NHS Grampian

Protocol For The Administration Of Minims Tropicamide 1% Eye Drops By Registered And Unregistered Healthcare Staff Working Within NHS Grampian Diabetic Eye Screening Service

Lead Author:	Consultation Group:	Approver:
Service Manager/Senior Charge Nurse, Diabetic Eye Screening, ARI	See page 2	Medicines Guidelines and Policies Group

Signature:		Signature:
		

NHSG Identifier:	Review Date:	Date Approved:
MGPG/Protocol/ Tropicamide/1729	September 2027 **Expiry Date:** September 2028	September 2025

NHS Grampian have authorised this protocol to help individuals by providing them with more convenient access to an efficient and clearly defined service within the NHS Boards. This Protocol cannot be used until Appendix 1 and 2 are completed.

Uncontrolled when printed

Version 2

Revision History:

Reference and approval date of previous superseded protocol	NHSG/Protocol/Tropicamide/MGPG1331, Version 1	
Date of change	**Summary of Changes**	**Section heading**
April 2025	3 year review.	

NoS Identifier: MGPG/Protocol/Tropicamide/1729

Keyword(s): Tropicamide protocol dilation nurse non registered professional eye screening

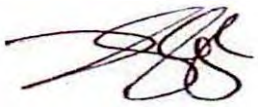
Policy Statement: It is the responsibility of the individual healthcare professionals and their line managers to ensure that they work within the terms laid down in this protocol and to ensure that staff are working to the most up to date protocol. By doing so, the quality of the services offered will be maintained, and the chances of staff making erroneous decisions which may affect individual, staff or visitor safety and comfort will be reduced. Supervisory staff at all levels must ensure that staff using this protocol act within their own level of competence.

The lead author is responsible for the review of this protocol and for ensuring the protocol is updated in line with any changes in clinical practice, relevant guidelines, or new research evidence.

Review date: The review and subsequent expiry date should not be more than 3 years from the date the protocol was authorised.

Document:	Drafted:	June 2025
	Completed:	June 2025
	Approved:	September 2025
	Amended:	

Approved and authorised for use within NHSG by;

Medicines Guidelines and Policies Group Chair	Signature	Date Signed
Lesley Coyle		29/10/2025

Management and Monitoring of Protocol

Consultative Group

Name:	Title:
Professor Sam Philip	Consultant Physician Diabetes and Endocrinology
Dr Cynthia Santiago	Associate Specialist Ophthalmology
Charity Shonge	Clinical Pharmacist
Mrs Sandra Wilson	Nurse Manager Diabetes, Heart Failure and Diabetic Eye Screening

Protocol For The Administration Of Minims Tropicamide 1% Eye Drops By Registered And Unregistered Healthcare Staff Working Within NHS Grampian Diabetic Eye Screening Service

Clinical indication to which this Protocol applies

Definition of situation/Condition	This protocol will authorise approved registered nurses and unregistered healthcare staff as detailed in the characteristics of staff authorised, to administer Minims Tropicamide 1% eye drops to individuals attending for diabetic eye screening for the purpose of dilating the pupil to aid assessment. This protocol should be used in conjunction with the recommendations in the current British National Formulary (BNF), British National Formulary for Children (BNFC), and the individual Summary of Product Characteristics (SmPC).
Inclusion criteria	Individuals aged 16 years and over attending for diabetic eye screening. Prior to the administration of the medicine, valid consent to receiving treatment under this protocol must be obtained. Consent must be in line with current NHSG consent policy.
Exclusion criteria	• Individuals under 16 years of age • The individual has a known or suspected hypersensitivity to the medicine or any of its excipients • The individual has previously experienced an adverse reaction to the medicine • Pregnancy • Where there is no valid consent • Tropicamide is contraindicated in narrow angle glaucoma and in eyes where the filtration angle is narrow, as an acute attack of angle closure glaucoma may be precipitated.
Precautions and special warnings	Use with caution in an inflamed eye, as hyperaemia greatly increases the rate of systemic absorption through the conjunctiva. Systemic absorption may be reduced by compressing the lacrimal sac at the medial canthus for a minute during and following the instillation of the drops. (This blocks the passage of drops via the naso-lacrimal duct to the wide absorptive area of the nasal and pharyngeal mucosa. It is especially advisable in children).

	Tropicamide may cause increased intraocular pressure. The possibility of undiagnosed glaucoma should be considered in some individuals, such as elderly individuals.
Action if excluded from treatment	Medical advice must be sought – refer to relevant medical practitioner. Document the reason for exclusion under the protocol and any action taken in the individual's appropriate clinical records.
Action if treatment is declined	Inform/refer to the relevant medical practitioner if individual declines treatment. Document that the administration was declined, the reason and advice given in appropriate clinical records.

