

Whilst all medicines should be administered in a timely manner, there are some that must not be omitted or their administration delayed as this has the potential to cause harm. These are referred to as '*critical medicines*'. The list below is **not exhaustive** but serves as a reminder of the medicines that need timely administration.

Any omission or delay in the administration of the medications on this list must be discussed with the Prescriber or relevant Physician and recorded on ASSURE as a patient safety incident.

Drug Group / Class	Rationale for Inclusion / Risk if Drug Delayed or Omitted
STAT doses of any drug	Any drug that is deemed urgent enough to be prescribed as a "STAT" on the medication chart
Emergency treatment of anaphylaxis / allergy	When used for the treatment of acute anaphylaxis an urgent response is required as anaphylaxis is a life-threatening event.
Systemic Antimicrobials	Potential worsening of systemic infection and deterioration of condition
Anticoagulants (Deep vein thrombosis/pulmonary embolus treatment or thromboprophylaxis)	Risk of thrombus and serious embolic episode
Antiepileptic Agents (including the management of prolonged seizures/status epilepticus)	Loss of seizure control When used for the management of prolonged seizures/status epilepticus an urgent response is required
Anti-Parkinsonian Agents	Loss of symptom control
Bronchodilators and Respiratory stimulants	Deterioration in clinical condition When used for the management of an acute Chronic Obstructive Pulmonary Disease exacerbation or in the management of respiratory emergencies an urgent response is required.
Corticosteroids	Treatment failure in acute conditions Risk of acute adrenal insufficiency with abrupt withdrawal after a prolonged period of corticosteroid use
Disease-Modifying Anti-Rheumatic Drugs	Treatment failure e.g. when used in the management of inflammatory disorders such as rheumatoid arthritis
Immunomodulating drugs	Disruption of regimen scheduling

Drug Group / Class	Rationale for Inclusion / Risk if Drug Delayed or Omitted
Immunosuppressant drugs for transplant	Risk of rejection due to sub-therapeutic levels
Insulin	Poor glycaemic control with the risk of hyperglycaemia
Oral Hypoglycaemic Agents	Poor glycaemic control with the risk of hyperglycaemia
Emergency treatment of hypoglycaemia	Risk of life-threatening hypoglycaemia
Management of Symptoms at End of Life	Poor symptom control
Opiates	Poor pain control
Posterior Pituitary Hormones	Desmopressin (when used in cranial diabetes insipidus) – risk of life threatening dehydration and hypernatraemia