



A practical handbook for carers: 照顾者实用手册：

*Helping to manage breakthrough symptoms
safely using subcutaneous medicines*

帮助您使用皮下注射药物来安全地管控
突破性症状



Copyright

This document is licensed under a Creative Commons Attribution-NonCommercial-NoDerivs 3.0 Australia licence. To view a copy of this licence visit:

<https://creativecommons.org/licenses/by-nc-nd/3.0/au/>

© Brisbane South Palliative Care Collaborative 2018

In essence you are free to copy, distribute and transmit the work in its current form for non-commercial purposes. You must attribute the work in the manner specified by the authors. You may not alter, transform, or build on this work.

Acknowledgements

This practical handbook was developed as part of *caring@home*, a project undertaken by a consortium of Metro South Health, operating through Brisbane South Palliative Care Collaborative (lead agency), Aged & Community Services Australia, Australian Primary Health Care Nurses Association, Flinders University (through CareSearch), Leading Age Services Australia, National Prescribing Service, Pharmaceutical Society of Australia, The Royal Australian College of General Practitioners and University of Technology Sydney.

We acknowledge and thank all the health professionals and carers who contributed to the development of this handbook.

Funding statement

caring@home is funded by the Australian Government, Department of Health.

Suggested reference

Brisbane South Palliative Care Collaborative. *A practical handbook for carers: Helping to manage breakthrough symptoms safely using subcutaneous medicines*. Brisbane: Brisbane South Palliative Care Collaborative; 2018.

Enquiries

All enquiries about this document should be directed to:

Brisbane South Palliative Care Collaborative

T: 1300 600 007

E: caringathome@health.qld.gov.au

Disclaimer

This practical handbook is intended as a guide for carers to assist them to help manage breakthrough symptoms.

While the Brisbane South Palliative Care Collaborative has exercised due care in ensuring the accuracy of the material contained in the handbook, the handbook is only a general guide to appropriate practice, to be followed subject to the clinician's judgement and the carer's preference in each individual case.

The Brisbane South Palliative Care Collaborative does not accept any liability for any injury, loss, or damage incurred by use of, or reliance upon, the information provided within this handbook.

References

The reference list for this practical handbook can be found at:

<https://www.caringathomeproject.com.au/tabid/5144/Default.aspx>



版权

本文件采用知识共享署名 - 非商业性 - NoDerivs 3.0澳大利亚许可协议授权。如欲查看此许可证，请访问：

<https://creativecommons.org/licenses/by-nc-nd/3.0/au/>

© Brisbane South Palliative Care Collaborative 2018

大体上，您可以出于非商业目的自由复制、分发和传输当前形式的作品。您必须以作者指定的方式指明作品的归属。您不得改变、转换或基于本作品进行创作。

鸣谢

本实用手册是作为 *caring@home* 的一部分编写的，这是由 Metro South Health 联盟开展的一个项目，通过以下机构执行：布里斯班南部姑息治疗协作机构 (Brisbane South Palliative Care Collaborative) (牵头机构)、澳大利亚老龄和社区服务 (Aged & Community Services Australia)、澳大利亚初级保健护理护士协会 (Australian Primary Health Care Nurses Association)、弗林德斯大学 (Flinders University) (通过 CareSearch)、澳大利亚领先老龄服务 (Leading Age Services Australia)、全国处方服务署 (National Prescribing Service)、澳大利亚药学会 (Pharmaceutical Society of Australia)、澳大利亚皇家全科医学院 (The Royal Australian College of General Practitioners) 和悉尼科技大学 (University of Technology Sydney)。

我们感谢所有为本手册的编写做出贡献的健康专业人士和照顾者。

经费声明

caring@home 由澳大利亚政府卫生部提供经费。

建议参考资料

Brisbane South Palliative Care Collaborative。《照顾者实用手册：帮助使用皮下注射药物来安全地管控突破性症状》。布里斯班：Brisbane South Palliative Care Collaborative; 2018。

查询

有关本文件的所有问题，请联系：

Brisbane South Palliative Care Collaborative

电话: 1300 600 007

电邮: caringathome@health.qld.gov.au

免责声明

本实用手册旨在为照顾者提供指导，协助他们去帮助管控突破性症状。

虽然 Brisbane South Palliative Care Collaborative 在确保手册中所含材料的准确性方面已经尽职尽责，但本手册只是适当实践的一般指南，在每一个别病例中应该按临床医生的判断和照顾者的优先程序实施。

对于因使用或依赖本手册中提供的资讯而导致的任何伤害、损失或损害，Brisbane South Palliative Care Collaborative 不承担任何责任。

参考资料

本实用手册的参考资料清单见以下网址：

<https://www.caringathomeproject.com.au/tabid/5144/Default.aspx>



Introduction

This handbook is one part of the *caring@home* package for carers. It should be used with all the other materials in the package, particularly the one-on-one training that will be provided to you by a nurse.

The purpose of the *caring@home* package is to provide practical information and skills so that you can help manage a person's **breakthrough symptoms** safely using **subcutaneous medicines**.

You are not alone. Using the *caring@home* package, you, together with your health care team, can help recognise and manage breakthrough symptoms if they occur.

The decision to help manage breakthrough symptoms is voluntary and yours to make. Your health care team will not pressure you to accept this task. If you do not want to be involved, simply tell the team of your decision.

What do other carers say?

Carers who have given subcutaneous medicines say they feel a strong sense of achievement and satisfaction from being able to contribute to the comfort of the person they are caring for.

Carers report being pleased they have been able to help keep the person at home, because that is what they wanted.

What is a symptom?

A symptom is a personal sensation that can result from an illness and can be distressing.

What is a breakthrough symptom?

Even when taking regular medicine to help control a symptom, sometimes the symptom can unexpectedly get worse and become distressing for the person you are caring for. When this occurs it is called a "breakthrough symptom" and may require an extra dose of medicine.

What is subcutaneous medicine?

Medicine that is given using a small plastic tube placed under the person's skin (not into a vein) is called subcutaneous medicine.

"We knew when the pain hit we were able to do something to try and relieve it immediately, without having to sit waiting, powerless, for someone else to come and do it. I believe it gave me the confidence to keep him at home to the very end."





引言

本手册是供照顾者使用的 *caring@home* 成套教材的一部分。它应与成套教材中的所有其他材料一起使用，特别是护士将会提供给您的一对一培训。

caring@home 成套教材的目的是提供实用的资讯和技能，以便您可以使用 **皮下注射藥物** 安全地帮助管控您照顾的 **人的突破性癥狀**。

你并非孤身一人。使用 *caring@home* 成套教材，您和您的医疗团队可以一起帮助识别和管控突破性症状。

帮助管控突破性症状的决定是自愿性的，由您自行作出决定。您的医疗团队不会向您施加压力让您去接受此任务。如果您不想参与，只需将您的决定告诉团队。

其他照顾者有什么看法？

已实施过皮下药物注射的照顾者们表示，由於能够帮助让自己所照顾的人更舒适，他们有一种强烈的成就感和满足感。

照顾者们表示，能够实现他们所照顾的人的愿望，帮助他们留在家中，感到很欣慰。

“我们知道，当疼痛发作的时後，能够有办法立即设法减轻它，而不必感到无能为力地坐着等待别人来帮忙。我相信这给了我信心，能把他留在家中，直到最后。”



什么是症状？

症状是由疾病所引起的一种个人感觉，可能令人痛苦。

什么是突破性症状？

即使定时服用药物来控制症状，有时症状会出乎意料地变得更糟，并且会使您正在照顾的人感到痛苦。当发生这种情况时，则称之为“突破性症状”，可能会需要额外剂量的药物。

什么是皮下注射药物？

通过置于在人的皮肤下（而不是静脉中）的小塑料管给予的药物称为皮下注射药物。



Components of the *caring@home* package for carers

1	One-on-one training session with a nurse	A nurse will teach you how to help manage breakthrough symptoms safely using subcutaneous medicines.
2	A practical handbook for carers: <i>Helping to manage breakthrough symptoms safely using subcutaneous medicines</i>	The handbook provides written information and pictures you may need to help manage breakthrough symptoms safely using subcutaneous medicines.
3	Writing a label, opening an ampoule and drawing up medicine: <i>A step-by-step guide</i>	This illustrated guide explains how to write a label for a syringe, open an ampoule and draw up medicine using a step-by-step approach.
4	Giving medicine using a subcutaneous cannula: <i>A step-by-step guide</i>	This illustrated guide explains how to give medicine using a subcutaneous cannula using a step-by-step approach.
5	Medicines diary	The medicines diary is used to record all the subcutaneous medicines that you give to the person you are caring for.
6	Colour-coded labelling system	The colour-coded labelling system acts as an extra safety check to help you to select the correct medicine for each breakthrough symptom. It includes: <ul style="list-style-type: none">• Colour-coded sticky labels for syringes and• Symptoms and medicines: <i>Colour-coded fridge chart</i>
7	A practice demonstration kit	The demonstration kit can be used to practise giving medicines using a subcutaneous cannula.
8	Short training videos	The videos show you how to help manage breakthrough symptoms using subcutaneous medicines.



