

## NURSE/MIDWIFE INITIATED MEDICINE PROTOCOL

# Zinc oxide based products for haemorrhoids, anal SESLHDPR/478 pruritus or fissure in adults (Anusol®/Hemocane®/Rectinol®)

## **POLICY STATEMENT**

The Registered Nurse (RN) / Registered Midwife (RM) is authorised to instigate nurse/midwife initiated medication without an authorised prescriber's order under the specific circumstances set out in the **INDICATIONS** section and provided there are no contraindications present.

It is important for nursing and midwifery staff to remain aware that:

- Minor ailments may be symptoms of other more serious diseases or may be adverse reactions to medication already prescribed
- Nurse-initiated medication may interact with the patient's prescribed medication
- The maximum daily recommended dose of the medication must not be exceeded.1

The administering nurse/midwife must record the administration on an approved paper or electronic medication chart, clearly indicating that the medicine was nurse initiated.

If the patient continues to require the medication (i.e. more than two doses in 24 hours) then a medical officer (MO) must be consulted and a regular or PRN order obtained.

A change in the patient's condition such as newly occurring or increasing severity of symptoms must be reported to the MO and investigated.

## **INDICATIONS**

Symptomatic relief of pain and/or itching associated with haemorrhoids, anal pruritus or fissure in adult patients.

#### CONTRAINDICATIONS

- Bleeding
- Broken skin
- Hypersensitivity to local anaesthetics or other ingredients

## **PRECAUTIONS**

- Some products contain local anaesthetic
- Pregnancy or breastfeeding -safe to use

## HISTORY/ASSESSMENT

Assess for bleeding or skin irritation - seek medical advice if present.

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## PROTOCOL/ADMINISTRATION GUIDELINES

Caution: CHECK for allergies and/or contraindications				
Drug	Dose	Route	Frequency	
Zinc oxide +/- local anaesthetic contained in Anusol® or Hemocane® or Rectinol®	Apply rectal ointment to affected area	Topical	Up to twice	
	OR			
	ONE suppository	Rectal	Once	

Using PPE, apply after a bowel motion.

Ensure outside wrap is removed from suppository prior to use and insert slowly apex first.

## **MONITORING - POTENTIAL ADVERSE EFFECTS/INTERACTIONS**

Monitor skin integrity and for any sign of bleeding. Local anaesthetic content may sensitise the perianal skin.

#### **DOCUMENTATION**

A record of the administration must be made on the approved paper or electronic medication chart noting that the medication was nurse initiated.

A further record of the medication administered including indication, dose and effect must be included in the patient's health care record.

## PRACTICE POINTS

- Onset of action is 5 to 10 minutes
- Avoid constipation and prolonged straining
- Increase fibre and fluid intake
- Reduce irritation by keeping area clean and dry
- Avoid irritants such as heat, moisture, stress or local irritants (e.g. faeces, sweat, soap, perfumes, topical products, rough toilet paper and nylon clothing)
- Dietary alteration may be useful if itching is related to certain foods or drinks. Consider dietitian review if appropriate
- Simple emollients such as sorbolene cream applied after cleansing may help
- Use warm salt baths after bowel movements if possible

## REFERENCES/FURTHER READING

- 1. PD2013 043 Medication Handling in NSW Public Health Facilities
- 2. Australian Medicines Handbook. South Australia: Australian Medicines Handbook Pty Ltd, 2018.

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# **REVISION and APPROVAL HISTORY**

Date	<b>Revision Number</b>	Author and Approval
July 2015	DRAFT	Pharmacy Department, The Sutherland Hospital
September 2015	1	Approved by SESLHD Drug & QUM Committee
May 2018	DRAFT 2	Reviewed by nursing and pharmacy staff. Minor
		wording updates made. References updated.
July 2018	2	Approved by SESLHD Quality Use of Medicines
		Committee
August 2021	DRAFT 3	Reviewed by nursing and pharmacy staff. No
		changes required.
September 2021	3	Approved by SESLHD Quality Use of Medicines
		Committee

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