Bwrdd Iechyd Addysgu Powys
Powys Teaching Health Board

Bronllys Hospital, Bronllys, Brecon, Powys, LD3 0LU

This Patient Group Direction (PGD) must only be used by registered healthcare professionals who have been named and authorised by their organisation to practice under it. The most recent and in date final signed version of the PGD should be used. Healthcare professionals should always access the PGD via the PTHB internet to ensure that they are always working to the most up to date version

Patient Group Direction

for the administration of

Minims Proxymetacaine Hydrochloride 0.5% w/v, Eye drops solution

by registered nurses

in Powys Teaching Health Board (PTHB) Minor Injury Units (MIUs)

Version number: PGD 0195A

Reference Number: PGD 0195A
Valid from: 11/11/2025
Review date: 11/05/2028
Expiry date: 10/11/2028

Change history

Version number	Change details	Date
PGD0195	Initial issue	02/12/2022
PGD0195A	Review issue: Clinical changes throughout to reflect current reference sources. Removal of use in PTHB outpatient departments. Removal of use to facilitate intraocular pressure measurement, as this is not performed in MIU. Change to recommended dose, in line with current reference sources and clinical practice. Minor changes to format to promote consistency with other PTHB PGDs. Addition of competency checklist to Appendix A.	11/11/2025

PGD authorisation

Name	Job title and organisation	Signature	Date
Senior Doctor Dr Kate Wright	Lead Doctor for PTHB	DocuSigned by: Kate Wright 1F267952823F473...	11/4/2025
Chief Pharmacist Jonathan Boyd	Chief Pharmacist for PTHB	Signed by: Jon Boyd 6D8ECFE8C9EB423...	11/11/2025
Clinical Governance Lead Amanda Edwards	Clinical Governance Lead for PTHB- Assistant Director for Innovation and Improvement	DocuSigned by: Amanda Edwards 74A4E51A42E9473...	11/11/2025
Senior Representative of Professional Group using the PGD Paul Hooton	Executive Director of Nursing and Midwifery for PTHB	Signed by: Paul Hooton EEABC83AC83F4B9...	11/11/2025

The PGD is not legally valid until it has had the relevant organisational authorisation. It is the responsibility of the organisation that has legal authority to authorise the PGD, to ensure that all legal and governance requirements are met. The authorising body accepts governance responsibility for the appropriate use of the PGD.

Appendix A provides a staff accreditation sheet. Individual practitioners must be authorised by name to work to this PGD.

Those using this PGD must ensure that it is organisationally authorised and signed by an appropriate authorising person, relating to the class of person by whom the product is to be supplied, in accordance with Human Medicines Regulations 2012 (HMR2012) [1]. The PGD is not legal or valid without signed authorisation in accordance with HMR2012 Schedule 16 Part 2. Operation of this PGD is the responsibility of commissioners and service providers. The final authorised copy of this PGD should be kept by PTHB for 25 years after the PGD expires. Practitioners and organisations must check that they are using the current version of the PGD.

[1] This includes any relevant amendments to legislation.

Training and competency of registered health professionals	
Qualifications and professional registration	Practitioners must only work under this PGD where they are competent to do so. Practitioners working under this PGD must also be a registered professional with the following body: • nurses currently registered with the Nursing and Midwifery Council (NMC) All registered health professionals should have a current contract of employment with PTHB. The practitioners must also fulfil the training and additional requirements detailed below. Check Appendix A: Staff accredited to use the Patient Group Direction to confirm whether all the registered practitioners listed above have organisational authorisation to work under this PGD.
Initial training and knowledge requirements	The registered healthcare professional authorised to operate under this PGD must have undertaken appropriate education and training in: • The administration of Minims Proxymetacaine Hydrochloride 0.5% w/v eye drops solution and knowledge of its uses, contraindications and adverse effects. Additionally, practitioners: • must be authorised by name as an approved practitioner under the current terms of this PGD before working to it • must have undertaken appropriate training for working under PGDs for supply/administration of medicines. The following training must be completed: eLfH PGD eLearning programme. PTHB staff to access via ESR • must be competent in the use of PGDs (see NICE Competency framework for health professionals using PGDs) • must be familiar with the product(s) and alert to changes in the BNF and Summary of Product Characteristics • must have undertaken training appropriate to this PGD as required by local policy • must have received training and be competent in the recognition, management, and reporting of adverse reactions, including anaphylaxis. Must be competent in the administration of adrenaline and have up to date Intermediate Life Support skills (ILS) • must have access to the PGD and associated online resources

