



Patient Self-Administered Injections – Guidelines for the Pharmacist

1. PURPOSE

- 1.1. When a patient is prescribed a self-administered injection, it is crucial that they receive proper training to self-inject and are comfortable enough to do so at home before leaving the pharmacy;
- 1.2. This document is designed to assist pharmacists in ensuring that patients are adequately prepared to self-inject at home and pharmacists have all the tools needed to allow patients to learn within the pharmacy;
- 1.3. The [NAPRA Essential Competencies for Injection of Other Substances](#) can be used as a tool for ensuring a safe patient self-administered injection.

2. TRAINING AND CERTIFICATION

- 2.1. Pharmacists must maintain Standard First Aid and CPR Level C with AED certification to appropriately monitor and respond to adverse events following a patient self-administered injection.

3. STANDARDS OF PRACTICE

- 3.1. Pharmacists are expected to apply their medication use expertise while performing their daily activities as outlined in the [NAPRA Model Standards of Practice](#);
- 3.2. For a patient self-administered injection, pharmacists also must:
 - 3.2.1. Ensure the pharmacy has a clean, safe, appropriately private and comfortable environment where the patient is to receive education and be monitored afterwards as outlined in [SCPP Administration of Drugs by Injection and Other Routes \(4.3., 4.4., 4.7., 4.8., and 5.3.\)](#)

4. PROCEDURE

Supply the patient with proper education including, but not limited to the following:

- 4.1. Drug information:
 - 4.1.1. Name of the drug and it's indication;
 - 4.1.2. Benefits and risks including what to do in case of anaphylaxis;
 - 4.1.3. Appropriate storage conditions;

4.2. Administration information:

- 4.2.1. Route of injection (e.g. subcutaneous);
- 4.2.2. Injection site selection and rotating injection sites (if applicable);
- 4.2.3. How to prepare the medication for injection;
- 4.2.4. Correct administration technique including techniques for reducing the pain;

Practice Tips

Encourage the patient to practice and re-demonstrate self-injecting until they feel confident enough to perform an injection outside of the pharmacy.

The patient can simulate the injection by going through each step, as taught by the pharmacist, without actually injecting themselves.

If the pharmacist deems the patient unable to self-administer the prescribed drug, the patient can be referred to a health care provider that can administer injections (e.g. a pharmacist with [Advanced Method Certification](#)).

Source: Camden Coalition of Healthcare Providers. Camden Citywide Diabetes Collaborative [“Guidelines for Education and Training”](#)

4.3. Proper infection control:

- 4.3.1. Hand hygiene;
- 4.3.2. Clean the injection site with an alcohol swab/pad. Let the area dry before injecting to prevent stinging;
- 4.3.3. Safe disposal of sharps in a designated sharps container;
- 4.3.4. Use a new, sterile needle for each injection;

Safe Practice Alert Concerning Re-Use of Single Use Devices

Insulin pens are for single-patient-use only and should **never** be used for more than one person. There is a risk of blood-borne pathogen transmission if the pen is used for more than one patient, even when the needle is changed.

Source: Saskatchewan Ministry of Health Safe Practice Alert [“Infection Prevention During Blood Glucose Monitoring and Insulin Administration”](#)

4. RELATED RESOURCES

SCPP [“Needlestick Injury Guidelines”](#)