

**Homely Remedies Protocol  
Version 4.0  
For Care Homes with and without nursing**

Name of Care Home:	
Signature of Care Home Manager:	
Date implemented:	

**Definition:**

A homely remedy is a product that can be purchased, without a prescription, for the immediate relief of a minor, self-limiting ailment.

**Aim:**

The purpose of this protocol is to facilitate access to various ‘over the counter medications’ and dressings without a prescription so that it is similar to a patient being in their own home.

The medications listed below are for the treatment or symptom management of common minor ailments.

The wound care products listed below should be used to safely cover the wound as a first aid measure. The dressing is for the temporary treatment of newly found minor wounds such as cuts or scratches that break the skin.

**Medications:**

It is recommended that the following items are purchased for appropriate use in response to symptoms of a minor nature and **not routinely requested on prescription**.

<b>Name of medicine</b>	<b>Indication for its use as a homely remedy</b>
1. Paracetamol 500mg tablets	For relief of occasional mild to moderate pain or high temperature
2. Paracetamol 250mg/5ml suspension	For relief of occasional mild to moderate pain or high temperature
3. Maalox suspension	For relief of dyspepsia
4. Senna 7.5mg tablets	For relief of constipation
5. Senna 7.5mg/5ml liquid	For relief of constipation
6. Bisacodyl 5mg tablets	For relief of constipation
7. Loperamide 2mg capsules	For relief of acute onset diarrhoea
8. Oral rehydration sachets	To replace fluids in diarrhoea/vomiting
9. Simple linctus	For patients needing something to soothe a dry irritating cough
10. Cetirizine 10mg tablets	For relief of allergy
11. Cetirizine 5mg/5ml liquid	For relief of allergy

## Wound Care Products:

It is recommended that the following items are purchased for newly found minor wounds such as cuts or scratches that break the skin and are not routinely requested on prescription.

Wound care product	Size	Indication for its use as a homely remedy
12. Irripod sterile pod	20ml	<ul style="list-style-type: none"><li>To clean a minor wound such as a cut or scratch that breaks the skin</li></ul>
13. Non woven sterile swab	7.5cm x 7.5cm	<ul style="list-style-type: none"><li>To clean and dry a minor wound such as a cut or scratch that breaks the skin</li><li>Do not use as a dressing</li></ul>
14. Cosmopor E	5 x 7.2cm 8xm x 10cm	<ul style="list-style-type: none"><li>To cover minor wounds such as cuts or scratches that break the skin without the need for additional tape or bandages</li></ul>

Only those ailments/wounds specified in the homely remedy protocol may be treated and the specified products and doses/sizes must be used. The maximum duration of treatment should not exceed that specified for each particular medication/dressing without obtaining medical advice.

If the symptoms persist, or give cause for concern, medical advice should be obtained in case they are masking other more serious underlying conditions. Further information on homely remedy ailments included in this protocol is detailed below.

### Administration

Administration must only be undertaken by staff that have undertaken the appropriate medication training and signed the relevant form stating that they have read and understood each homely remedy protocol (Appendix 1).

Remedies must not be labeled for individuals if they are to be administered to several service users.

The patient's symptoms should be assessed regularly to determine whether the medicine is still required before giving further doses.

Care must be taken to ensure that any homely remedies given are not contra-indicated and do not interact with the resident's prescribed medication. If there is any doubt about the suitability of the medication, then the care staff must contact the community pharmacist responsible for the home's medicine supply.

### Storage of Homely Remedies

A locked medicine cupboard or trolley is required for the storage of all homely remedies. They should be separated from all prescribed medicines and clearly marked as homely remedies.

### Recording of Homely Remedies

It is essential that all medicines and dressings used are recorded to maintain accurate records and avoid possible overdosing.

Administration of such remedies must be recorded on the appropriate resident's Medication Administration Record (MAR) sheet. The reason for administration should also be recorded on the MAR chart. An appropriate record should also be made in the resident's care plan.

## Checking Stock

When a dose of a homely remedy/dressing is given to a patient it must be logged out of the stock sheet (Appendix 2) and a running balance maintained so a clear audit trail of these items can be maintained. Stock should be counted every week to maintain an audit trail of usage and to check expiry dates.