	• should fulfil any additional requirements defined by local policy • must have undertaken and completed a minimum of level 2 Safeguarding of Children, Young people and Vulnerable adults – Training and Competency passport, as applicable to the role **THE PRACTITIONER MUST BE AUTHORISED BY NAME, UNDER THE CURRENT VERSION OF THIS PGD BEFORE WORKING ACCORDING TO IT.** **THE DECISION TO ADMINISTER ANY MEDICATION RESTS WITH THE INDIVIDUAL REGISTERED HEALTH PROFESSIONAL WHO MUST ABIDE BY THE PGD AND ANY ASSOCIATED ORGANISATIONAL POLICIES.**
Competency assessment	• Staff operating under this PGD are encouraged to review their competency using the NICE Competency framework for health professionals using patient group directions. Practitioners must recognise their own limitations and personal accountability and act accordingly. • Staff must complete the eLfH PGD eLearning programme (PTHB staff to access via ESR). Evidence of ongoing PGD training to be submitted to Line Manager annually– this should include an annual completion certificate of PGD e-learning or a dated screenshot of the PGD e-learning assessment results as proof of completion. • Individuals operating under this PGD must be assessed as competent (see Appendix A) and complete a self-declaration of competence to operate under this PGD in their Personal Appraisal and Development Review (PADR). The personal development plan (yellow) section of the PADR booklet should be used to record completion of Statutory and Mandatory training, including annual PGD e-learning. • Evidence of training in ILS and safeguarding.
Ongoing training and competency	• Annual PGD training (eLfH PGD eLearning programme)- PTHB staff to access via ESR. Evidence of ongoing PGD training must be submitted to Line Manager annually. • Updating at least every 2 years on the use of PGDs and Minims Proxymetacaine Hydrochloride 0.5% w/v eye drops solution.

	• Practitioners must ensure they are up to date with relevant issues and clinical skills and management of anaphylaxis, ILS, with evidence of appropriate Continued Professional Development (CPD) as required by NMC, which must be retained and made available on request. • Compliance with all mandatory NHS training. **It is the responsibility of the healthcare professional to maintain their own competency to practice within this PGD.**
Clinical condition or situation to which this PGD applies	
Clinical condition or situation to which this PGD applies	To be used as a topical ocular anaesthetic to enable: • eye examination • eye irrigation • removal of non-penetrating corneal foreign bodies NB: This PGD should be used in conjunction with the MIU clinical guidelines and NICE CKS Corneal superficial injury and Eyes | Specialities | CKS | NICE. **It is the responsibility of the administering nurse to ensure that the individual is within the inclusion criteria, and that there are no reasons for exclusion before proceeding with the treatment. If there is any reason for concern, seek medical advice.**
Inclusion criteria	• Individual aged 2 years or over • Meets the clinical situations criteria • Medical and drug history taken, no reason for exclusion • Informed consent - Refer to PTHB Consent to Treatment and Examination Policy Any vulnerable adult or child protection concerns should be referred to Safeguarding and PTHB safeguarding policies followed. Where there are safeguarding concerns (Child Protection or Protection of Vulnerable Adults, POVA) advice from the local Safeguarding team should be sought (see below).

Exclusion criteria (Exclusion under this PGD does not necessarily mean the medication is contraindicated, but it would be outside its remit and another form of authorisation will be required)	• Conditions outside of the clinical situations criteria • Individual or representative refuses treatment. Individuals for whom valid consent, or 'best-interests' decision (when a person lacks capacity), in accordance with the Mental Capacity Act 2005, has not been obtained or received. Refer to section "action to be taken if the individual or carer declines treatment". • Individual under 2 years of age • Known allergy/hypersensitivity to Proxymetacaine Hydrochloride and/or any component of the eye drops- see SPC • Known allergy to other similar types of local anaesthetic • Contact lenses in situ (contact lenses must be removed prior to administration of the drops) • An indication for immediate referral to an ophthalmologist or ophthalmology outpatient department, as listed in Powys Minor Injury Guidelines or NICE CKS Corneal superficial injury Refer to section "action to be taken if the individual is excluded"
Cautions /reasons for seeking further advice from a prescriber	• This product is not intended for long term use- see SPC for further information; frequent use of local anaesthetic in the eye over long periods of time may severely affect eyesight • Use cautiously and sparingly in individuals with known allergies, cardiac disease or hyperthyroidism because of the increased risk of sensitivity reactions • Use with caution in an inflamed eye as hyperaemia greatly increases the rates of systemic absorption through the conjunctiva • Use with caution if eye is red • Individuals with complex multiple pathologies, polypharmacy or multiple allergies • Check for any other medications that the individual is taking, including topical or inhaled products, food supplements and herbal or homeopathic products. Refer to BNF, SPC, interactions section, and contact a prescriber for a management plan if necessary

