

# Application Record & Guidance for Transdermal Patches

For local adaption to align with individual Care Home  
medicine policies

Version 2  
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Formatting to align with CHAPS documents	Kirstin Frost, November 2019	Zoe Webb
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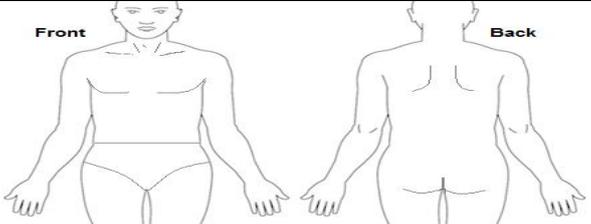
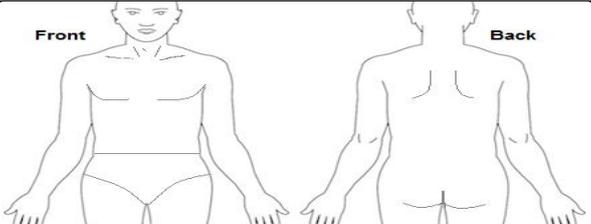
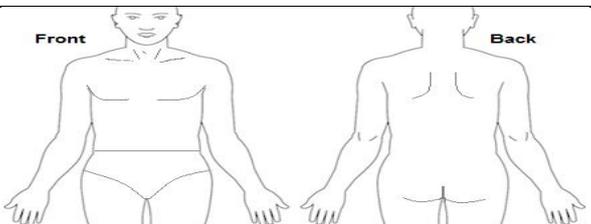
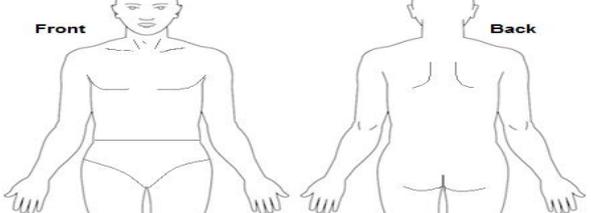
## Application record for Transdermal Patches

Resident name:.....  
Date of birth:.....  
Allergies:.....  
Date record sheet starts & finishes.....

Name & strength of Patch:

Number of patches to apply per dose:

Put a cross **X** where you have placed the patch

 <p>Front Back</p>	<p>Date Applied .....</p> <p>Date Removed .....</p>	<div style="border: 1px solid black; background-color: #e0e0e0; padding: 5px; width: 30px; margin: 0 auto;">1</div>
 <p>Front Back</p>	<p>Date Applied .....</p> <p>Date Removed .....</p>	<div style="border: 1px solid black; background-color: #e0e0e0; padding: 5px; width: 30px; margin: 0 auto;">2</div>
 <p>Front Back</p>	<p>Date Applied .....</p> <p>Date Removed .....</p>	<div style="border: 1px solid black; background-color: #e0e0e0; padding: 5px; width: 30px; margin: 0 auto;">3</div>
 <p>Front Back</p>	<p>Date Applied .....</p> <p>Date Removed .....</p>	<div style="border: 1px solid black; background-color: #e0e0e0; padding: 5px; width: 30px; margin: 0 auto;">4</div>

**You must still sign for administration on the MAR (paper or electronic) chart.  
This is a supporting document for reference of application site and rotation only.**

**Patches are thin pads with an adhesive back that are applied to the skin. They contain a reservoir or matrix of medicines that pass through the skin into the bloodstream.**

**Applying patches:**

- You must make sure you are aware of the correct application technique. The patches should be changed as prescribed, as this can vary between products. Refer to manufacturer instructions for how to apply and rotate the site of application (*see table 1 below for examples*). Some patches can cause a thinning of the skin. If routinely applied to the same area, the rate of absorption into the bloodstream can be higher. This could lead to overdose.
- Normally, patches should be applied to a dry, intact, healthy, flat area of skin, usually the upper arm, chest or back. Avoid any areas with large scars. You may need to clip the person's hair to give better adhesion.
- Where more than one patch is needed, these should be applied to the same area but should not overlap.
- When a patch is applied, press the patch firmly in place using the palm of your hand, for a minimum of 30 seconds. Make sure the entire adhesive surface is attached to the skin.
- Do not cut or damage reservoir style patches. This will cause the medicine to leak from the patch. Matrix patches are sometimes cut. This makes their use 'off-licence'. Staff should get clear guidance from the prescriber and pharmacist before cutting patches.
- Heat can increase the absorption of some medicines through the skin into the bloodstream. Patches should not be applied immediately after a person has had a bath or shower. People with a fever should be observed for signs of toxicity.

**Disposing of patches:**

- Remove and dispose of old patches before applying a new patch. This reduces the risk of leaving the old patch in place. Used patches contain some residual drug. Fold in half and dispose of via your usual waste arrangements.

**Records, checks and communication:**

- A record must be made of the application of a patch and include the specific location. For example front, right, chest. This needs to be recorded on a body map using a cross (X). This is important so other staff can check that the patch is still in place and will help with rotating the site
- Regularly check that patches are being applied correctly and are still in place.
- Communicate information about patches when a person is transferred between settings. This should include date, time and where on the body the patch was applied. A copy of this chart should be provided with the MAR chart.

**Table 1:**

Patch	Replacement time	Application
Fentanyl (Matrifen®, Durogesic®)	Apply every 3rd day (72hrs) Complete MAR and ensure the next 2 days are crossed out	Apply to upper torso or upper arm <b>(avoid the same area for at least 7 days)</b>
Buprenorphine (Reletrans®),(Butrans®)	Apply every 7th day (168hrs) Complete MAR and ensure the next 6 days are crossed	Buprenorphine should be applied to upper outer arm, upper chest, upper back or the side of the chest. The patch should be applied to a relatively hairless or nearly hairless skin site. <b>A new transdermal patch should not be applied to the same skin site for the subsequent 3-4 weeks</b>
Buprenorphine (Transtec®)	Apply every 4th day (96hrs) Complete MAR and ensure the next 3 days are crossed out	Apply to upper torso. Apply new patch on a different area <b>(avoid same area for at least one week)</b>
Rotigotine (Neupro®)	Neupro is applied once a day. The patch should be applied at approximately the same time every day. The patch remains on the skin for 24 hours and will then be replaced by a new one at a different site of application.	The patch should be applied to the abdomen, thigh, hip, flank, shoulder, or upper arm. <b>Reapplication to the same site within 14 days should be avoided.</b>

*This table contents of patches are only an example and are not an exhaustive list-please refer to manufacture guidance.*

**References:** Electronic Medicines Compendium (emc) accessed February 2019. CQC, external medicines, last updated July 2018 <https://www.cqc.org.uk/guidance-providers/adult-social-care/external-medicines>