## Expiry Dates

The expiry dates of all homely remedies/dressings must be checked regularly (at least every 6 months). All liquids and suspensions for internal use should have the date of opening recorded on the bottle. They should be discarded no longer than 6 months after this date. Individual preparations may specify a shorter expiry.

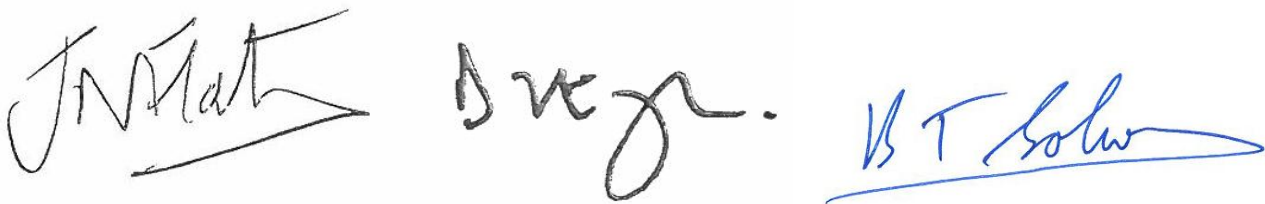
## Approved Homely remedies

This protocol has been reviewed and approved by Ipswich and East Suffolk prescribing leads; Dr Flather, Dr Solway and Dr Egan, for indications listed within this protocol. This approval does not remove the requirement that staff involved in the distribution and administration of homely remedies, must ensure that the medicine administered is suitable for resident's particular circumstances (including medicine interactions and co-existing disease states) at the time of administration.

Name of home:.....

Signature of Care Home Manager:.....

Signature of I&ESCCG GP prescribing leads:

The image shows three handwritten signatures in black ink. From left to right: the first signature is 'J Flather', the second is 'D Egan', and the third is 'B T Solway'. Each signature is written in a cursive, flowing style.

# 1. Paracetamol 500mg tablets

<b>Indication for use:</b>	For relief of occasional mild to moderate pain or fever
<b>Drug:</b>	<b>PARACETAMOL tablets</b>
<b>Strength:</b>	<b>500mg</b>
<b>Dose:</b>	ONE or TWO tablets every four to six hours up to FOUR times a day
<b>Maximum dose in 24 hours:</b>	EIGHT tablets/capsules/caplets (4g) in four divided doses (Maximum of two tablets (1g) in any four hours)
<b>Maximum duration of treatment:</b>	Up to 72 hours then seek (and document) advice of GP
<b>Exclusions:</b>	<ul style="list-style-type: none"><li>• Under 18yrs</li><li>• Resident is already taking a paracetamol containing product for example; co-codamol, co-dydramol and some cough and cold preparations</li><li>• History of liver disease or alcohol abuse</li><li>• Hypersensitivity to paracetamol or any of the ingredients</li></ul>
<b>Action if resident excluded:</b>	Refer to GP as appropriate
<b>Cautions:</b>	If body weight is <39kgs consider reducing the dose to one tablet up to four times a day <b>*Care of accidental overdose *</b> Many medicines, both prescribed and bought also contain paracetamol. Always refer to the patient information leaflet
<b>Additional information:</b>	Side effects are rare but may cause a rash

## 2. Paracetamol 250mg/5ml suspension

<b>Indication for use:</b>	For relief of occasional mild to moderate pain/fever
<b>Drug:</b>	<b>PARACETAMOL suspension</b>
<b>Strength:</b>	<b>250mg/5ml</b>
<b>Dose:</b>	TWO to FOUR 5ml spoonfuls every four to six hours up to FOUR times a day
<b>Maximum dose in 24 hours:</b>	SIXTEEN 5ml spoonfuls (80mls) in four divided doses (Maximum of four 5ml spoonfuls (1g) in any 4 hours)
<b>Maximum duration of treatment:</b>	Up to 72 hours then seek (and document) advice of GP
<b>Exclusions:</b>	<ul style="list-style-type: none"> <li>• Under 18yrs</li> <li>• Resident is already taking a paracetamol containing product for example; co-codamol, co-dydramol and some cough and cold preparations</li> <li>• History of liver disease or alcohol abuse</li> <li>• Hypersensitivity to paracetamol or any of the ingredients</li> </ul>
<b>Action if resident excluded:</b>	<ul style="list-style-type: none"> <li>• Refer to GP as appropriate</li> </ul>
<b>Cautions:</b>	<ul style="list-style-type: none"> <li>• If body weight is &lt;39kgs consider reducing the dose and giving two 5ml spoonfuls up to four times a day</li> <li>• <b>*Care of accidental overdose*</b> Many medicines, both prescribed and bought, also contain paracetamol.</li> </ul> <p>Always refer to the patient information leaflet</p>
<b>Additional information:</b>	Side effects are rare but may cause a rash