	• Safety for use in pregnancy and lactation has not been established, so use only if considered essential by a physician: Call medical cover for advice and document advice given. UK Teratology Information Service contains the following advice for Local anaesthetic eye drops in pregnancy: No human pregnancy data were located for proxymetacaine. Although data are limited, use of topical local anaesthetics may be appropriate if clinically indicated. This list is not exhaustive. Refer to SPC www.medicines.org.uk and BNF for further information. Under Section 128 and 130 of the Social Services and Wellbeing (Wales) Act 2014, staff have a duty to inform the Local Authority if they have reasonable cause to suspect that an adult or child is at risk. Any vulnerable adult or child protection concerns should be referred to Safeguarding and the Minor Injury Unit guidelines followed, along with PTHB safeguarding policies. Consider discussing with GP. Any safeguarding concerns need to be directed to Safeguarding Hub: • To generic email address: PowysTHB.Safeguarding@wales.nhs.uk And • Central Safeguarding number: 01686 252806 • Out of hours: 0345 054 4847 Advice can also be sought from local Safeguarding Leads
Arrangements for referral for medical advice	Contact GP/Optician for advice or refer to DGH/Optician/GP/out of hours service if applicable. Document advice given.
Action to be taken if individual excluded	Explain reason to individual/carer. Record reason for exclusion and any action taken. If appropriate refer to GP/Optician/DGH/out of hours service, offer alternative management if appropriate.

Action to be taken if individual or carer declines treatment	The patient information leaflet should be available to inform consent. Explain consequences of refusing treatment. Make individual or their representative aware of alternative sources of treatment (DGH, Optician, GP, or out of hours service as appropriate). Offer alternative management if appropriate. Document refusal and any advice given. Complete a Discharge Against Advice Form if appropriate, and/or complete the letter on the WPAS system and inform GP. Inform or refer to GP/Optician/out of hours service/follow local procedures as appropriate.
Details of the medicine	
Name, form and strength of medicine	Minims Proxymetacaine Hydrochloride 0.5% w/v, Eye Drops, solution.
Legal category	POM
Off-label use	Medicines should be stored according to the conditions detailed in the storage section below. However, in the event of an inadvertent or unavoidable deviation of these conditions, a pharmacy professional must ensure the medicine remains pharmaceutically stable and appropriate for use if it is to be issued. Where medicines have been assessed by a pharmacy professional in accordance with national or specific product recommendations/ manufacturer advice as appropriate for continued use this would constitute off-label administration under this PGD. The responsibility for the decision to release the affected medicines for use lies with the pharmacy professional. Where a medicine is recommended off-label consider, as part of the consent process, informing the individual/carer that the medicine is being offered in accordance with national guidance but that this is outside the product licence.

Route/method of administration	Minims Proxymetacaine hydrochloride 0.5% w/v, Eye Drops solution are supplied in single use containers. Do not use if the solution is more than pale yellow in colour. A period of at least one minute should be allowed after administration of Minims Proxymetacaine hydrochloride 0.5%, before subsequent administration of other topical eye agents. Each minims unit should be discarded after a single use. Protection of the eye from rubbing, irritating chemicals and foreign bodies during the period of anaesthesia is very important. Individual should be advised to avoid touching the eye until the anaesthesia has worn off.
Dose and frequency	To remove non-penetrating corneal foreign bodies or to facilitate eye examination: • Instil **ONE** drop to into the conjunctival sac. • A second drop may be applied if necessary, however, repeat doses should be avoided, if possible, as they can cause corneal epithelium toxicity and impair corneal healing. To facilitate eye irrigation, instil one drop every 5 – 10 minutes, if required, for up to 7 applications.
Quantity to be administered	See dosage above.
Maximum or minimum treatment period	A maximum of two drops for one episode of care to remove non-penetrating corneal foreign bodies or to facilitate eye examination. A maximum of 7 drops in total for one episode of care to facilitate eye irrigation. Use the lowest dose to produce the required effect.
Storage	Stock must be securely stored according to PTHB Medicines policy (MMP 001) and in conditions in line with SPC, which is available from the electronic Medicines Compendium website: www.medicines.org.uk. Store at 2-8°C. Do not freeze. Keep container in the outer carton.