供照顾者使用的 *caring@home* 成套教材组成部分

1	与护士一对一的培训课程	护士将教您如何使用皮下注射药物来安全地帮助管控突破性症状。
2	照顾者实用手册： 帮助使用皮下注射药物来安全地管控突破性症状	本手册提供了您可能需要的书面资讯和图片，以帮助您使用皮下注射药物来安全地管控突破性症状。
3	写标签、打开药瓶和抽取药物：分步指南	这个带插图的指南分步解释了如何为注射筒写标签，打开药瓶并抽取药物。
4	使用皮下插管给药：分步指南	这个带插图的指南分步解释了如何使用皮下插管给药。
5	用药日记	用药日记是用于记录您给予被照顾者的所有皮下注射药物。
6	彩色编码标签系统	彩色编码标签系统可作为额外的安全检查，帮助您为每种突破性症状选择正确的药物。这包括： <ul style="list-style-type: none">• 用于注射筒的彩色编码可粘贴标签• 症状和药物：彩色编码的冰箱图表
7	练习演示成套教材	该演示成套教材可用于练习使用皮下插管给药。
8	简短的培训视频	这些视频向您展示如何使用皮下注射药物帮助管控突破性症状。



Key information

• Using this handbook	14
• Recognising breakthrough symptoms	16
• Rating breakthrough symptoms	20
• Knowing what subcutaneous medicine to use for each breakthrough symptom	22
• Writing a label, opening an ampoule and drawing up medicine: <i>A step-by-step guide</i>	24
• Giving a medicine using a subcutaneous cannula: <i>A step-by-step guide</i>	28
• Checking the subcutaneous cannula	32
• Recording in the medicines diary	34
• Making sure there are enough medicines in the house	36
• Safely storing and disposing of subcutaneous medicines	38

Extra information

• The subcutaneous cannula	42
– What is a subcutaneous cannula?	42
– Why is a subcutaneous cannula used?	42
– Where is a subcutaneous cannula inserted?	42
– When will the subcutaneous cannula need to be replaced?	42
• More about common breakthrough symptoms	44
• Common subcutaneous medicines and frequent side effects	48
• Notes	50

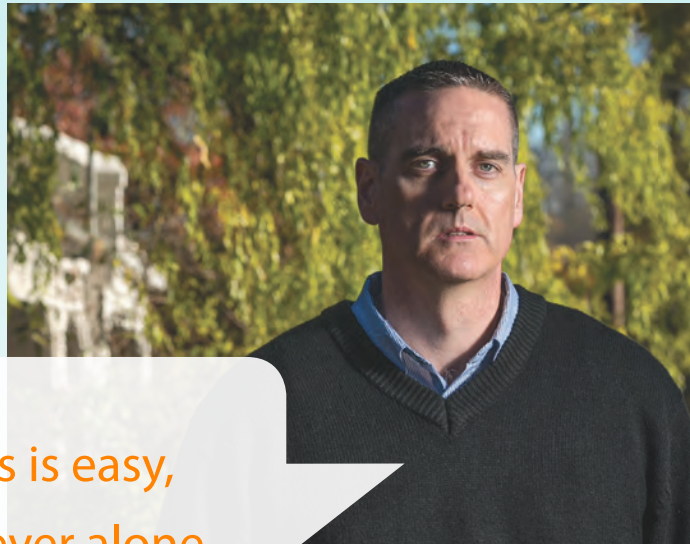


关键资讯

• 使用本手册	15
• 认识突破性症状	17
• 评定突破性症状等级	21
• 了解针对每种突破性症状使用的皮下注射药物	23
• 写标签、打开药瓶和抽取药物：分步指南	25
• 使用皮下插管给药：分步指南	29
• 检查皮下插管	33
• 在用药日记中作记录	35
• 确保家里有足够的药品	37
• 安全储存和处置皮下注射药物	39

额外资讯

• 皮下插管	43
– 什么是皮下插管?	43
– 为什么使用皮下插管?	43
– 皮下插管插在哪里?	43
– 什么时候需要更换皮下插管?	43
• 关于常见的突破性症状的更多资讯	45
• 常见的皮下注射药物和经常发生的副作用	49
• 备注	50



*“None of this is easy,
but you are never alone.
Everything that you are
doing is helping them.”*





“这一切都不容易，但
你永远不是孤身一人。
你所做的一切都是在帮
助他们。”





Key information



“The written practical handbook and the videos suited us. Everything that we needed was there. We felt good about the process and we would recommend it to anyone.”



关键资讯



“书面实用手册和视频适合我们。我们需要的一切都在那里面。我们感觉能顺利进行这个过程，我们会向任何人推荐。”



Using this handbook

Your nurse will give you this handbook and will use it to guide the one-on-one training session with you. During this training session you will be encouraged to ask questions at any time.

You will be taught how to:

- Recognise breakthrough symptoms
- Identify common subcutaneous medicines
- Complete a colour-coded syringe label
- Open and draw up medicine from an ampoule
- Give medicine using a subcutaneous cannula (and practise, using the demonstration kit)
- Make a record in the medicines diary
- Check the subcutaneous cannula and insertion site
- Store medicines in your home
- Dispose of unused medicines
- Make sure that you always have enough medicines in your home to treat breakthrough symptoms

Your nurse will give you a 24-hour telephone number so that you can contact a health care professional if you need advice, support or reassurance.

“It makes you feel that you are part of it, that you are helping. It’s part of the business.

At least you are contributing, you are not sitting there as an onlooker. You are in the picture.”





使用本手册

您的护士将为您提供本手册，并将用它来指导您，进行一对一的培训。在培训期间，我们鼓励您随时提出问题。

您将学习如何做以下事情：

- 认识突破性症状
- 辨认常见的皮下注射药物
- 填写彩色编码的注射筒标签
- 打开药瓶抽取药物
- 使用皮下插管给药（并使用演示成套教材练习）
- 在用药日记上做记录
- 检查皮下插管和插入部位
- 将药物存放在家中
- 处置未使用的药物
- 确保您家中始终有足够的药物来治疗突破性症状

您的护士将为您提供24小时电话号码，以便您在需要建议、支持或解答疑虑时联系医疗保健专业人员。

“这过程让你觉得你是其中的一部分，你正在提供帮助。这是照护的一部分。至少你是在发挥作用，而不是作为旁观者坐在那里。你是参与这过程当中的。”





Recognising breakthrough symptoms



Even when taking regular medicine to relieve a symptom, sometimes the symptom can unexpectedly get worse and become distressing for the person you are caring for. When this occurs, it is called a breakthrough symptom. Breakthrough symptoms may require an extra dose of medicine to make sure the person remains as comfortable as possible.

Recognising breakthrough symptoms when they occur is important. Often if symptoms are allowed to get worse, they can become much harder to treat successfully.

In the last weeks of life, common breakthrough symptoms that may occur include pain, shortness of breath, noisy 'rattly' breathing, nausea, vomiting, restlessness/agitation, anxiety and/or confused thinking.



In the one-on-one teaching session your nurse will teach you how to recognise breakthrough symptoms.



The best way to tell if a person is experiencing a breakthrough symptom is simply to ask them. If the person is unable to tell you how they feel, then you will need to rely on other signs.

Remember, you are likely to know the person you are caring for better than any health care professional. If the person cannot communicate how they are feeling, trust your own judgement in recognising what breakthrough symptom they are experiencing.

The list below may help you recognise some common breakthrough symptoms.

Pain	You may notice the person: <ul style="list-style-type: none">– Grimacing, frowning or groaning– Moving around as if trying to get in a comfortable position– Resisting when you try to move them
Shortness of breath	You may notice any of the following: <ul style="list-style-type: none">– Rapid or shallow breathing– Agitated behaviours and expressions of anxiety– Facial paleness or bluish tinge around the lips or tips of fingers– Difficulty in talking or completing sentences– Exaggerated movements of the chest, neck and/or shoulders associated with breathing
Noisy 'rattly' breathing	You may hear noisy or 'rattly' breathing. The person who is being cared for is unlikely to be aware of, or distressed by, this noise when it occurs at the end of life. However, often carers can be quite distressed when they hear the sound, fearing that it must be uncomfortable for the person experiencing it.



认识突破性症状

i 即使在定时服用常规药物来缓解某症状时，有时候症状也会出乎意料地变得更糟，并且会使您正在照顾的人感到痛苦。发生这种情况时，就称之为突破性症状。突破性症状可能需要额外剂量的药物以确保让您照顾的人尽可能舒适。

认识突发症状的发生很重要。通常，如果让症状持续变得更糟，成功进行治疗就可能更难。

在生命的最后几周，可能出现的常见突破性症状有：疼痛、呼吸短促、呼吸“咯咯”作响、恶心、呕吐、烦躁/躁动不安、焦虑和/或思维混乱。



在一对一的教学课程中，您的护士将教您如何识别突破性症状。



判断您照顾的人是否遇到突破性症状的最佳方法就是询问他本人。如果他无法告诉您自己的感受，那么您将需要依赖其他迹象来判断。

请记住，您可能比任何医护人员更了解您所照顾的人。如果您照顾的人无法与您沟通他们的感受，请相信自己的判断去识别他们正在经历的突破性症状。

下面的列表可以帮助您识别一些常见的突破性症状。

疼痛	您可能会注意到您照顾的人： <ul style="list-style-type: none">- 苦脸、皱眉或呻吟- 不断翻身，好像想要找到一个令其感到舒服的位置- 当你试图移动他时，他会抵制您
呼吸急促	您可能会注意到以下任何一种情况： <ul style="list-style-type: none">- 快速或短促的呼吸- 激动的行为和焦虑的表情- 脸色苍白或者嘴唇或手指尖周围有点浅蓝色调- 说话困难或难以说完句子- 胸部、颈部和/或肩部的与呼吸相关的夸张动作
呼吸“咯咯”作响	您可能会听到有闹声的呼吸或呼吸“咯咯”作响。 受到照顾的人在临终时不太可能意识到这种噪音或因其感到痛苦。 然而，当照顾者听到这种声音时，他们心里常常会感到痛苦，因为他们担心这种声音代表他们照顾的人一定很不舒服。