### 3. Maalox suspension

<b>Indication for use:</b>	For relief of dyspepsia (heartburn) /indigestion
<b>Drug:</b>	<b>Maalox (magnesium hydroxide/aluminium hydroxide)(low Na+)</b>
<b>Strength:</b>	<b>Magnesium hydroxide 195mg, dried aluminium hydroxide 220mg/5ml</b>
<b>Dose:</b>	TWO to FOUR 5ml spoonfuls 20 minutes to an hour after meals and at bedtime or when required. Maalox may be taken with water or milk
<b>Maximum dose in 24 hours:</b>	SIXTEEN 5ml spoonfuls (80mls) in 24hrs
<b>Maximum duration of treatment:</b>	Up to 72 hours then seek (and document) advice of GP
<b>Exclusions:</b>	<ul style="list-style-type: none"> <li>• Under 14yrs</li> <li>• Maalox should not be used in residents who             <ul style="list-style-type: none"> <li>○ are severely debilitated</li> <li>○ are suffering from renal insufficiency or</li> <li>○ if there is severe abdominal pain and/or the possibility of bowel obstruction</li> </ul> </li> <li>• Patients with porphyria undergoing haemodialysis</li> <li>• Hypersensitivity to any ingredient in Maalox</li> </ul>
<b>Action if resident excluded:</b>	<ul style="list-style-type: none"> <li>• Refer to GP as appropriate</li> </ul>
<b>Cautions:</b>	<ul style="list-style-type: none"> <li>• Always refer to the patient information leaflet</li> <li>• Do not administer at the same time as other medicines as it may affect their absorption</li> </ul>
<b>Additional information:</b>	<ul style="list-style-type: none"> <li>• Gastrointestinal side effects are uncommon. However, occasional diarrhoea or constipation may occur if use is excessive.</li> <li>• Discard any medicine remaining 28 days after opening the bottle</li> </ul>

## 4. Senna 7.5mg tablets

<b>Indication for use:</b>	For relief of constipation
<b>Drug:</b>	<b>Senna tablets</b>
<b>Strength:</b>	<b>7.5mg</b>
<b>Dose:</b>	TWO tablets at night
<b>Maximum dose in 24 hours:</b>	TWO tablets in 24hrs
<b>Maximum duration of treatment:</b>	Up to 72 hours then seek (and document) advice of GP
<b>Exclusions:</b>	<ul style="list-style-type: none"><li>• Under 12yrs</li><li>• Hypersensitivity to any of the ingredients.</li><li>• Abdominal pain, intestinal obstruction or if nausea or vomiting is present.</li></ul>
<b>Action if resident excluded:</b>	<ul style="list-style-type: none"><li>• Refer to GP as appropriate</li></ul>
<b>Cautions:</b>	<ul style="list-style-type: none"><li>• Hypersensitivity to sennosides or any ingredient</li><li>• Always refer to the patient information leaflet</li></ul>
<b>Additional information:</b>	<ul style="list-style-type: none"><li>• Laxatives should not be taken where there is severe abdominal pain or used regularly for prolonged periods except on medical advice.</li><li>• Senna tablets will work in 8-12hrs.</li><li>• Resident should keep drinking plenty of fluids and increase fibre in diet</li><li>• Temporary mild griping may occur</li></ul>

