

Procedure for the administration of nasal medications

Essential equipment

- Tissues
- Clean non-sterile gloves

Medicinal product

- Nasal spray or drops

Preprocedure

Action	Rationale
1 Explain and discuss the procedure with the patient.	To ensure that the patient understands the procedure and gives their valid consent (Griffith and Jordan 2003 , E; NMC 2008b , C; NMC 2008c , C).
2 Consult the patient's prescription sheet and ascertain the following: (a) Drug (b) Dose (c) Date and time of administration (d) Route and method of administration (e) Validity of prescription (f) Signature of doctor.	To ensure that the patient is given the correct drug in the prescribed dose and by the correct route (NMC 2006b , C).
3 Have paper tissues available.	To wipe away secretions and/or medication. E

Procedure

4 Ask the patient to blow their nose to clear	To ensure maximum penetration
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the nasal passages, if appropriate.	for the medication (Chernecky et al. 2002 , E).
5 Place the patient in a supine position and hyperextend the patient's neck (unless clinically contraindicated, for example cervical spondylosis).	To obtain a safe optimum position for insertion of the medication. E
6 Wash hands and put on gloves.	To reduce the risk of cross-infection (DH 2007 , C; Fraise and Bradley 2009 , E).
7 With the non-dominant hand, gently push upward on the end of the patient's nose.	To aid in opening the nostrils. E
8 Avoid touching the external nares with the dropper and instil the drops just inside the nostril of affected side.	To prevent the patient from sneezing. E
9 Ask the patient to sniff back any liquid into the back of the nose or to maintain their position for 2 or 3 minutes.	To ensure full absorption of the medication. E
10 Discard any remaining medication in the dropper into the sink before returning it to the container.	To minimize the risk of cross-infection (Chernecky et al. 2002 , E; DH 2007 , C; Fraise and Bradley 2009 , E).
11 Instruct patient not to blow their nose.	To maintain the medication in contact with nasal passages. E
12 Each patient should have their own medication and dropper.	To minimize the risk of cross-infection (DH 2007 , C; Fraise and Bradley 2009 , E).

Postprocedure

13 Record the administration on appropriate charts.	To maintain accurate records, provide a point of reference in the event of any queries and prevent any duplication of treatment (NMC 2008a , C; NMC 2009 , C).
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<http://www.rmmonline.co.uk/home.html>; accessed 8/10/13