Nausea and/or vomiting	<p>You may notice that the person is sweaty, clammy, or dry retching especially on movement.</p> <p>Nausea can be difficult to identify, especially if the person cannot talk.</p> <p>Nausea can occur occasionally, or it might be there all the time.</p> <p>Nausea may occur with or without vomiting.</p> <p>Vomiting may occur with or without nausea.</p>
Restlessness/ agitation	<p>You may notice changes in the person's behaviour including:</p> <ul style="list-style-type: none">– Fidgety movements– Constant calling out– Inability to settle, or expressing a sense of urgency to get up and move <p>These symptoms may be more distressing at night and can occur more frequently in the last days of life.</p>
Anxiety	<p>Sometimes it is difficult to identify anxiety. You may notice the person:</p> <ul style="list-style-type: none">– Has a furrowed brow– Appears tense– Is constantly scanning their room
Muddled thinking or new confusion	<p>You may notice that the person is:</p> <ul style="list-style-type: none">– Behaving in a way that is out of character– Unable to concentrate– Rambling as they speak, or you may have trouble making sense of what the person is saying– Hearing or seeing things that are not present

- * *The list above is limited to common symptoms. The person you are caring for may experience other breakthrough symptoms that need to be managed. If so, talk to your health care team.*
- * *A person may experience more than one symptom at the same time. For example, they may have shortness of breath and anxiety.*
- * ***It is important to tell your nurse straight away if the person develops a new symptom.***

If you need advice about breakthrough symptoms, please contact your nurse or doctor/nurse practitioner.



恶心和/或呕吐	你可能会注意到您照顾的人出汗、湿冷或干呕，特别是在动的时候。 恶心可能难以识别，特别是如果您照顾的人不能说话。 恶心偶尔会发生，或者可能一直存在。 恶心可伴有呕吐或没有呕吐。 呕吐可伴有恶心或没有恶心。
烦躁/躁动不安	您可能会注意到您照顾的人行为的变化，包括： - 烦躁的动作 - 不断呼唤 - 无法安定下来，或不断地想站起和走动 这些症状在夜间可能更令人痛苦，并且可能在生命的最后几天更频繁地发生。
焦虑	有时很难识别焦虑。你可能会注意到您照顾的人： - 皱起眉头 - 显得紧张 - 不断环顾自己的房间
思维混乱或新的意识混乱	您可能会注意到您照顾的人： - 行为不合其本来的个性 - 无法集中注意力 - 他们说话时会漫无边际，或者你可能无法理解您照顾的人说的话 - 听到或看到不存在的东西

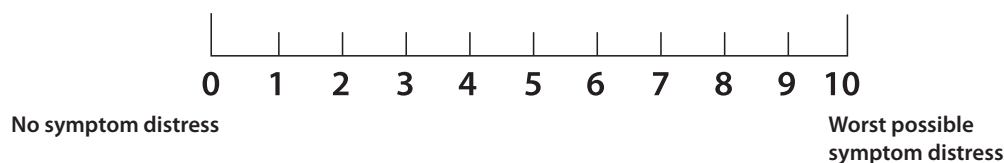
- * 以上列表仅限于常见症状。您照顾的人可能会遇到其它突破性症状需要管控。如果是这样，请咨询您的医疗团队。
- * 您照顾的人可能同时有多种症状。例如，他们可能同时会有呼吸急促和焦虑。
- * **重要的是，如果您照顾的人出现新的症状，请立即告诉您的护士。**

如果您需要有关突破性症状的建议，请联系您的护士或医生/执业-护士 (nurse practitioner)。



Rating breakthrough symptoms

i A common way that health care teams talk about how distressing breakthrough symptoms might be is to use a rating scale ranging from zero (0) to ten (10). In this scale, a rating of 0 represents no symptom distress and 10 represents the worst possible symptom distress.



Rating a symptom is best done before, and about 20 minutes after, subcutaneous medicine is given. Comparison of the before and after rating can provide an indication of how effective the medicine has been.

“ ” In the one-on-one teaching session your nurse will teach you about rating symptoms and how to record them in the medicines diary. Based on the rating, your nurse will also advise you when a breakthrough symptom needs treatment.

HOW TO If possible, ask the person how they would rate their symptom on a scale of 0 to 10. Explain to them that 0 means no distress from the symptom and 10 is the worst possible symptom distress.

If the person cannot tell you how they feel, trust your own judgement and your knowledge of the person to identify the breakthrough symptom, and give a rating for the symptom on behalf of the person.

You will need to record the symptom rating in the medicines diary before, and about 20 minutes after, giving the subcutaneous medicine. This helps you to decide if the medicine has worked. The medicines diary will also be checked regularly by your health care team.

If you are unsure or concerned, contact your nurse or doctor/nurse practitioner for further advice.

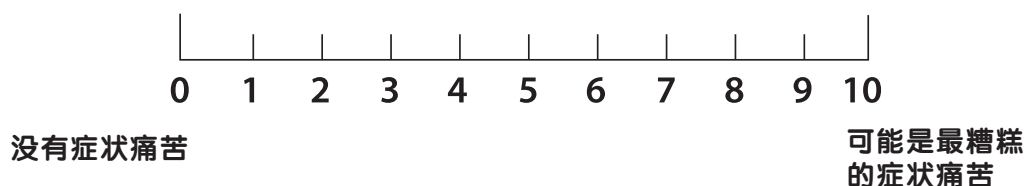


“Things became harder when he could no longer tell me how he was feeling. I had to make these decisions, but I knew him well after 45 years of living together.”



评定突破性症状等级

i 医疗保健团队讨论突破性症状痛苦程度的一种常见方式是使用从0到10的评级表。在这个评级表中，等级0表示没有症状痛苦，10表示最严重的症状痛苦。



评估症状等级最好在进行了皮下给药之前，及约20分钟之后。比较评级之前和之后，可以告诉我们药物的有效程度。



在一对一的教学课程中，您的护士将教您如何评定症状等级以及如何在使用日记中加以记录。根据评级，您的护士还可以建议您什么时候应该要治疗某突破性症状。



如果可以的话，请询问您照顾的人是如何按0到10的等级评定他们的症状的。向他们解释0表示症状没有痛苦，10表示症状痛苦最严重。

如果您照顾的人无法告诉您其感受，请相信您自己的判断和您对您照顾的人的了解，来识别突破性症状，并对其症状进行评级。

您需要在给予皮下注射药物之前，并在之后约20分钟在使用日记中记录症状等级。这有助于来衡量药物是否有效。您的医疗团队也会定期检查使用日记。

如果您不确定或担心，请联系您的护士或医生/执业-护士 (nurse practitioner) 以获得进一步的建议。



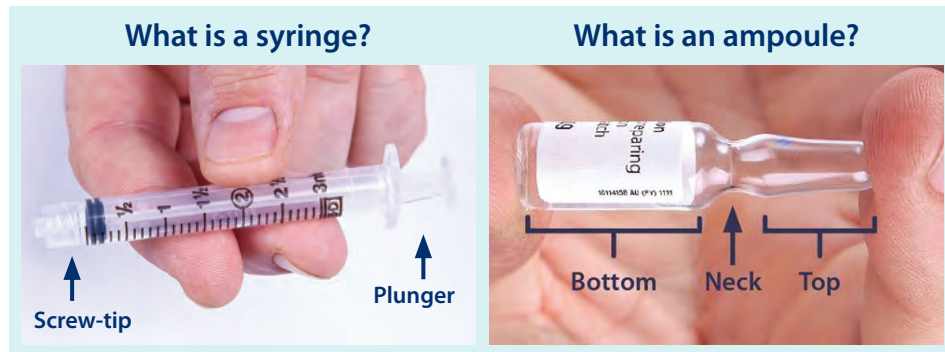
“当他再也无法告诉我他的感受时，照顾他变得更加艰难。我不得不做出这些决定，但经过45年的共同生活，我对他很了解。”



Knowing what subcutaneous medicine to use for each breakthrough symptom

i Each breakthrough symptom can be treated by giving a medicine prescribed by your doctor/nurse practitioner. You will need to get the medicine(s) from your local chemist.

Subcutaneous medicine is drawn up into a syringe from an ampoule.



Your nurse may do this for you and label the syringe for you to put in your fridge for later use or your nurse may teach you to draw up the medicine.

In either case, for safety, every syringe with medicine in it must be labelled correctly using a colour-coded sticky label. The label has the name of the **medicine** and the **symptom** this medicine is being given for already printed on it.



In the one-on-one teaching session your nurse will reinforce which particular medicine to use for each symptom, depending on the doctor's/nurse practitioner's instructions. They will also teach you how to carefully read each syringe label and to use a colour-coded system (labels and fridge chart) as an extra check to help you safely select the right medicine for a particular symptom (even if it is late at night and/or you are tired).



