug Allergies:

MedChart/QMR0004 reviewed and medicines ceased where appropriate. Chart 'Paper Chart Exists – Subcutaneous Medicines Infusion' in MedChart		**Signature:** **Name:**	
Date	**Drug(s), Dose(s), Administration Directions**	**Prescriber's Signature Print Surname**	**Stop Date:**
2/2/22	For Niki T34 syringe pump MORPHINE (x) mg HALOPERIDOL (y) mg Made up with water and run over 24 hours.	CUMINS	
2/2/22	For 50mL syringe pump MORPHINE (x) mg. HALOPERIDOL (y) mg Made up to 48mLs with water and run at 2mLs/hour.	CUMINS	

INFUSION RECORD

New Syringe Record Change of Rate Record				**Bolus Record (prescribed on the QMR0004)**			
Date	**Time**	**New Syringe or Rate**	**Signature (2 nurses)**	**Date**	**Time**	**Dose and Route of Administration**	**Signature (2 nurses)**

ADMIN SUBCUT MEDICINES INFUSION C260037