

Safeguarding users of opioid patches by standardising patient/caregiver counselling

This resource has been retired in June 2025

This resource has been retired and is no longer considered an AWMSG-endorsed resource.

The resource underwent an assessment for review in February 2025. At that time, members of the All Wales Prescribing Advisory Group (AWPAG) considered it appropriate to retire the resource.

The content contained within the resource was considered to be out of date and other suitable alternative guidance was available (e.g. [AWMSG All Wales Pharmacological Management of Pain Guidance \(AWMSG\)](#) and [Transdermal fentanyl patches for non-cancer pain \(MHRA\)](#)), AWPAG members considered it most appropriate for the resource to be retired at this time.

If you think this resource should be reconsidered for review, please get in touch with AWTTTC by emailing AWTTTC@wales.nhs.uk.

This document has been prepared by a multiprofessional collaborative group, based on original work prepared by Janet Thomas (Patient Safety Pharmacist, Wrexham Maelor Hospital), with support from the All Wales Prescribing Advisory Group (AWPAG) and the All Wales Therapeutics and Toxicology Centre (AWTTC). This document has subsequently been endorsed by the All Wales Medicines Strategy Group (AWMSG).

This resource has now been retired and is no longer considered an AWMSG endorsed resource.

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RETIRED

1.0 BACKGROUND

The aim of the counselling checklist is to assist healthcare professionals, working in community pharmacies, primary care and secondary care, in the essential counselling of patients on the safe and effective use of opioid patches. The inclusion of a checklist for patients/carers to refer to following counselling will also encourage the safe use of opioid patches.

Fentanyl patches are strong opioid analgesics indicated for chronic intractable pain. Buprenorphine patches are strong opioids indicated for moderate to severe chronic cancer pain and moderate to severe pain unresponsive to non-opioid analgesics¹. Fentanyl is a Schedule 2 Controlled Drug and buprenorphine is a Schedule 3 Controlled Drug².

In 2008, the National Patient Safety Agency published a Rapid Response Report, alerting all healthcare professionals to the risks of patients receiving unsafe doses of opioid medicines³. In 2014, the Medicines and Healthcare products Regulatory Agency (MHRA) highlighted the risk of inadvertent exposure to fentanyl patches⁴, emphasising the need for providing information to patients and caregivers regarding the safe handling of patches. The MHRA had also previously issued a drug safety update in September 2008, detailing serious and fatal overdose from dosing errors, accidental exposure and inappropriate use⁵. In December 2015, Welsh Government issued a [Patient Safety Notice regarding the risk of harm from the inappropriate use and disposal of fentanyl patches](#)⁶.

It is important that patients who are prescribed opioid patches are appropriately counselled on the safe use, storage and disposal of their medicine, so as to reduce the risk of overdose from dosing errors, accidental exposure and inappropriate use⁷.

If appropriate, it is beneficial for a patient's carer to be involved in any counselling, especially as symptoms experienced in the event of overdose may prevent a patient from seeking help. In community pharmacies, ascertain who is collecting the medication and make a record of it. Patients and carers should be told to keep the manufacturer's patient information leaflet (PIL) for reference. It is important that information regarding safe use and side effects is reiterated when patients collect their prescriptions, even for those using opioid patches long-term. Consider documenting that the checklist has been discussed with the patient/carers (e.g. by using a Read Code). The Patient Medication Record (PMR) or a Medicines Use Review (MUR) form can also be used to document counselling given.

Information on the initiation of treatment with transdermal opioids can be found in various resources, including the Summary of Product Characteristics (SPC), British National Formulary (BNF), and Monthly Index of Medical Specialities (MIMS). Opioids should be withdrawn gradually unless there are signs and symptoms of opioid toxicity^{1,5}.

Opioid patches may affect the patient's ability to drive and operate machinery; patients should not drive until they know how the medicine affects them. For further advice, see [Department for Transport guidance for healthcare professionals on drug driving](#).

Various medicines can interact with opioids and potentiate the associated risks of their use¹ (consult the BNF or SPC for full details); a careful drug history in a patient unfamiliar to you is therefore essential, even if it means contacting the prescriber. This is particularly important for patients new to opioid patches. It is good practice to record any over the counter (OTC) items supplied to the patient and check these for interactions with opioid patches. It is important to establish whether there are any concurrent co-morbidities, and opioid patches should be used with extra caution in special populations (consult the BNF or SPC for full details).

If you have any concerns/suspicions regarding a particular patient and patch abuse potential, please contact the prescriber or your local substance misuse specialist team.