## 5. Senna 7.5mg/5ml syrup

<b>Indication for use:</b>	For relief of constipation
<b>Drug:</b>	<b>Senna 7.5mg/5ml syrup</b>
<b>Strength:</b>	<b>7.5mg/5ml</b>
<b>Dose:</b>	TWO 5ml spoonfuls at night
<b>Maximum dose in 24 hours:</b>	TWO 5ml spoonfuls in 24hrs
<b>Maximum duration of treatment:</b>	Up to 72 hours then seek (and document) advice of GP
<b>Exclusions:</b>	<ul style="list-style-type: none"> <li>• Under 12yrs</li> <li>• Hypersensitivity to any of the ingredients.</li> <li>• Abdominal pain, intestinal obstruction or if nausea or vomiting is present.</li> </ul>
<b>Action if resident excluded:</b>	<ul style="list-style-type: none"> <li>• Refer to GP as appropriate</li> </ul>
<b>Cautions:</b>	<ul style="list-style-type: none"> <li>• Senna syrup should not be used for prolonged periods since it may decrease the sensitivity of the intestinal mucous membranes, so larger doses have to be taken and the bowel fails to respond to normal stimuli.</li> <li>• Hypersensitivity to sennosides or any ingredient</li> <li>• Always refer to the patient information leaflet</li> </ul>
<b>Additional information:</b>	<ul style="list-style-type: none"> <li>• Laxatives should not be taken where there is severe abdominal pain or used regularly for prolonged periods except on medical advice.</li> <li>• Senna syrup will take 8-12hrs for onset of action.</li> <li>• Temporary mild griping may occur</li> <li>• Keep drinking plenty of fluids and increase fibre in diet</li> </ul>



## 6. Bisacodyl tablets

<b>Indication for use:</b>	For relief of constipation
<b>Drug:</b>	<b>Bisacodyl Tablets</b>
<b>Strength:</b>	<b>5mg</b>
<b>Dose:</b>	ONE or TWO tablets at night
<b>Maximum dose in 24 hours:</b>	TWO tablets at night
<b>Maximum duration of treatment:</b>	Up to 72 hours then seek (and document) advice of GP
<b>Exclusions:</b>	<ul style="list-style-type: none"> <li>• Under 10 years</li> </ul> <p>Residents with</p> <ul style="list-style-type: none"> <li>• ileus,</li> <li>• intestinal obstruction,</li> <li>• acute abdominal conditions including appendicitis,</li> <li>• acute inflammatory bowel diseases,</li> <li>• severe abdominal pain associated with nausea and vomiting which may be indicative of the aforementioned severe conditions.</li> <li>• severe dehydration and in patients with known hypersensitivity to bisacodyl or any other component of the product.</li> </ul>
<b>Action if resident excluded:</b>	<ul style="list-style-type: none"> <li>• Refer to GP as appropriate</li> </ul>
<b>Cautions:</b>	<ul style="list-style-type: none"> <li>• Bisacodyl will take 6-12 hours to work</li> <li>• Always refer to the patient information leaflet</li> </ul>
<b>Additional information:</b>	<ul style="list-style-type: none"> <li>• Most commonly reported side effects are abdominal pain and cramps and diarrhoea</li> <li>• Keep drinking plenty of fluids and increase fibre in diet</li> </ul>

## 7. Loperamide 2mg capsules

<b>Indication for use:</b>	For relief of acute onset diarrhoea
<b>Drug:</b>	<b>Loperamide capsules</b>
<b>Strength:</b>	<b>2mg</b>
<b>Dose:</b>	TWO capsules (4 mg) initially followed by ONE capsule (2 mg) after every loose stool.
<b>Maximum dose in 24 hours:</b>	SIX capsules (12 mg) in any 24 hour period.
<b>Maximum duration of treatment:</b>	Up to 24 hours then seek (and document) advice of GP
<b>Exclusions:</b>	<ul style="list-style-type: none"> <li>• Under 18yrs</li> <li>• Residents with a known hypersensitivity to loperamide hydrochloride or to any of the ingredients</li> <li>• Residents who are lactose intolerant</li> <li>• Residents who have severe diarrhoea after taking antibiotics</li> <li>• In patients with acute dysentery which is characterised by blood in stools and high fever.</li> <li>• Residents with acute ulcerative colitis.</li> <li>• Residents who are constipated or whose stomach appears swollen</li> </ul>
<b>Action if resident excluded:</b>	<ul style="list-style-type: none"> <li>• Refer to GP as appropriate</li> </ul>
<b>Cautions:</b>	<ul style="list-style-type: none"> <li>• Residents may experience abdominal cramps, nausea, vomiting, tiredness, drowsiness, dizziness, dry mouth and skin reactions</li> <li>• Always refer to the patient information leaflet</li> </ul>
<b>Additional information:</b>	<ul style="list-style-type: none"> <li>• Drink plenty of fluids to maintain hydration – consider oral rehydration sachets</li> <li>• Ensure appropriate infection control procedures are followed to minimise risk of an infection spreading</li> </ul>