	If necessary, the product may be stored at temperatures not exceeding 25°C for up to 1 month only. If the product is to be stored unrefrigerated at temperatures not exceeding 25°C, the adhesive label provided in the carton should be completed (to state expiry date 1 month from removal from the fridge) and affixed over the bar code.
Drug interactions	A detailed list of drug interactions is available in the BNF and SPC, which is available from the electronic Medicines Compendium website: www.medicines.org.uk. • Minims Proxymetacaine hydrochloride should not be mixed with fluorescein, however, fluorescein can be added to the eye after it has been anaesthetised with Minims Proxymetacaine hydrochloride • A period of at least one minute should be allowed after administration of Minims Proxymetacaine hydrochloride 0.5%, before subsequent administration of other topical eye preparations. Discuss any concerns with an appropriate prescriber and document advice given.
	May cause transient blurring of vision on instillation. Pupillary dilatation or cycloplegic effects have rarely been observed with Proxymetacaine hydrochloride preparations. Irritation of the conjunctiva or other toxic reactions have occurred only rarely. A severe, immediate-type apparently hyperallergic corneal reaction may rarely occur. This includes acute, intense and diffuse epithelial keratitis; a grey ground-glass appearance; sloughing of large areas of necrotic epithelium; corneal filaments and sometimes, iritis with descemetitis. Regular and prolonged use of topical ocular anaesthetics may cause softening and erosion of the corneal epithelium, which could produce corneal opacification with accompanying loss of vision. Transient loss of lens movement (inability to read). This list is not exhaustive. Refer to BNF or SPC for complete list.

Identification, management and reporting of adverse effects	Report any suspected adverse reactions to a doctor, document in the individual's record and inform their GP. Healthcare professionals and individuals/parents/ carers are encouraged to report suspected adverse reactions to the Medicines and Healthcare products Regulatory Agency (MHRA) using the Yellow Card reporting scheme at: http://yellowcard.mhra.gov.uk or search for MHRA Yellow Card in the Google Play or Apple App Store. For established medicines, serious adverse events in adults or all suspected adverse reactions in children that may be attributable to the medication should be reported. Guidance on the yellow card system is available at the back of the BNF, or using the above link. Anaphylaxis and resuscitation equipment including adrenaline (1 in 1000) injection and a working telephone must be available for immediate use. In case of anaphylaxis:- • Refer to adrenaline (epinephrine) PGD 0017 and anaphylaxis procedure • Request medical assistance urgently. If the GP is not immediately available dial 999 to transfer to A&E • Ensure reaction is fully documented in patient notes • Ensure all patient records are marked **ALLERGIC TO PROXYMETACAINE HYDROCHLORIDE 0.5% eye drops**. • The patient may be advised to wear a MedicAlert or similar device to alert other healthcare providers All significant adverse drug reactions must be recorded via the Datix Once for Wales Reporting system.
Records to be kept	Record consultation details as required by local procedures. In addition, record: • That valid informed consent to treatment was obtained or a decision to treat was made in the individual's best interests in accordance with the Mental Capacity Act 2005. Record name of representative who gave consent, if appropriate. Record advice given and action taken if individual excluded or declines treatment • Name, address and date of birth of individual • Name and address of GP