Before giving any subcutaneous medicine always check the label on the syringe to make sure that you have the right medicine. **This is essential.**

As an extra check, the fridge chart lists the subcutaneous medicines prescribed by your doctor/nurse practitioner to treat each breakthrough symptom. The medicines are colour-coded on the fridge chart to match the syringe labels.

"The fridge chart was really helpful. It was a double check. It gave me extra confidence that I was choosing the correct medicine."





了解针对每种突破性症状使用的皮下注射药物

i 每种突破性症状都可以用您的医生/执业-护士(nurse practitioner)开的处方药来治疗。您需要去你当地的药房拿处方配药。

将皮下注射药物从药瓶中抽取到注射筒。



您的护士可能会为您抽取药物并在注射筒上贴标签，以便您将其放入冰箱中供以后使用，或者您的护士也可以教您抽取药物。

不论何种情况，为了安全起见，每个带药品的注射筒必须使用彩色编码的可粘贴标签正确标记。标签上印有药物名称和药物所治疗的**症状**。



在一对一的教学课程中，您的护士将根据医生/执业-护士(nurse practitioner)的指示强调说明针对每种症状使用哪种特定药物。他们还将教您如何仔细阅读每个注射筒标签，并使用彩色编码系统（标签和冰箱图表）作为额外的检查，以帮助您安全地选择适合某种症状的药物（即使是在深夜和/或你疲倦的时候）。

在给予任何皮下注射药物之前，请务必检查注射筒上的标签，以确保您使用正确的药物。**这很重要。**



作为额外检查，冰箱图表列出了您的医生/执业-护士(nurse practitioner)开出的治疗每种突破性症状的皮下注射药物。这些药物在冰箱图表上用彩色编码，以与注射筒标签匹配。

“冰箱图表非常有用。这是一种双重检查，让我更确信选对了药物。”



Writing a label, opening an ampoule and drawing up medicine: *A step-by-step guide*

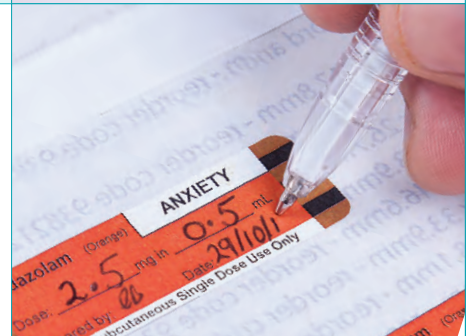
1. Collect the following items:

- A pen
- The colour-coded sticky label(s) for the medicine(s) and flush syringe(s)
- The ampoule(s) of medicine(s)
- The ampoule of sodium chloride 0.9% for flushing
- The screw-tip syringe(s)
- The blunt drawing-up needle(s)
- The cap(s) to screw onto the syringe(s)
- A clean container to put the equipment in
- A sharps container



2. Write the following details onto a sticky label for each medicine syringe to be prepared:

- The dose of the medicine contained in the syringe
- Initials of the person who prepared the syringe
- The date prepared



- * *The syringe containing sodium chloride 0.9% (the flush syringe) also needs to be labelled.*

3. Wash your hands with soap and water and dry them well



4. Attach the blunt drawing-up needle to the syringe by:

- Removing the syringe and the needle (with its protective cover) from the packaging without touching the open end of the syringe or the needle
- Twisting the needle, with its protective cover, onto the syringe

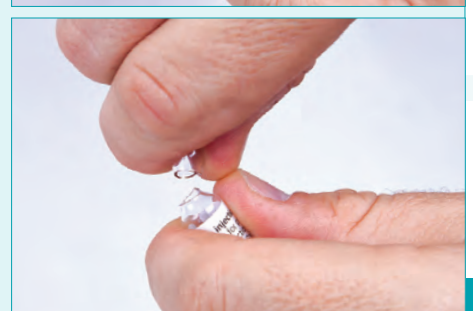


5a. Open a glass ampoule by:

- Holding the ampoule upright and gently flicking the top of the ampoule, with your finger, to move any medicine from inside the top of the ampoule to the bottom
- Placing your other thumb just above the neck of the ampoule and snapping the top of the ampoule away from you



- * *If there is a dot on the top of the ampoule make sure the dot is facing away from you.*
- * *If an ampoule shatters, discard it into the sharps container and start again.*
- * *Some people like to use non-slip material to hold the top of the ampoule.*
- * *Some services use ampoule openers – if so your nurse will teach you how to use one.*



写标签，打开药瓶和抽取药物：分步指南

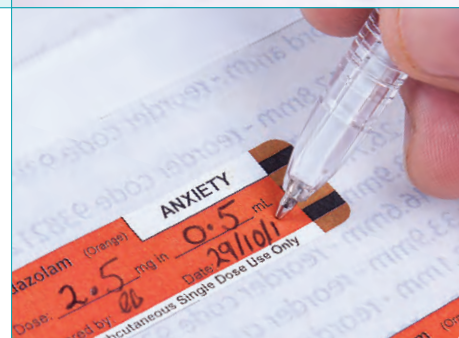
1. 准备好以下物品：

- 一支笔
- 用于药物的彩色编码可粘贴标签和冲管注射筒
- 药物药瓶
- 装有0.9%氯化钠的药瓶用于冲洗
- 螺旋针头注射筒
- 钝的抽液针
- 旋转套上注射筒上的盖子
- 一个干净的容器，用于放置设备
- 一个锐器容器



2. 将以下详细资讯写入每个要加药的注射筒的可粘贴标签上：

- 注射筒中含有的药物剂量
- 准备注射筒者姓名首字母缩写
- 准备日期



 含有0.9%氯化钠的注射筒（冲管注射筒）也需要贴上标签。

3. 用肥皂和水洗手，然后擦干



4. 通过以下方式将钝抽液针连接到注射筒：


- 从包装中取出注射筒和针头（带有保护盖），不要接触注射筒或针头的开口端
- 将针头连同保护盖拧到注射筒上





5a. 打开玻璃药瓶：


- 将药瓶直立，用手指轻弹药瓶顶部，让药瓶内的任何药物从顶部流至底部
- 将另一只拇指放在药瓶颈部上方，将药瓶的顶部向外折断

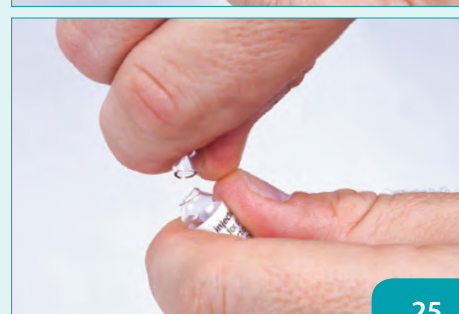


 如果药瓶顶部有一个点，请确保点背向您。

 如果药瓶破碎，将其丢弃到锐器容器中并重开一个。

 有些人喜欢使用防滑材料来固定药瓶的顶部。

 有些姑息医护团队使用药瓶开瓶器 - 如果是这样，你的护士会教你如何使用。



5b. Open a plastic ampoule by:

- Twisting the top of the ampoule until it is removed



6. Draw the medicine into the syringe by:

- Removing the protective cover from the blunt drawing-up needle
- Inserting the needle into the ampoule then slowly pulling back on the syringe plunger



7. Remove air bubbles from the syringe by:

- Pointing the syringe upwards and flicking it with your finger to move any air bubbles to the top of the syringe
- Pushing the syringe plunger upwards slowly, until most of the air bubbles are removed and until you have the correct volume of medicine left in the syringe (you may see a small droplet of medicine come out – this is OK)



8. Twist the blunt drawing-up needle off the syringe and then place it in the sharps container



9. Twist the cap onto the end of the filled syringe



10. Place the completed label on the blank side of the syringe, trying to avoid all black line volume markings on the syringe



11. Dispose of the open ampoule(s) into the sharps container

12. Wash your hands with soap and water and clean up the work surface

If you are unsure or concerned, contact your nurse or doctor/nurse practitioner for further advice.

5b. 打开塑料药瓶：

- 扭转药瓶的顶部，直到它被移除



6. 通过以下方式将药物抽取入注射筒中：

- 取下钝抽液针上的保护盖
- 将针插入药瓶中，然后慢慢拉回注射筒柱塞



7. 通过以下方式清除注射筒中的气泡：

- 将注射筒指向上方并用手指轻弹，将气泡移到注射筒顶部
- 将注射筒柱塞缓慢向上推，直到大部分气泡被排除，直到您在注射筒中留下正确的药量（您可能会看到一小滴药物出来 - 这没关系）



8. 将钝抽液针从注射筒上拧下，然后将其放入锐器容器中



9. 将盖子旋转套到充满药物的注射筒的末端



10. 将填好的标签贴在注射筒的空白面上，尽量避免贴到注射筒上的所有容量标记黑线条



11. 将开口药瓶放入锐器容器中

12. 用肥皂和水洗手，清理工作台面

如果您不确定或担心，请联系您的护士或医生/执业-护士(nurse practitioner)以获得进一步的建议。

Giving medicine using a subcutaneous cannula: *A step-by-step guide*

1. **Check the subcutaneous cannula insertion site for:** Swelling, tenderness, redness or leakage and any changes in the cannula position. If any of these are present, contact your nurse for advice before continuing.

