

Missed Doses of Medication in Care Homes

This guidance is to help care homes consider actions to be taken when a dose of medication is missed. It does not cover residents who vomit shortly after taking it.

Occasionally medication may not be taken at the normal, prescribed time. This can cause problems. Missing a dose may make the medicine less effective, however taking subsequent doses too close together increases the risk of side effects.

Missed doses can occur when the resident:

- Has forgotten to take or be given medication.
- Is away from the care home at the medication time, e.g. appointment.
- Was asleep at the time the medication was due.

At no point should a missed dose of medication be doubled at the next medication time - this could be harmful.

Action to take following a missed dose

- Refer to the Patient Information Leaflet (PIL) supplied with the medication. Any PIL can be downloaded from <http://www.medicines.org.uk/EMC/>.
- It is usually acceptable for most oral medicines to be taken up to 2 hours late. At this point it is more important to take the dose than adhere to warnings e.g. before or after meals.
- Medicines where doses are prescribed as 12-24 hours apart (once or twice daily) - usually take the dose as soon as remembered as long as the next dose is not due within a few hours. Then continue as normal. The definition of a "few hours" will vary with each situation. Seek further advice if you're not sure what this means in the situation you are dealing with.
- Medicines where doses are taken 4-8 hourly (three or four times daily) - it is usually advised to omit the missed dose, wait until the next dose is due, then continue as normal e.g. this advice would apply to an antibiotic or painkiller taken four times per day.
- If you do not have the information you need and you are in doubt always contact the GP or pharmacist for advice, particularly if more than one day of treatment has been missed. Record any advice you are given.
- Record on the MAR chart the medicine missed and the reason. If it was given at a different time ensure this is clearly documented.



Think Medicines!

Care Homes

Each individual case and the reason for the missed dose should be reviewed.

If the residents routine leads to frequently missed doses e.g. asleep prior to night time medicines administration, regular unplanned visits, ask the GP to review the medication.

Guidance for missed doses of specific medication

Epilepsy medicines - It is important for anticonvulsant medicines to be taken regularly. Missing a dose could trigger a convulsion. **Please seek advice from the prescriber as individual drugs and the clinical circumstances of the patient will influence the advice provided. Residents who miss doses should avoid activities where having a convulsion could be dangerous.**

Warfarin - should be taken at the same time each day, usually in the evening. If a dose is missed and can be taken within three hours, it should be taken. If more than three hours has elapsed, the dose should not be taken. Subsequent doses should be taken at the usual time. If a dose is not taken, make a note in the warfarin booklet (yellow book) and remember to tell the GP/nurse at the next blood test appointment. If in doubt contact the GP for advice on any increased monitoring requirements.

Insulin - seek advice from the resident's GP or diabetes nurse .

Methotrexate once weekly - If a dose is missed, it can be taken as soon as it is remembered, if this is within two days. However, if the dose has been missed for more than two days then seek the GP's advice. Methotrexate should not be taken on the same day as folic acid. Ensure that blood tests are up to date. More information can be found in the Shared Care Guidelines at <http://www.cambsphn.nhs.uk/CJPG/SharedCareGuidance.aspx>.

Immune therapy and cancer drugs - You should seek the advice of a GP in respect of a missed dose of transplant rejection or cancer medicine.

Refused medicines:

Encourage residents to take their medicines without forcing them. Offer the medicines again at the end of the drug round in case they have changed their mind. Other factors may attribute to refusal e.g. swallowing difficulties, fears and anxieties. **Alternative forms may be available for residents with an inability to swallow a solid dose - seek advice from the pharmacist or GP.**

Always record refusals on the MAR chart and give a reason. Inform the GP in a timely manner. For critical medicines e.g. anti-epileptics contact the GP after the first missed dose. Record any advice you are given.