	• Medical and drug history taken, including any allergies/adverse events and nature of reaction (if established) • Any reasons for exclusion or referral, including actions taken • Any advice received from a prescriber, and advice given to individual/carer • If the individual has refused treatment, and any advice given in this circumstance • That the drug is being administered in accordance with a PGD, record PGD title, number and version • Record any advice given, including advice given about potential side effects, benefits, and when and what to do if any concerns • Date and time of administration • Name, form, strength, dose and quantity of drug administered • Expiry date • Route of administration – including which eye(s) • Details of any adverse reactions and actions taken The record must include the printed name and signature of the nurse responsible for administration. All records should be clear, legible and contemporaneous and be securely kept for a defined period in line with local policy. A record of all individuals receiving treatment under this PGD should be kept for audit purposes in accordance with local policy. The responsible GP should be informed of the treatment provided, via a discharge summary of care.
Patient information	
Written/verbal information to be given to individual or carer	• Provide patient information leaflet (PIL) available in the medicine pack or available via www.medicines.org.uk and draw the individual/carers' attention to it. Explain potential side effects and actions to take if these occur. Explain contraindications and cautions as documented in the PIL plus expected benefit/duration of effect. • The eye drops may cause a transient blurring of vision on instillation. Warn individual not to drive or operate hazardous machinery unless vision is clear. • The eye will remain numb for about one hour, depending on how many drops were instilled. • Avoid touching the eye until the anaesthetic has worn off.

	• After use protect the eye from injury, dust and bacterial contamination for the likely duration of the anaesthetic action. Consider using an eye pad for up to 4 hours after administration. Do not drive or operate machinery with eye pad in place. • Do not smoke or vape with an eye pad in situ. • Do not wear contact lenses until the effects of the drops have completely worn off. Contact lens wearers who have experienced eye trauma may need a longer period without contact lenses – seek advice from ophthalmologist or optician. • Refer to MIU clinical guidelines.
Follow-up advice to be given to individual or carer	Inform individual of possible side effects and their management. Advise to seek medical advice immediately if there are any signs of infection, an unexpected reaction, or other cause for concern. Contact 999, GP via surgery or 111 service, or Optician if appropriate. Follow up according to Powys MIU clinical guidelines, and advise individual to see their optician if they experience any problems.

Key references

BNF and BNFC accessed 17/09/2025
SPC- Minims Proxymetacaine hydrochloride 0.5% w/v, Eye Drops solution, Bausch & Lomb U.K Limited, last updated 9/3/2016
PIL Minims Proxymetacaine hydrochloride 0.5% w/v, Eye Drops solution, Bausch & Lomb. Prepared November 2023

NICE CKS Corneal superficial injury. Revised December 2024.
UK Teratology Information Service www.uktis.org. accessed 23/09/2025.

MIU clinical guidelines, PTHB, April 2023

Appendix A Staff accredited to use the Patient Group Direction

Authorising Manager: I confirm that the practitioners named below have declared themselves suitably trained and competent to work under this PGD. I give authorisation on behalf of Powys Teaching Health Board for the named healthcare professionals below who have signed the PGD to work under it.
The authorising manager must use the competency checklist (below).

Practitioner: By signing this PGD you are indicating that you agree to its contents and that you will work within it. PGDs do not remove inherent professional obligations or accountability. It is the responsibility of each professional to practise only within the bounds of their own competence and professional code of conduct.

I confirm that I have read and understood the content of this Patient Group Direction and that I am willing and competent to work to it within my professional code of conduct.

Printed name of registered health professional	Signature of registered health professional	Printed name of senior representative authorising health professional	Signature of senior representative authorising health professional	Date

The authorising manager should retain a copy of the list, which will be requested for audit purposes. This list should be kept by PTHB for 25 years after the PGD expires.

The healthcare professional should retain a copy of the document after signing.

Competency check list for manager or senior team lead to use as part of the authorising process for health professionals to work to a Patient Group Direction (PGD). Review of authorisation will take place on each PGD update and at the individual's annual PADR.

Name: **Role:**		Sign / Initial	Further training identified (Y/N)	Comments (also specify any further training required)
1	The PGD sign off is for the following PGD:(document the exact title and PGD number) _____			
2	We have discussed the expiry of the PGD and are using a version accessed electronically			
3	The member of staff has the appropriate qualifications and professional registration as outlined in the PGD			
4	The Patient Group Direction has been read in full by the staff member			
5	The identified training has been completed as specified in the PGD and is in date			
6	We have discussed some examples of inclusion criteria and exclusion criteria			
7	The staff member is confident in the administration method and doses			

Staff member print & sign name		Date
Manager or senior team lead to print & sign name		Date

Please send a copy of this completed form to individual's line manager and to the staff member, in conjunction with the PGD Appendix A authorisation sheet. A copy of this form should also be kept by service lead in the training file.