2.0 OPIOID PATCH SAFETY: COUNSELLING CHECKLIST

- If the patient is calling back, please attach a counselling required note.
- Appropriate health professional to issue prescriptions (e.g. assistant technical officers or students are **not** to issue these prescriptions without supervision).

Patient details

For completion by the clinical checker				Yes	No	Comment		
A	Has the patient received this treatment before? <i>Check that not opioid-naive</i>							
B	Has the dose changed?							
C	Is the brand of opioid patch the same as previously used?							
D	Double-check for drug interactions when new items are prescribed							
E	Has the patient been given information on breakthrough pain relief?							
F	Presence of PIL within the packaging							
Counselling checklist: For completion by the counsellor								
Check the patient knows:					Yes	No	Already aware	
a	• How many patches to apply and how often							
b	• To choose the patch application site carefully and to not apply to the same site twice in a row (see PIL)							
c	• To not apply the patch to broken, irritated or irradiated skin. Ensure skin is non-hairy and dry before application. If necessary, cut hair with scissors; do not shave the area before applying a patch							
d	• To press the patch firmly in place for 30–60 seconds							
e	• Never to cut the patch							
f	• The process for applying the patch (refer to PIL): – Remove and safely dispose of old one (out of discovery of children/ animals), by folding patch over so sticky sides are stuck together and putting in original pouch – Apply new patch (avoid touching sticky sides) and wash hands afterwards							
g	• That it may be helpful to use a calendar to record day of application							
h	• That the patch may not start or stop working straight away							
i	• If the patch falls off, start another patch. Do not re-use patch. If the edge of the patch starts to peel, use suitable tape (e.g. white surgical tape, transparent adhesive film dressing) to secure the patch							
j	• To keep patches out of sight/reach/discovery of children and animals and to seek immediate medical attention if patch is swallowed or applied to the skin of anyone other than the patient. Patches are not plasters! Incidents have involved children mimicking what they have seen others do. <i>Deaths</i> have occurred where children have removed patches from sleeping adults and swallowed discarded/‘fallen-off’ patches							
k	• The effect of heat on patch. Avoid applying external heat sources against/near the patch, e.g. hot water bottles, heat pads or heat blankets. Avoid hot tubs and saunas. Caution about long hot baths. Keep the patch area out of excessive sun. Store patches away from heat sources. Seek urgent medical advice if feverish. <i>The body can absorb too much medicine if patch is exposed to excessive heat</i>							
l	• Signs and symptoms of too much medicine and what to do. Seek medical attention immediately if trouble breathing; shallow/very slow breathing; extreme sleepiness or sedation; inability to think/walk/talk normally; feeling faint, confused or more dizzy than usual							
m	• That opioid patches may cause drowsiness and affect ability to drive/operate machinery. Do not drive/operate machinery if affected. Alcohol may potentiate these effects							
n	• To use a regular community pharmacy and seek their advice when buying OTC/herbal products (e.g. <i>antifungals for thrush, antihistamines</i>)							
o	• To bring medicines/current medicines list to clinic/hospital/attend out-of-hours services/dentist/A&E/for scans, X-rays or any hospital procedures. <i>Medicine-containing patches cannot be worn during an MRI scan</i>							
Discussed with:		Counselled by:	Information to patient/carer <input type="checkbox"/>	Documented (e.g. on PMR/MUR) <input type="checkbox"/>	Date:			

3.0 OPIOID PATCH INFORMATION TO KEEP PATIENTS SAFE

This information is suitable for patients and carers. The patient information leaflet in the packaging should be read along with this information. Use the patch exactly as directed by your doctor, nurse or pharmacist.

This patch is designed to provide you with better overall background pain relief. If there are still painful times throughout the day, you can take fast-acting painkillers exactly as advised by your doctor, nurse or pharmacist. Contact your doctor, nurse or pharmacist if you have any queries/would like more information.

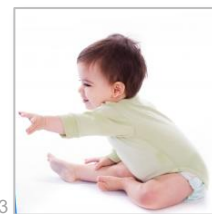
What do I need to know about opioid patches?