2. **Wash your hands with soap and water and dry them well**




3. **Read the label on the syringe to make sure that you have selected the right medicine, as prescribed, for the breakthrough symptom to be treated**



4. **Place the following items into a clean container:**

- The labelled syringe(s) filled with medicine
- The labelled flush syringe




-  *Some subcutaneous medicines can cause discomfort when being given. To help avoid this, roll the syringe between your palms for a couple of seconds to warm the contents.*

5. **Twist the cap off the syringe**



6. **Hold the Y-arm of the cannula and push the syringe into the centre of the needle-free connector and twist until secure**



-  *Optional: Some services request that you first swab the end of the needle-free connector with an alcohol wipe.*

使用皮下插管给药：分步指南

1. **检查皮下插管插入部位看有没有：**肿胀、触痛、发红或渗漏以及插管位置的任何变化。如果存在这些问题，请在继续进行之前与您的护士联系以获取建议。

2. **用肥皂和水洗手，然后擦干**




3. **阅读注射筒上的标签，确保您按处方选择了治疗突破性症状的正确药物**



4. **将以下物品放入干净的容器中：**

- 有标记的装满药物的注射筒
- 有标记的冲管注射筒


-  一些皮下注射药物在给药时会引起不适。为避免这种情况，请将注射筒在两手掌间滚动几秒钟以加热内部的药物。



5. **将盖子从注射筒上拧下来**



6. **握住插管的Y形臂，将注射筒推入无针连接器的中心并扭转直至固定**

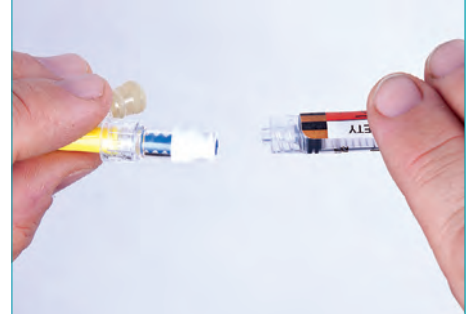
-  可选的做法：有些姑息医护团队会要求您先用酒精擦拭无针连接器的末端。



7. Slowly push the syringe plunger in until all the medicine has been given



8. Hold the Y-arm of the subcutaneous cannula and twist the syringe to remove it




9. Dispose of the empty syringe safely

10. Repeat steps 5–9 for each medicine to be given

11. Repeat steps 5–9 using 0.5mL of sodium chloride 0.9% (the flush syringe) to make sure all the medicine remaining in the subcutaneous cannula has been given to the person

12. **Re-check the insertion site for:** Swelling, tenderness, redness or leakage and inform your nurse if you notice changes

 *It is normal for medicine to form a small lump at the insertion site immediately after giving it. The lump will disappear as the medicine is absorbed into the bloodstream.*

13. Wash your hands with soap and water and clean up the work surface

14. Fill out the medicines diary



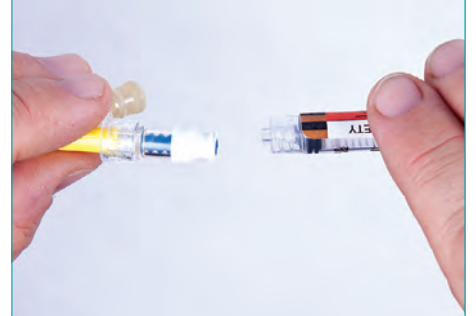
15. Check the person about 20 minutes later and put the new symptom rating in the medicines diary

If you are unsure or concerned, contact your nurse or doctor/nurse practitioner for further advice.

7. 慢慢推进注射筒柱塞，直到所有药物都已注入



8. 握住皮下插管的Y形臂并扭转注射筒，将其移除



9. 安全地处置空注射筒

10. 对每种药物重复步骤5-9

11. 使用0.5mL 0.9%氯化钠（冲洗注射筒）重复步骤5-9，确保皮下套管中剩余的所有药物都已给您照顾的人注入

12. 重新检查插入部位，看看有无：肿胀、触痛、发红或渗漏，如果发现变化，请通知您的护士

 给药后在插入部位立即形成小肿块是正常的。当药物被吸收到血液中时，肿块会消失。

13. 用肥皂和水洗手，清理工作台面

14. 填写用药日记



15. 大约20分钟后检查您照顾的人并将新的症状评级列入用药日记

如果您不确定或担心，请联系您的护士或医生/执业-护士(nurse practitioner)以获得进一步的建议。



Checking the subcutaneous cannula

i The subcutaneous cannula is a thin plastic tube inserted by the nurse under the person's skin. The place where it goes into the skin is called the insertion site. The cannula is secured to the person's skin using a clear, waterproof film that enables you to wash around the area.

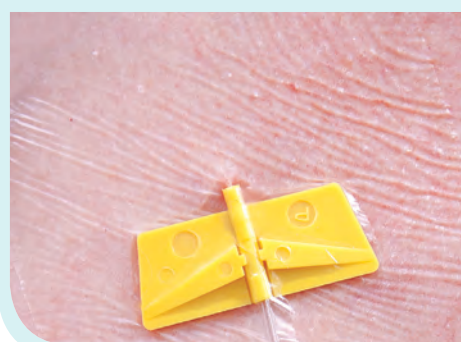
***** *Your nurse may insert two subcutaneous cannulas to make sure that there is a back-up if one stops working. This ensures there will be no delay in giving medicines to the person you are caring for.*

“ ” In the one-on-one teaching session your nurse will explain how to check the subcutaneous cannula.

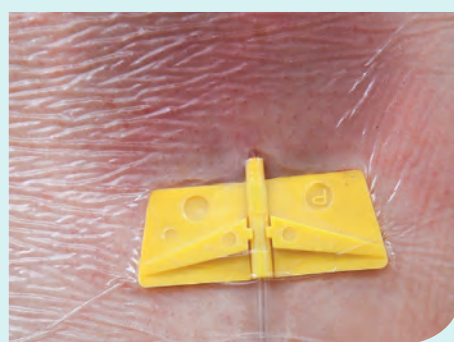
HOW TO To check the subcutaneous cannula, you should:

- Look at the insertion site
- Contact your nurse immediately if you notice any of the following:
 - Swelling
 - Tenderness
 - Redness
 - Leakage around the cannula site
- Check that the cannula and the clear film have not been dislodged

Example of insertion site suitable for use



Example of insertion site unsuitable for use



If you are unsure or concerned, contact your nurse or doctor/nurse practitioner for further advice.



“The nurse was great with me and my sister. She showed us how to see if there was a problem with the cannula and I always checked it before I gave him any medicine.”



检查皮下插管

i 皮下插管是由护士在您照顾的人的皮肤下插入的薄塑料管。它进入皮肤的地方称为插入点。使用透明的防水薄膜将插管固定在人的皮肤上，使您可以在该区域周围进行清洗。

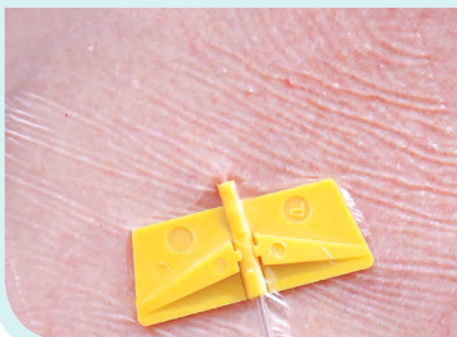
***** 您的护士可以插入两个皮下插管，以确保在一个插管停止工作时有备用。这确保了向您照顾的人提供药物时不会有任何延误。

“ ” 在一对一的教学课程中，您的护士将解释如何检查皮下插管。

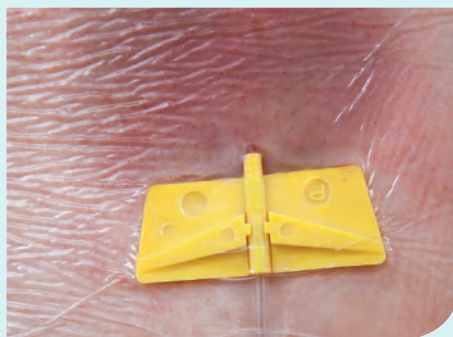
方法 要检查皮下插管，您应该：

- 查看插入点
- 如果您发现以下情况，请立即联系您的护士：
 - 肿胀
 - 压痛
 - 发红
 - 套管部位周围渗漏
- 检查插管和透明薄膜是否有脱落

适合使用的插入点的示例



不适合使用的插入点的示例



如果您不确定或担心，请联系您的护士或医生/执业-护士 (nurse practitioner) 以获得进一步的建议。



“护士对我和我姐姐很好。她向我们展示了如何检查套管是否有问题，在给他注射任何药物之前我总是检查一下。”



Recording in the medicines diary

i As part of the *caring@home* package you will be given a medicines diary. It is very important to write in the diary when each medicine is given. This allows you to keep track of the amount of medicines used. Importantly, it allows your nurse and/or doctor/nurse practitioner to assess if the medicines need to be changed.

“ ” In the one-on-one teaching session your nurse will teach you how to fill out your medicines diary.

HOW TO For each medicine given, you need to complete the following details in the medicines diary:


Date	Time	Medicine	Dose	Reason for medicine <ul style="list-style-type: none"> • Pain • Shortness of breath • Noisy 'rattly' breathing • Nausea and/or vomiting • Restlessness/agitation • Anxiety • Muddled thinking or new confusion • Other 	'Before' symptom rating (0–10)	'After about 20 mins' symptom rating (0–10)	Comments/ Other things you want to note or mention
					 0 = No symptom distress 10 = Worst possible symptom distress		
29/10/18	4.30am	Morphine	2 mg	Shortness of breath	9	4	Settled and comfortable after 20 minutes
29/10/18	4.30am	Midazolam	2.5 mg	Anxiety	9	1	

“I liked the diary because the nurses looked at it every day and used it as a tool to talk to us and tell us what was happening.”





