

Patient Resource Guide: Medication Dosing Schedules

INTRODUCTION TO MEDICATION DOSING SCHEDULED

Managing medication schedules for yourself or a loved one is an important task and can often feel overwhelming when it involves coordinating the dosing of multiple medications. This can get even more complicated when some medications are prescribed to take at set times while others come with instructions to take on an as-needed basis. Patients and caregivers have expressed the need for further clarification about why some medications would be taken at set times and others only when the patient feels the need or experiences symptoms. The purpose of this guide address some of the most frequently asked questions on the topic.

MEDICATION PRESCRIPTION DOSING INSTRUCTIONS

Dosing Frequency Type	Characteristics of Dosing Type
Scheduled	<ul style="list-style-type: none"> • Intended to be dosed at specific time of day, regardless of presence of symptoms • In the hospice setting, scheduled medications prescribed for the purpose of symptom management are often intended to provide around-the-clock prevention of symptoms <ul style="list-style-type: none"> ○ Example: Morphine SR 15mg orally every 12 hours ○ SR stands for sustained-release ○ Designed to slowly release the morphine into the bloodstream over 12 hours, intended to provide prolonged, “sustained” relief
As Needed (PRN)	<ul style="list-style-type: none"> • Intended to be dosed when symptoms are present with opportunity to repeat dose as frequently as outlined by prescription • In the hospice setting, as needed medications usually provide benefit within 15-20 minutes of dose, with benefit lasting often 1-4 hours depending on the medication and patient-specific features <ul style="list-style-type: none"> ○ Example: Morphine IR 15mg po every 4 hours as needed for pain ○ IR stands for immediate-release ○ Designed to quickly be absorbed into bloodstream to provide quick resolution of symptoms • SR and IR medication formulations can be taken at together

EXAMPLES OF SCHEDULED AND AS NEEDED PRESCRIPTION COMBINATIONS

Pain

Any long-acting pain medication (morphine SR, oxycodone SR, fentanyl patch, methadone) prescribed in combination with an immediate-release opioid (morphine IR, oxycodone IR, hydrocodone/apap, hydromorphone, etc.). The long-acting pain medication should be taken at the same times every day (or every three days if use fentanyl patch), and if the patient experiences pain elevated above goal in between doses of the long-acting pain medication, it is ok to take the immediate-release opioid up to as often as prescribed in attempt to get symptoms under control.

For example, if a patient is prescribed morphine SR 15mg every 12 hours and oxycodone IR 5mg every 4 hours as needed for pain, it would be acceptable for the patient to take morphine SR at 7am and 7pm and then to take oxycodone IR 5mg doses at 2am, 6am, 10am, 2pm, 6pm and 10pm if pain was not adequately controlled by morphine SR alone. As a reminder, just because the oxycodone IR can be taken up to every 4 hours, it should only be taken when pain not controlled to patient's goal level, and not every 4 hours as if it is scheduled. The hospice team should calculate the total amount of pain medication used per 24-hour period to determine if medication, dose or frequency should be updated to better meet patient needs.

Nausea

There may also be times when two immediate-release medications are used in combination with one being scheduled and the other being prescribed on an as needed basis. However, despite using two shorter-acting medications, the reason for using two different medications in this way is similar to the logic above with pain. One medication is scheduled with the intent to provide around-the-clock symptom management, and the other medication is to be used in scenarios when the patient continues to experience the undesired symptom despite using the scheduled medication as prescribed.

For example, a patient prescribed Zofran 4mg every 6 hours and Compazine 10mg every 6 hours as needed for nausea could use up to four doses of Compazine in a 24-hour period if nausea/vomiting not controlled by Zofran alone.

If you or a loved-one has any additional questions about how or when to take a prescribed medication, please contact your hospice agency for further clarification.