- How many patches to apply and how often you should apply them.
- The correct place on your body to apply the patch. When you change to your next patch, you should take the old one off and then apply the new patch to a different area of skin on your body.
- Where possible, you should use the same make of patch each time. If you notice that your patch looks different from those that you are used to using, ask your pharmacist for advice.
- **Do not apply patch to broken or irritated skin.** Do not use the patch on skin that has undergone radiation therapy. Use the patch on non-hairy and dry skin. Cut any hair in the area with scissors. Do not shave the area before applying a patch as this may irritate the skin.
- Press the patch firmly in place for 30–60 seconds.
- **Never cut the patch.**
- **Process for applying the patch:**
 - **Remove and safely dispose of old patch** by folding patch over so sticky sides are stuck together. Put it back in its original pouch.
 - **Ensure patches are disposed of out of the reach/discovery of children/animals.** This can be in a bin with household rubbish.
 - Apply new patch (avoid touching sticky sides).
 - Wash hands afterwards.
- It may be helpful to use a calendar to record the day of application.



- The patch may not start or stop working straight away. You may need to take additional fast-acting painkillers when starting the patch, as advised by your doctor, nurse or pharmacist.
- If the patch falls off, start another patch. Do not re-use patch. If the edge of the patch starts to peel, use suitable skin-friendly tape (e.g. white surgical tape) to secure the patch.

- **Keep out of sight/reach/discovery of children and animals.** Patches are not plasters! Incidents have involved children copying what they have seen others do. **Deaths** have occurred where children have removed patches from sleeping adults and swallowed discarded/fallen-off patches.



- **Seek medical attention straight away** if the patch is swallowed by yourself or others. If the patch sticks to the skin of anyone other than you, remove it and seek medical attention straight away.



- Effect of heat on patch. Avoid applying external heat sources against/near the patch, e.g. hot water bottles, heat pads or heat blankets. Avoid hot tubs and saunas. Caution with long hot baths. Keep the patch area out of excessive sun. Store patches away from heat sources. **The body can absorb too much medicine if the patch is exposed to excessive heat.**

- Signs and symptoms of too much medicine and what to do: **Seek medical attention immediately** if feverish; trouble breathing; shallow/very slow breathing; extreme sleepiness or sedation; inability to think/walk/talk normally; feeling faint, confused or more dizzy than usual.



- Opioid patches may make you **sleepy** and **affect your ability to drive/operate machinery.**
- **Do not drive/operate machinery if affected.**
- Alcohol can make you sleepier and worsen your ability to drive/operate machinery.
- Use a regular community pharmacy and seek their advice when buying over the counter/herbal products.
- Bring your medicines or a list of your current medicines with you if you come to clinic/hospital/attend out-of-hours services/dentist/A&E/for scans, X-rays or any hospital procedures. *Opioid patches **cannot** be worn during an MRI scan.*

Further information

- Fentanyl information leaflet for patients and caregivers (Medicines and Healthcare products Regulatory Agency), available at: <https://assets.publishing.service.gov.uk/media/54730808e5274a1301000046/con437440.pdf>
- Fentanyl patch patient information leaflet, and Opioids and driving patient information leaflet (Velindre Cancer Centre), available at: www.velindrecc.wales.nhs.uk/palliative-care-1
- Drugs and driving: the law (Department for Transport), available at: www.gov.uk/drug-driving-law
- Opioids in Palliative Care – Patient Information Manual (AWMSG), available at: www.awmsg.org/medman_patient_leaflets.html

4.0 REFERENCES*

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2. The Misuse of Drugs Regulations 2001 No. 3998. Available at: <http://www.legislation.gov.uk/ukxi/2001/3998/contents/made>. Accessed June 2016.
3. National Patient Safety Agency. Rapid Response Report. Reducing Dosing Errors with Opioid Medicines. Available at: <http://www.nrls.npsa.nhs.uk/resources/?entryid45=59888>. Accessed August 2016.
4. Medicines and Healthcare Products Regulatory Agency. Drug Safety Update: Transdermal fentanyl "patches": Reminder of potential for life-threatening harm from accidental exposure, particularly in children. July 2014. Available at: <https://www.gov.uk/drug-safety-update/transdermal-fentanyl-patches-reminder-of-potential-for-life-threatening-harm-from-accidental-exposure-particularly-in-children>. Accessed June 2016.
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6. Welsh Government. Patient Safety Notice: Risk of harm from the inappropriate use and disposal of fentanyl patches. 2015. Available at: <http://www.patientsafety.wales.nhs.uk/news/39820>. Accessed June 2016.
7. PrescQIPP. Bulletin 80 Opioid Patches – appropriate prescribing and use. Available at: <https://www.prescqipp.info/opioid-patches/category/120-opioid-patches>. Accessed June 2016.

*Image references

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