

Glyceryl Trinitrate (GTN) Infusion PROTOCOL

Treatment for Angina

Patient Addressograph

Consultant	 			

Date

Ward

Nurse checklist:

IV Access in situ	Heart Rate	
12 Lead ECG	Respiratory Rate	
IV infusion pump	Blood Pressure	
Continuous monitoring	Oxygen Sats	

Prescription:

Please indicate in the medicine chart and administration record a Glyceryl Trinitrate Infusion Chart is being used. When prescribing dosage please write 'See GTN Chart'. Prescribing the infusion in this way authorises the designated nurses to adjust the infusion rate according to response.

Doctor's Name (Print)	Doctor's Signature	Date	Time
		DD/MM/YYYY	

Contra-indications:

The use of this protocol is exclusively for patients requiring treatment of symptomatic Angina. The use of Glyceryl Trinitrate infusion is contra-indicated if patient has the following co-morbilities:

- 1. Hypersensitivity to the active substance or other nitrates
- 2. Acute circulatory failure (shock, collapse)
- 3. Cardiogenic shock
- 4. Severe anaemia
- 5. Severe cerebral haemorrhage
- 6. Head trauma
- 7. Uncorrected hypovolaemia and hypotensive shock
- 8. Arterial hypoxaemia and angina caused by hypertrophic obstructive cardiomyopathy
- 9. Constrictive pericarditis
- 10. Pericardial tamponade

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Sr. Rita Rodriguez Mineiro, Tisbury CCU, Salisbury NHS Foundation Trust, September 2022

- 11. Toxic pulmonary oedema
- 12. During nitrate therapy, phosphodiesterase inhibitord type 5 (e.g. sildenafil, vardenafil, tadalafil) must not be used because PDE5 inhibitors may amplify the vasodilatory effects of Glyceryl Trinitrate resulting in severe hypotension
- 13. Conditions associated with an increased intracranial pressure
- 14. Myocardial insufficiency due to obstruction, aortic or mitral stenosis, hypertrophic obstructive cardiomyopathy or constrictive pericarditis

(Reference from: <u>https://www.medicines.org.uk/emc</u> accessed 14/09/2022)

Preparation of Infusion:

- Prepare the infusion solution by drawing up a 50ml syringe of Glyceryl Trinitrate (50mg in 50ml – ready mixed and undiluted). The infusion should be discarded after 24h of preparation.
- 2. The initial infusion rate is 1mg (1ml) per hour.

	Commence infus	sion at				
1mg (1ml) per hour						
Given by:	Signature:	Date	Time			
		DD/MM/YYYY	7			
Checked by:	Signature:	Date	Time			
		DD/MM/YYYY	7			

Observe the patient for the first 5min to watch for signs of sensitivity (\downarrow BP, pale, faint, dizzy, unwell)

Guidelines for Administration

- 1. GTN infusion must be administered from a 50ml syringe using a syringe infusion pump.
- 2. Record baseline observations of blood pressure (BP) and heart rate (HR).
- 3. The initial infusion rate should be set at **1ml/hour** unless otherwise instructed by the medical staff.
- 4. Adjust the infusion rate according to the guidance in the flowchart below.
- 5. Re-check observations and symptoms (chest pain and/or increased shortness of breath) 15min after starting the infusion and after each infusion rate change.
- 6. If infusion rate is not changed, re-check observation and symptoms (chest pain and/or increased shortness of breath) every 30 min for the first hour and then every hour.
- 7. If the infusion rate is reduced or stopped due to a low BP and the patient is still showing symptoms (chest pain and/or increased shortness of breath), inform medical staff
- 8. Check the residual (volume remaining in the syringe) at least every hour
- 9. Inform medical staff if systolic BP falls below 80mmHg.

10. When the infusion is to be discontinued, reduce the rate by 1ml/h every hour until stopped.



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Observation and Administration record

DATE	ΤΙΜΕ	BP (mmHg)	HR (bts/min)	Symptoms Y / N	GTN rate (ml/hour)	Residual volume (ml)	Nurse signature