在用药日记中作记录

 作为caring@home成套教材的一部分，您将获得一本用药日记。将每次用药记入日记是非常重要的。这使您可以跟踪所用药物的数量。重要的是，它让您的护士和/或医生/执业-护士(nurse practitioner)评估是否需要更换药物。

 在一对一的教学课程中，您的护士将教您如何填写用药日记。

 **方法** 对于每种药物，您需要在用药日记中填写以下详细资讯：

日期	时间	药物	剂量	给药原因 • 疼痛 • 呼吸急促 • 呼吸“咯咯”作响 • 恶心和 / 或呕吐 • 烦躁 / 躁动不安 • 焦虑 • 思维混乱或新的意识混乱 • 其他	‘之前’ 症状评级 (0-10)	约20分钟后‘症 状评级 (0-10)	评论/您想要注意或 提及的其他事项
					 0 = 没有症状痛苦 10 = 可能是最糟糕的症状痛苦		
29/10/18	上午4时30分	Morphine	2毫克	呼吸急促	9	4	20分钟后安定下来，舒适
29/10/18	上午4时30分	Midazolam	2.5毫克	焦虑	9	1	

“我喜欢这本日记，因为护士会每天查看，并用它作为一种工具与我们交谈并告诉我们发生了什么。”





Making sure there are enough medicines in the house



Prescriptions are needed for all subcutaneous medicines.

It is recommended that enough medicine for at least three days is always available in the home.



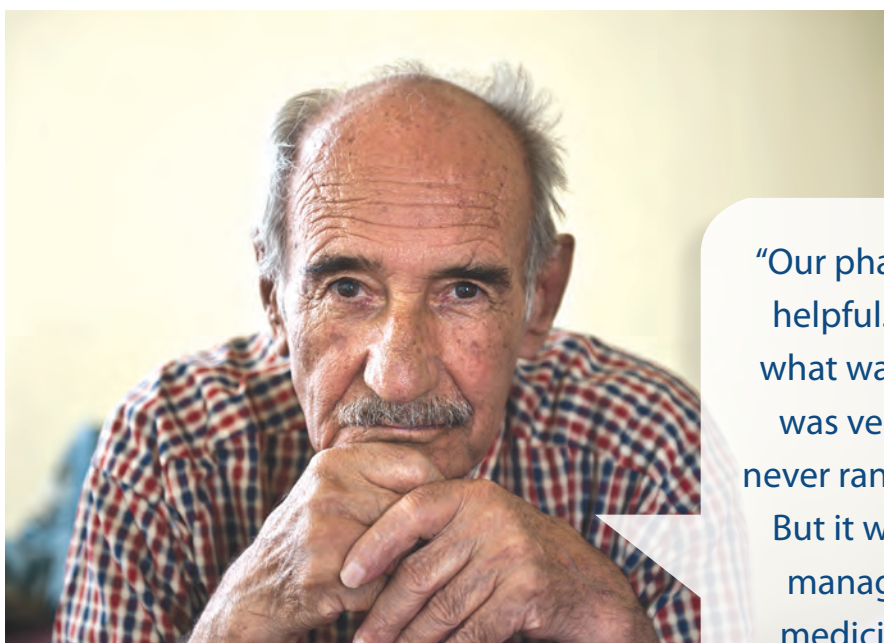
In the one-on-one teaching session your nurse will advise you on the best way to make sure that you always have enough medicine in the house.



It may take a couple of days (especially in rural or remote locations) for the prescription medicine to arrive at the chemist. Check the amount of medicine each day and let your doctor/nurse practitioner and pharmacist know if stocks are running low.

If getting to the chemist is difficult, ask your pharmacist if medicines can be home-delivered.

Find out if your chemist has an after-hours service and how to access it if needed.



“Our pharmacist was very helpful. When I told her what was happening she was very prepared. We never ran out of medicines. But it was a bit stressful managing the flow of medicines and my son helped. He collected the medicine so I could stay at home with my wife.”



确保家里有足够的药品

i 所有皮下注射药物都需要处方。

建议家中始终有至少三天的足够药物。



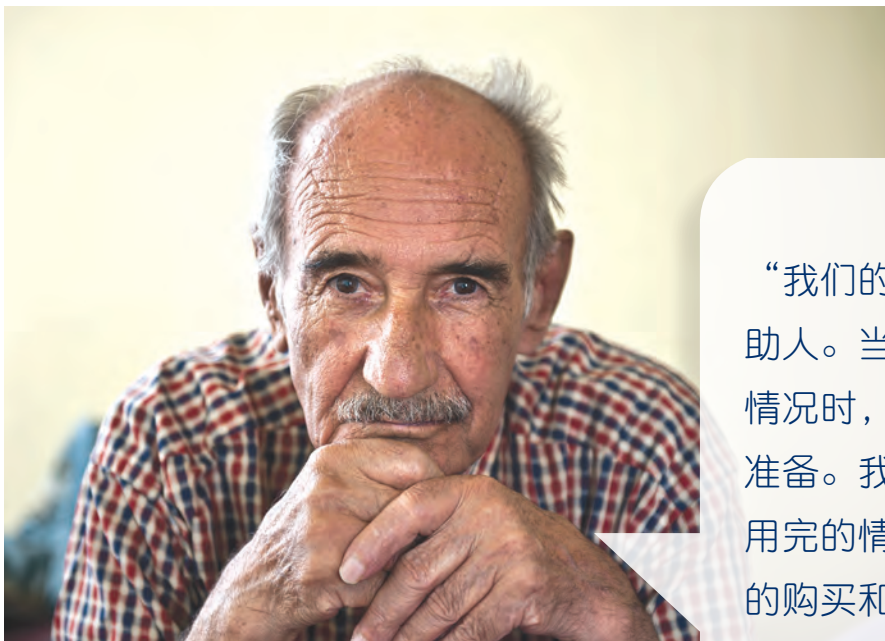
在一对一的教学课程中，您的护士会告知您确保家里有足够药物的最佳方法。



处方药可能需要几天（特别是在农村或偏远地区）才能送到药房。每天检查一下药量，让医生/执业-护士(nurse practitioner)和药剂师了解库存是否少了。

如果去药房有困难，请询问您的药剂师是否可以送药到家。

了解您的药房是否有下班后服务以及如何需要在需要时使用此服务。



“我们的药剂师非常乐于助人。当我告诉她我们的情况时，她做了很充分的准备。我们从未出现药物用完的情况。但管理药物的购买和领取是有点令人感到有压力的，所以我的儿子帮了忙。他去取药，这样我就可以和妻子待在家里了。”



Safely storing and disposing of subcutaneous medicines



Medicines need to be stored safely and disposed of safely.



Your nurse will advise you on safely storing and disposing of subcutaneous medicines.



Storage of medicine

- Keep all medicines out of view and reach of children
- Store all medicine ampoules in a secure container
- Store labelled, filled syringes in a secure container in your fridge
- Store the sharps container out of reach of children

Disposal of unused medicine

- Return all unused medicines to your local chemist as soon as possible


If you are unsure or concerned, contact your nurse or doctor/nurse practitioner for further advice.




“We took our left-over medicines to our pharmacist. He was really helpful.”



安全储存和处置皮下注射药物

 药品需要安全存放并安全处置。

 您的护士会提供安全存放和处置皮下注射药物的建议。

储存药物

- 让所有药物远离儿童的视线和范围
- 将所有药物药瓶存放在安全的容器中
- 将贴有标签的充药注射筒存放在冰箱中的安全容器中
- 将锐器容器存放在儿童接触不到的地方

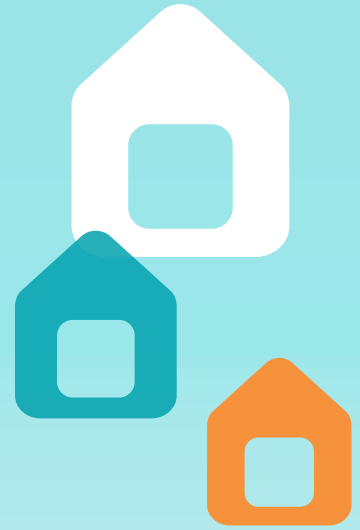
处置未使用的药物

- 尽快将所有未使用的药物退还给当地的药房

如果您不确定或担心，请联系您的护士或医生/执业-护士 (nurse practitioner) 以获得进一步的建议。



“我们把剩下的药物带回去给了我们的药剂师。他很乐意助人。”



Extra information



"I liked all the extra information. But I'm one of those people who likes to read."



额外的资讯



“我喜欢所有额外的资讯。
我是一个喜欢阅读的人。”

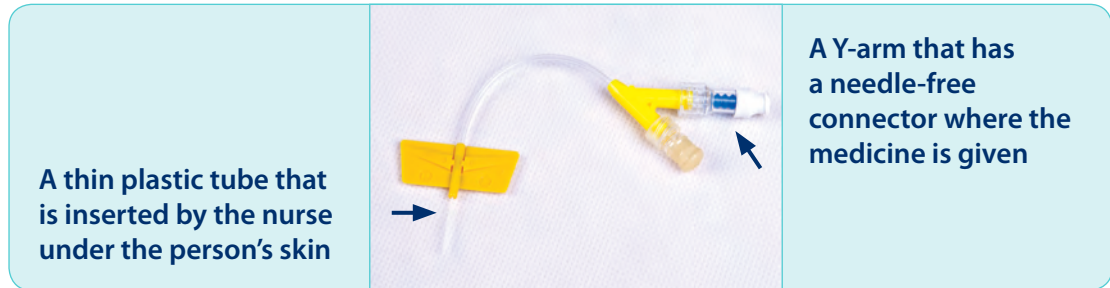


The subcutaneous cannula

What is a subcutaneous cannula?