## 8. Oral rehydration sachets

<b>Indication for use:</b>	Diarrhoea/Vomiting
<b>Drug:</b>	<b>Oral rehydration sachets</b>
<b>Dose:</b>	<b>ONE or TWO sachets after every loose motion</b> (reconstituted according to manufacturer's instructions)
<b>Maximum dose in 24 hours:</b>	Sixteen sachets in 24hrs
<b>Maximum duration of treatment:</b>	Up to 24 hours then seek (and document) advice of GP
<b>Exclusions:</b>	<ul style="list-style-type: none"> <li>• Under 18yrs</li> <li>• Diarrhoea has lasted for more than 24 hours</li> <li>• Hypersensitivity to any of the ingredients</li> <li>• Severe dehydration – seek GP advice</li> <li>• Intestinal obstruction</li> <li>• Resident suffers from liver or kidney disease</li> <li>• Resident suffers from inflammatory bowel disease</li> <li>• Antibiotic-associated colitis</li> <li>• Bloody diarrhoea</li> </ul>
<b>Action if resident excluded:</b>	<ul style="list-style-type: none"> <li>• Refer to GP as appropriate</li> </ul>
<b>Cautions:</b>	<ul style="list-style-type: none"> <li>• Oral rehydration sachets should only be reconstituted in water</li> <li>• Always follow the manufacturer's guidance when preparing the sachets.</li> <li>• Always refer to the patient information leaflet</li> </ul>
<b>Additional information:</b>	<ul style="list-style-type: none"> <li>• The contents of each sachet should be dissolved in 200ml (approximately 7fl oz) of drinking water. Use fresh drinking water or where drinking water is unavailable, the water should be freshly boiled and cooled. The solution should be made up immediately before use and may be stored for up to 24 hours in a refrigerator otherwise any solution remaining an hour after reconstitution should be thrown away. The solution itself must not be boiled.</li> <li>• If vomiting is present then the solution should be given in small frequent sips.</li> <li>• Ensure appropriate infection control procedures are followed to minimise risk of an infection spreading.</li> </ul>

## 9. Simple linctus

<b>Indication for use:</b>	For patients needing something to soothe a dry irritating cough
<b>Drug:</b>	<b>Simple linctus</b>
<b>Dose:</b>	<b>ONE 5ml spoonful THREE or FOUR times a day</b>
<b>Maximum dose in 24 hours:</b>	FOUR 5ml spoonfuls (20mls)
<b>Maximum duration of treatment:</b>	Up to 72 hours then seek (and document) advice of GP
<b>Exclusions:</b>	<ul style="list-style-type: none"><li>• Under 12yrs</li></ul>
<b>Cautions:</b>	N/A
<b>Additional information:</b>	<ul style="list-style-type: none"><li>• Make sure the resident has access to plenty of fluids throughout the day</li></ul>

## 10. Cetirizine 10mg tablets

<b>Indication for use:</b>	For relief of allergy
<b>Drug:</b>	<b>Cetirizine tablets</b>
<b>Strength:</b>	<b>10mg</b>
<b>Dose:</b>	ONE tablet once a day
<b>Maximum dose in 24 hours:</b>	ONE tablet
<b>Maximum duration of treatment:</b>	Up to 72 hours then seek (and document) advice of GP
<b>Exclusions:</b>	<ul style="list-style-type: none"> <li>• Under 12yrs</li> <li>• Hypersensitivity to cetirizine or any other ingredients</li> <li>• Resident is allergic to other antihistamines</li> <li>• Resident has kidney failure</li> <li>• Resident has lactose intolerance</li> <li>• Resident has taken any antihistamine within the last 24 hours</li> </ul>
<b>Action if resident excluded:</b>	<ul style="list-style-type: none"> <li>• Refer to GP as appropriate</li> </ul>
<b>Cautions:</b>	<ul style="list-style-type: none"> <li>• Although cetirizine is not a “sedating” antihistamine it can still cause some degree of sedation so be aware of this with regard to the risk of falling</li> <li>• Resident has epilepsy or fits – talk to pharmacist or doctor</li> <li>• Always refer to the patient information leaflet</li> <li>• Resident should not drink alcohol whilst taking this medicine</li> </ul>
<b>Additional information:</b>	<ul style="list-style-type: none"> <li>• Cetirizine can occasionally cause drowsiness, headache, somnolence, dry mouth and throat, stomach upset, nausea, diarrhoea</li> <li>• Stop taking the medicine immediately if the resident has difficulty breathing, swelling of the face, lips, tongue or throat (severe allergic reaction)</li> </ul>

