B12 PROTOCOL

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VERSION CONTROL

<table>
<thead>
<tr>
<th>Version</th>
<th>Date</th>
<th>Author</th>
<th>Status</th>
<th>Comment</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>May 2018</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Helpful links to guidance

Sheffield primary care B12 guidance: https://sites.google.com/site/sheffieldccgportal/clinical-guidance/vitamin-b12-guidance-for-primary-care


Patient.co.uk-information-clinician: https://patient.info/doctor/pernicious-anaemia-and-b12-deficiency

Patient.co.uk-information-patient: https://patient.info/health/anaemia-leaflet/vitamin-b12-deficiency-and-pernicious-anaemia

Giving B12 injections in the hub surgeries

The aim of the scheme is to extend access to patients to have a B12 injection by a trained practice nurse out of normal working hours if this is more convenient for the patient. The service is for patients with established B12 deficiency who are on injections for B12 replacement.

Patients should be booked in with a practice nurse at the satellite surgery by their own surgery, and the patient should bring the injection with them to the appointment following a prescription given by their own GP surgery.

It is the responsibility of the booking surgery to ensure the date of appointment for injection is correct and the follow-up recall date is organised.

As per Sheffield CCG guidance, the B12 injection can be given by nurses under patient specific guidance (PSD) that is formed from the prescription being on repeat prescription on the practice computer system shared with the patient’s consent to the satellite surgery nurse. This also means
that nurses in the satellite surgery will only be able to give a B12 injection that has been dispensed from a pharmacy on an FP10 with specific instructions and the patient's identification details on. Patients who attend without the specific device or correct labelling will not be able to have their injection given by the hub nurse under CCG PSD rules. A specific signed Patient Group Directive (PGD) is not needed by nurses giving B12 injections.

*Rescue medications in the event of anaphylaxis should be made available before injections are given*

The hub nurse will document the location that the injection has been given and the serial number and expiry date

**Exclusions**

Patients who attend without the injection will not be able to receive their injection from the hub and will be directed to return to their practice.

The appointment should be with a practice nurse, not a GP, ANP or HCA. The appointment will not be for any other patient problems and not for assessment of B12 levels or whether doses should be increased or decreased. The appointments are not suitable for patients for injections of other injectable medications or those on oral B12 therapy.

Patients should not be rebooked in by satellite surgeries to avoid injection duplication.

**The Sheffield guidance for intramuscular B12 replacement states:**

For people with neurological involvement:

Hydroxocobalamin 1 mg IM on alternate days until there is no further improvement (after 3 wks r/v). Then 1 mg IM every 2 months for life.

For people without neurological involvement:

Hydroxocobalamin 1 mg IM 3x/week for 2 weeks. Then 1 mg IM every 3 months maintenance for life if NOT dietary cause.

**New Patient Assessment**

Patients should have a diagnosis made by their own GP surgery in order to be diagnosed with B12 and booked in to a hub slot for the injection to be given. The scope of the service is to provide the injection and the clinicians in the hub will not decide or give advice about the results of laboratory B12 results or commence patients on B12 therapy.