A subcutaneous cannula is a device that allows medicines to be given under the skin avoiding the need for lots of needles that can be painful. The medicines are then absorbed into the body via the small blood vessels in the fatty layer of the skin.

Each cannula has two ends, as shown in the picture.



Your health care team may use a different subcutaneous cannula to the one shown here.

Why is a subcutaneous cannula used?

A subcutaneous cannula is a safe and effective way of delivering medicines in certain situations. For instance, if the:

- Person is having trouble swallowing oral medicines
- Person is vomiting frequently
- Doctor/nurse practitioner thinks that medicines taken by mouth are not being absorbed properly
- Doctor/nurse practitioner thinks that subcutaneous medicines will be more effective or efficient than oral ones

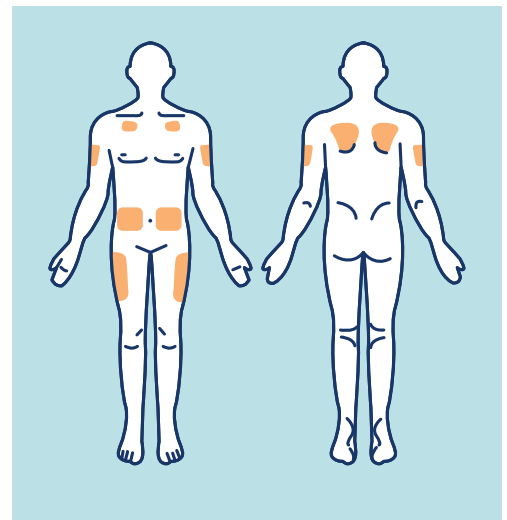
Where is a subcutaneous cannula inserted?

The common sites for subcutaneous cannula insertion are shown in the image.

When will the subcutaneous cannula need to be replaced?

The nurse may change the subcutaneous cannula if:

- It is hard to push the medicine into the cannula
- The medicine leaks out of the insertion site
- The site is red and inflamed
- There is ongoing pain or discomfort when the medicine is given
- It is due for a scheduled change according to the regular practice of the health care team



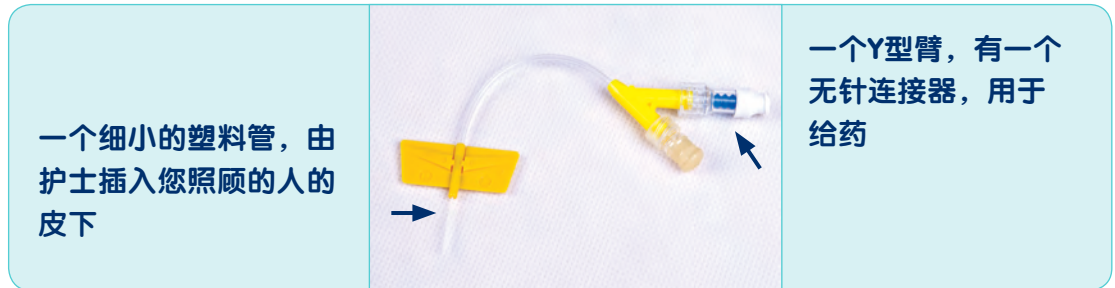


皮下插管

什么是皮下插管？

皮下插管是一种允许在皮肤下给药的装置，避免令人受到需要多次打针注射的痛苦。然后药物会透过皮肤脂肪层中的小血管被吸收到体内。

每个插管有两个端部，如图所示。



您的医疗团队可能会使用与此处所示不同的皮下插管。

为什么使用皮下插管？

在某些情况下，皮下插管是一种安全有效的给药方式。例如，如果：

- 病人吞咽口服药物有困难
- 病人经常呕吐
- 医生/执业-护士(nurse practitioner)认为口服药物没有被正确吸收
- 医生/执业-护士(nurse practitioner)认为皮下用药比口服药物更有效

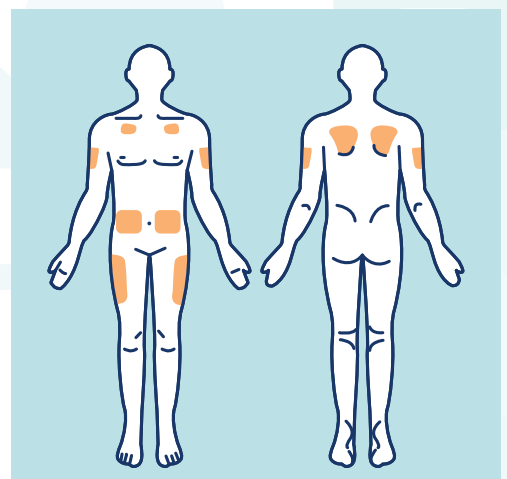
皮下插管插在哪里？

图中显示了皮下插管插入的常见部位。

什么时候需要更换皮下插管？

如果出现以下情况，护士可能会更换皮下插管：


- 很难将药物推入插管
- 药物从插入部位漏出
- 插入点发红和发炎
- 给药时会有持续疼痛或不适
- 根据医疗团队的常规做法，是到换插管的时候了



More about common breakthrough symptoms



It usually takes adjustments to get the right type and dose of medicine to treat a particular symptom.

Symptom	About the symptom	How can I help?
Pain	<p>Pain is a complex personal sensation. It is as intense as the person says it is.</p> <p>Pain may occur in more than one location.</p> <p>Pain may be described differently depending on its location:</p> <ul style="list-style-type: none"> – Soft tissue, organ, and abdominal pain is often described as deep or cramping. – Muscle or bone pain is often described as aching or throbbing. – Nerve pain is often described as burning, tingling, shooting, stabbing, or as a numbed sensation. 	<ul style="list-style-type: none"> • Some tips to help manage pain: <ul style="list-style-type: none"> – Discuss non-medicine possibilities with your health care team because there are many things, apart from medicines, that may help to relieve pain – If pain is worse when the person has to be moved, it is best to give pain medicine about 20-30 minutes before any necessary movement e.g. before bathing • Give subcutaneous medicine as per the doctor's/nurse practitioner's order(s)
Shortness of breath	<p>Shortness of breath or breathlessness is an awareness of uncomfortable breathing.</p> <p>Shortness of breath may be due to the person's disease process, anxiety, or a combination of both. It can be very distressing for the person experiencing it, as well as for yourself to see that distress.</p>	<ul style="list-style-type: none"> • Some tips to help manage shortness of breath: <ul style="list-style-type: none"> – Stay with the person, if possible – Use a fan to circulate air around the person's face – Open a window to enable air flow in the room – Suggest relaxation or breathing techniques, if appropriate – Play music that you know the person finds relaxing – Help the person into a more comfortable position e.g. sitting position, supported by pillows • Give subcutaneous medicine as per the doctor's/nurse practitioner's order(s)
Noisy 'rattly' breathing	<p>A person's ability to cough, swallow, and clear secretions is limited at the end of life and noisy or 'rattly' breathing can result from these secretions pooling in the airways.</p> <p>The person who is being cared for is unlikely to be aware of, or distressed by, this noise when it occurs at the end of life. However, often carers can be quite distressed when they hear the sound, fearing that it must be uncomfortable for the person experiencing it.</p>	<ul style="list-style-type: none"> • A tip to help manage noisy 'rattly' breathing: <ul style="list-style-type: none"> – Reposition the person onto their side with their head slightly raised and well supported by pillows • Give subcutaneous medicine as per the doctor's/nurse practitioner's order(s) <p> <i>It is recommended to give subcutaneous medicine as soon as the noisy breathing is noticed.</i></p>