## 11. Cetirizine 5mg/5ml solution

<b>Indication for use:</b>	For relief of allergy
<b>Drug:</b>	<b>Cetirizine solution</b>
<b>Strength:</b>	<b>5mg/5ml</b>
<b>Dose:</b>	TWO 5ml spoonfuls (10mg) once a day
<b>Maximum dose in 24 hours:</b>	TWO 5ml spoonfuls (10mls)
<b>Maximum duration of treatment:</b>	Up to 72 hours then seek (and document) advice of GP
<b>Exclusions:</b>	<ul style="list-style-type: none"> <li>• Under 12yrs</li> <li>• Hypersensitivity to cetirizine or any other ingredients</li> <li>• Resident is allergic to other antihistamines</li> <li>• Resident has kidney failure</li> <li>• Resident has lactose intolerance</li> <li>• Resident has taken any antihistamine within the last 24 hours</li> </ul>
<b>Action if resident excluded:</b>	<ul style="list-style-type: none"> <li>• Refer to GP as appropriate</li> </ul>
<b>Cautions:</b>	<ul style="list-style-type: none"> <li>• Although cetirizine is not a “sedating” antihistamine it can still cause some degree of sedation so be aware of this with regard to the risk of falling</li> <li>• Resident has epilepsy or fits – talk to pharmacist or doctor</li> <li>• Resident should not drink alcohol whilst taking this medicine</li> <li>• Always refer to the patient information leaflet</li> </ul>
<b>Additional information:</b>	<ul style="list-style-type: none"> <li>• Cetirizine can occasionally cause drowsiness, headache, somnolence, dry mouth and throat, stomach upset, nausea, diarrhoea</li> <li>• Stop taking the medicine immediately if the resident has difficulty breathing, swelling of the face, lips, tongue or throat (severe allergic reaction)</li> </ul>

# Dressings and wound care products

In nursing homes the products listed below can be used to clean and cover the wound until an appropriate dressing from the Suffolk Wound Care Formulary is obtained on FP10 prescription.

- In residential homes the products listed below can be used to clean and cover the wound until a district nurse can attend to assess the wound. The District Nurse must be informed immediately if a resident develops a wound and should be requested to visit within 48 hours. This request should be recorded in the person's daily notes. In residential homes dressings should only be applied at the discretion of the senior person on duty.

Application of dressings:

- Follow the manufacturer's instructions as provided with dressings in the box.
  - Check that the dressing to be used is still in date
  - Wash and dry your hands and put on disposable gloves before attending to the wound.
  - The dressing pad should overlap the wound edge by a minimum of 1-2 centimetres. If the wound is too big to be covered safely by a 8cm x 10cm dressing:
    - Residential homes: contact district nurse immediately for advice
    - Nursing homes: request prescription from GP practice using the CCG dressings pro forma for appropriate dressing from wound care formulary
  - Remove the dressing carefully from the packaging. Remove the protective handles and ensure that the dressing is applied to the wound without touching the surface of the dressing that will be next to the wound.

**In residential homes, nursing or medical advice should be sought immediately if the wound is deep, bleeding heavily or too big to be safely covered by a 8cm x 10cm dressing.**

## 12. Irripod sterile pod

<b>Indication for use:</b>	To clean minor wounds such as cuts or scratches that break the skin
<b>Wound care product</b>	<b>Irripod 20ml sterile pod (normal saline)</b>
<b>Dose:</b>	Sufficient to clean the wound
<b>Maximum duration of treatment:</b>	Residential homes: Use once to clean the wound then contact district nurses. Nursing homes: Use as clinically appropriate.
<b>Exclusions:</b>	<ul style="list-style-type: none"> <li>• Large wound</li> <li>• Multiple wounds</li> <li>• Existing wounds already receiving treatment</li> <li>• Deep wounds</li> <li>• Heavily bleeding wounds</li> </ul>
<b>Action if resident excluded:</b>	Residential homes: Contact district nurses or GP practice immediately for advice Nursing homes: Review patient and request appropriate dressing from the wound care formulary; if wound severe seek medical advice
<b>Cautions:</b>	Take care to clean wound fully. If unable to clean the wound, or wound remains visibly contaminated, seek nursing or medical advice.
<b>Additional information:</b>	Once clean, dry the wound using a dry sterile non-woven gauze swab



## 13. Non woven sterile swab 7.5x7.5cm

<b>Indication for use:</b>	To clean and dry minor wounds such as cuts and scratches that break the skin
<b>Wound care product</b>	<b>Non woven sterile swab 7.5 x 7.5cm</b>
<b>Dose:</b>	Use sufficient swabs to clean the wound.
<b>Maximum duration of treatment:</b>	Use once to clean the wound then contact district nurses.
<b>Exclusions:</b>	<ul style="list-style-type: none"><li>• Large wound</li><li>• Multiple wounds</li><li>• Existing wounds already receiving treatment</li><li>• Deep wounds</li><li>• Heavily bleeding wounds</li></ul>
<b>Action if resident excluded:</b>	Residential homes: Contact district nurses or GP practice immediately for advice Nursing homes: Review patient and request appropriate dressing from the wound care formulary; if wound severe seek medical advice.
<b>Cautions:</b>	Do <b>not</b> use as a dressing to cover a wound
<b>Additional information:</b>	Dispose of any unused swabs from the pack of 5 after use – do not store for future use as they will no longer be sterile.

## 14. Cosmopor E

<b>Indication for use:</b>	To cover minor wounds such as cuts and scratches that break the skin
<b>Wound care product</b>	<b>Cosmopor E (adhesive dressing with absorbent pad)</b> Sizes available: 5cm x 7.2cm 8cm x 10cm
<b>Dose:</b>	One dressing to be applied to the wound, then contact the district nurses. Ensure the pad overlaps the wound edge by a minimum of 1-2 centimetres.
<b>Maximum duration of treatment:</b>	<b>Residential homes:</b> change dressing as advised by district nurses until a district nurse can attend the patient. Maximum duration without district nurse review 48 hours. <b>Nursing homes:</b> Change as dictated by the amount of exudate – avoid strikethrough. Use until suitable dressing from Suffolk wound care formulary can be obtained on prescription
<b>Exclusions:</b>	<ul style="list-style-type: none"> <li>• Large wound (cannot be covered by 8 x 10cm dressing)</li> <li>• Multiple wounds</li> <li>• Existing wounds already receiving treatment</li> <li>• Deep wounds</li> <li>• Heavily bleeding wounds</li> </ul>
<b>Action if resident excluded:</b>	<b>Residential homes:</b> contact district nurses or GP practice immediately for advice <b>Nursing homes:</b> review patient and request appropriate dressing from the wound care formulary; if wound severe seek medical advice.
<b>Cautions:</b>	
<b>Additional information:</b>	To remove dressing peel carefully from one corner.

## Appendix 1

### Authorisation to administer a medication or apply a dressing under the homely remedies protocol

Name of Home.....

The named staff in this home who have the authority to decide whether a resident is able to have a dose of a homely medication or have a homely dressing applied are (print name, sign and date below):

#### Part A

Print name	Signature	Date

Below are the staff members who have confirmed to say that they have read and understood the homely remedies protocol and are now able to administer a homely remedy in accordance with the protocol. Only the staff named in Part A, above, can decide if it is appropriate for patients to receive a homely remedy.

#### Part B

Print Name	Signature	Date

## Appendix 2

### Homely remedies stock audit sheet

Name of Medication/Dressing:..... Stock Audit Sheet

**Please note a weekly stock check must be performed for all medications**

Entry no.	Date	Time of administration	Quantity supplied	Resident's name	Initials	Balance
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