关于常见突破症症状的更多资讯



通常需要进行调整，以达到使用正确的药物类型和剂量来治疗特定症状。

症状	关于症状	我该怎么帮忙?
疼痛	<p>疼痛是一种复杂的个人感受。它的强度如同您照顾的人所述。</p> <p>疼痛可能发生在多个地方。</p> <p>疼痛可能会根据其位置不同而有不同的描述：</p> <ul style="list-style-type: none">- 软组织、器官和腹痛通常被描述为深痛或痉挛痛。- 肌肉或骨骼疼痛通常被描述为酸痛或悸痛。- 神经疼痛通常被描述为灼热、刺痛、断续痛、刺痛或一种麻木感。	<ul style="list-style-type: none">• 一些帮助管控疼痛的建议：<ul style="list-style-type: none">- 与您的医疗团队讨论非药物的可能性，因为除了药物之外，还有许多可能有助于缓解疼痛的方法- 如果在必须移动患者时疼痛会加剧，最好在任何必要的移动前约20-30分钟给予止痛药，例如洗澡前• 根据医生/执业-护士(nurse practitioner)的指示给予皮下注射药物
呼吸急促	<p>呼吸短促或呼吸困难是一种呼吸不舒服的意识。</p> <p>呼吸短促可能是由于人的疾病过程、焦虑或两者的结合。对于呼吸短促的人来说，这可能是非常痛苦的。看着您照顾的人痛苦，您也会感到痛苦。</p>	<ul style="list-style-type: none">• 一些有助于管控呼吸短促的提示：<ul style="list-style-type: none">- 如果可能的话，留在您照顾的人身边- 用风扇让空气在人的脸上循环- 打开一扇窗户，让房间内有空气流通- 如果合适，建议采用放松或呼吸技巧- 播放您知道能令您照顾的人放松的音乐- 帮助您照顾的人移到更舒适的位置，例如坐姿、用枕头支撑• 根据医生/执业-护士(nurse practitioner)的指示给予皮下注射药物
呼吸“咯咯”作响	<p>您照顾的人咳嗽、吞咽和清除分泌物的能力在生命末期时是有限的，并且这些分泌物汇集在呼吸道中可能导致有闹声的呼吸或呼吸“咯咯”作响。</p> <p>受到照顾的人在生命末期时不太可能意识到这种噪音，或因其感到痛苦。然而，当照顾者听到这种声音时，他们常常会非常痛苦，因为他们担心这种声音代表发出声音的人一定很不舒服。</p>	<ul style="list-style-type: none">• 帮助管控“格格作响”呼吸的一个建议：<ul style="list-style-type: none">- 让您照顾的人侧睡，头部略微抬起，枕头很好地支撑着• 根据医生/执业-护士(nurse practitioner)的指示给予皮下注射药物✱ 一旦注意到有闹声的呼吸，建议立即给予皮下注射药物。

Symptom	About the symptom	How can I help?
Nausea and/or vomiting	<p>Nausea and/or vomiting can be caused by many disease processes and can also be a side effect of medicines.</p> <p>Nausea may be experienced with or without vomiting. Vomiting may occur with or without nausea.</p>	<ul style="list-style-type: none"> • Some tips to help manage nausea and/or vomiting: <ul style="list-style-type: none"> – Open a window or use a fan to help the person get fresh air – Apply a cool face-washer or compress to the forehead or back of the neck – Keep the person’s mouth clean • Give subcutaneous medicine as per the doctor’s/nurse practitioner’s order(s)
Restlessness/ agitation	<p>Restlessness or agitation is common as the end of life approaches. The causes are not well understood medically.</p>	<ul style="list-style-type: none"> • Some tips to help manage restlessness/ agitation: <ul style="list-style-type: none"> – Try to establish a quiet environment without too much stimulation – Being present with the person may offer them reassurance – Speak in a calm, quiet voice – Lightly massage the person’s hand or forehead – Play music that you know calms them – Notice if the person has pain and if so consider if this needs treatment – Notice if the person is having trouble urinating and if so contact the health care team • Give subcutaneous medicine as per the doctor’s/nurse practitioner’s order(s)
Anxiety	<p>People who are nearing the end of their life may experience anxiety. The causes for anxiety might be physical, emotional, spiritual, or a combination.</p> <p>Anxiety can increase other symptoms such as pain, nausea, and breathlessness. It may also cause sleep disturbance.</p>	<ul style="list-style-type: none"> • Some tips to help manage anxiety: <ul style="list-style-type: none"> – Being present with the person – Reassure the person that they are safe – Distract them, if appropriate • Give subcutaneous medicine as per the doctor’s/nurse practitioner’s order(s)
Muddled thinking or new confusion	<p>New or worsening behaviours, not usual in the person, may be noticed:</p> <ul style="list-style-type: none"> – Inability to concentrate – Confused conversation e.g. rambling, nonsensical, unconnected speech – Talking to people who are not there – Plucking at the air or the bed clothes <p>The person may appear anxious, restless or agitated, or behave in a way that is out of character.</p>	<ul style="list-style-type: none"> • A tip to help manage muddled thinking/ new confusion: <ul style="list-style-type: none"> – Try to establish a quiet environment without too much stimulation • Give subcutaneous medicine as per the doctor’s/nurse practitioner’s order(s)

症状	关于症状	我该怎么帮忙?
恶心和/或呕吐	<p>恶心和/或呕吐可由许多疾病过程引起，也可能是药物的副作用。</p> <p>恶心可伴有呕吐或没有呕吐。</p> <p>呕吐可伴有恶心或没有恶心。</p>	<ul style="list-style-type: none"> • 帮助管控恶心和/或呕吐的一些提示： <ul style="list-style-type: none"> - 打开窗户或使用风扇帮助您照顾的人呼吸新鲜空气 - 涂抹凉爽的洗面奶或挤压前额或颈部后 - 保持您照顾的人的口腔清洁 • 根据医生/执业-护士(nurse practitioner)的指示给予皮下注射药物
烦躁/躁动不安	<p>随着生命终结的临近，烦躁/躁动不安是常见的。原因在医学上尚不清楚。</p>	<ul style="list-style-type: none"> • 帮助管控烦躁/躁动不安的一些提示： <ul style="list-style-type: none"> - 设法建立一个没有太多刺激的安静环境 - 与您照顾的人在一起可能会让他们放心 - 以平静、安静的声音说话 - 轻轻按摩您照顾的人的手或额头 - 播放熟悉的音乐让您照顾的人平静下来 - 请注意您照顾的人是否有疼痛，如果是这样，请考虑是否需要治疗 - 请注意您照顾的人排尿是否有问题，如果有，请联系医疗团队 • 根据医生/执业-护士 (nurse practitioner) 的指示给予皮下注射药物
焦虑	<p>即将结束生命的人可能会感到焦虑。焦虑的原因可能是身体、情感或灵性上的因素，或者以上几种因素同时存在。</p> <p>焦虑可以增加其他症状，如疼痛、恶心和呼吸困难。它也可能导致睡眠障碍。</p>	<ul style="list-style-type: none"> • 帮助管控焦虑的一些建议： <ul style="list-style-type: none"> - 和跟您照顾的人待在一起 - 向跟您照顾的人保证他们是安全的 - 在适当的情况下，分散您照顾的人的注意力 • 根据医生/执业-护士(nurse practitioner)的指示给予皮下注射药物
思维混乱或新的意识混乱	<p>您可能会注意到，您照顾的人有新的或恶化的不寻常行为：</p> <ul style="list-style-type: none"> - 无法集中注意力 - 混乱的对话，例如说话漫无边际、无意义、无关联 - 与不在场的人交谈 - 手舞足蹈或抓床上用品 <p>您照顾的人可能表现出焦虑、烦躁或躁动不安，或行为不合其本来个性。</p>	<ul style="list-style-type: none"> • 帮助管控思维混乱/新的意识混乱的一个建议： <ul style="list-style-type: none"> - 设法建立一个没有太多刺激的安静环境 • 根据医生/执业-护士(nurse practitioner)的指示给予皮下注射药物



Common subcutaneous medicines and frequent side effects

Medicines may cause side effects as well as the desired benefits for which they have been prescribed. Not everyone taking a medicine will experience side effects. It is difficult to predict who will experience side effects or which ones.

The table below lists eight common subcutaneous medicines* used in the last weeks of life and their most frequent side effects.

There are many ways to treat side effects including changing the medicines, if necessary.

If you have any concerns about medicines or distressing side effects, contact the appropriate person in your health care team.

Name of medicine	Frequent side effects
Fentanyl Hydromorphone Morphine	Constipation, nausea and vomiting, dry mouth, itchy skin, decreased breathing rate, drowsiness, small muscle jerks
Clonazepam Midazolam	Drowsiness, dizziness, light-headedness, memory loss, shaky and unsteady movements, slurred speech, blurred vision, increased saliva
Hyoscine butylbromide	Dry mouth, difficulty breathing
Haloperidol	Sedation, blurred vision, repetitive movements of the face or limbs, restlessness
Metoclopramide	Restlessness, drowsiness, dizziness, headache

* These eight medicines are endorsed by the Australian and New Zealand Society of Palliative Medicine for use in community-based palliative care patients to manage symptoms at the end of life. The person's doctor/nurse practitioner may have prescribed other appropriate medicines, but not all can be listed here.



常见的皮下注射药物和经常发生的副作用

药物给予治疗益处的同时，也可能产生副作用。不是每个人使用药物就会产生副作用。很难预测谁会发生副作用或有哪些副作用。

下表列出了在生命最后几周常使用的八种皮下注射药物*及其常见的副作用。

有许多方法可以治疗副作用，包括在必要的时候改变药物。

如果您对药物或令人不舒服的副作用有任何疑问，请联络您医疗团队中的相应人员。

药品名称	经常出现的副作用
Fentanyl Hydromorphone Morphine	便秘、恶心和呕吐、口乾、皮肤瘙痒、呼吸频率降低、嗜睡、小肌肉抽搐
Clonazepam Midazolam	嗜睡、头昏、头晕、记忆力减退、动作不稳、言语含糊、视力模糊、唾液增多
Hyoscine butylbromide	口乾、呼吸困难
Haloperidol	昏沉、视力模糊、面部或四肢反覆的动、烦躁不安
Metoclopramide	烦躁不安、嗜睡、头昏、头痛

*这八种药物得到澳大利亚和新西兰姑息治疗学会的认可，用于社区姑息治疗的病人，以便管控生命末期时的症状。病人的医生/执业-护士 *nurse practitioner* 可能已开出其他适当的药物，但并非所有药物都列在此处。



Notes 备注

A series of horizontal dotted lines for writing notes, spanning the width of the page.