Description of treatment available under the protocol

Name form and strength of medicine	Minims Tropicamide 1% Eye Drops 0.5mL unit dose solution (Administer)
Legal status	Minims Tropicamide 1% eye drops are a Prescription-only Medicine (POM). Although a POM the Medicines and Healthcare Products Regulatory Authority (MHRA) have confirmed that there are no legal restrictions on who can administer/instil eye drops such as tropicamide for the purposes of dilating the pupil for screening. This must be supported by the health board and have appropriate governance and training. Eye-Drops-Instillation-by-Unregistered-Health-Care-Professionals-for-use-within-NHS-Ophthalmic-Services.pdf (rcophth.ac.uk)
Dosage/Maximum total dose	One drop to be administered to the eye followed by a 10-minute waiting interval to give sufficient time for pupillary response. Process repeated if pupils do not dilate sufficiently up to a maximum of 3 drops/instillations. Systemic absorption may be reduced by compressing the lacrimal sac at the medial canthus for a minute during and following the instillation of the drops. (This blocks the passage of drops via the naso-lacrimal duct to the wide absorptive area of the nasal and pharyngeal mucosa. It is especially advisable in children).

Frequency of dose/Duration of treatment	See Dosage/Maximum total dose section above.
Maximum or minimum treatment period	N/A
Route/Method of administration	Ophthalmic administration.
Quantity to be administered	See Dose/Maximum total dose section above.
Storage requirements	Store below 25°C. Do not freeze. Protect from light. Each Minims unit should be discarded after a single use.
Follow-up (if applicable)	Individuals should not leave if they are feeling unwell without speaking to the healthcare worker who administered the medicine first. If necessary, a doctor or the individuals GP should be contacted for advice.
Advice (Verbal)	Advise individual what to expect and what to do for minor and major reactions. If serious adverse or persistent effects occur, the individual should be advised to contact their GP/Accident and Emergency department/NHS24.
Advice (Written)	The Patient Information Leaflet (PIL) contained in the medicine(s) should be made available to the individual. Where this is unavailable, or unsuitable, sufficient information should be given in a language that they can understand.
Identifying and managing possible adverse reactions	Transient stinging, dry mouth and blurred vision may occur following the use of this product. Patients who receive a mydriatic may suffer from photophobia and this may impair their ability to drive under certain circumstances. **This list is not exhaustive. Please also refer to current BNF and manufacturers SmPC for details of all potential adverse reactions.** **BNF**: BNF British National Formulary - NICE BNF for Children British National Formulary - NICE **SmPC/PIL/Risk Minimisation Material:**

	Minims Tropicamide 1% w/v, Eye drops solution - Summary of Product Characteristics (SmPC) - (emc) | 1382 MHRA Products | Home If an adverse reaction does occur give immediate treatment and inform relevant medical practitioner as soon as possible. Report any adverse reactions using the Yellow Card System. Yellow Card Scheme - MHRA
Facilities and supplies required	The following are to be available at sites where the medicine is to be administered: • Appropriate storage facilities • An acceptable level of privacy to respect individual's right to confidentiality and safety • Basic airway resuscitation equipment (e.g. pocket mask, bag valve mask, supraglottic airway) • Immediate access to Epinephrine (Adrenaline) 1 in 1000 injection • Access to a working telephone • Another competent adult, who can summon urgent emergency support if required should ideally be present • Access to medical support (this may be via the telephone) • Approved equipment for the disposal of used materials • Clean and tidy work areas, including access to hand washing facilities or alcohol hand gel • A copy of this current protocol in print or electronically.

Characteristics of staff authorised to administer medicine(s) under this protocol

Professional qualifications	• Registered Nurses as recognised by the Nursing and Midwifery Council (NMC) who have completed/working towards the relevant units of City & Guilds/Pearsons Screening Diploma in line with DES Programme requirements and completed local training and obtained competence. • Diabetic Eye Screeners who have completed/working towards the relevant units of City & Guilds/Pearsons Screening Diploma in line with DES Programme requirements and completed local training and obtained competence.
Specialist competencies	**Approved by the organisation as:** • Competent to assess the individual's capacity to understand the nature and purpose of the medicine administration in order to give or refuse consent

	• Competent to undertake the administration of the • medicine • Competent to work under this protocol.
Ongoing training and competency	**All registered and unregistered healthcare staff working within the NHS Grampian Diabetic Eye Screening service working under this protocol must:** • Have attended basic life support training in-line with Board requirements • Have undertaken NHS e-anaphylaxis training or equivalent which covers all aspects of the identification and management of anaphylaxis in-line with Board requirements • Completed/working towards the relevant units of City & Guilds/Pearsons Screening Diploma in line with DES Programme requirements • Have completed local training on the use of Tropicamide 1% and obtained competence • Maintain their skills, knowledge and their own level of competence in this area • Have undertaken local training within the screening department to achieve competence in administration with a revalidation period of 2 years • Have knowledge and familiarity of the following; o SmPC for the medicine(s) to be administered in accordance with this protocol.
Responsibilities of professional manager(s)	**Professional manager(s) will be responsible for;** Ensuring that the current protocol is available to all staff providing care under this direction. Ensuring that staff have received adequate training in all areas relevant to this protocol and meet the requirements above. Maintain up to date record of all staff authorised to administer the medicine(s) specified in this protocol.

Documentation

Authorisation of administration	Healthcare staff (registered and unregistered) working within the diabetic eye screening service within NHS Grampian can be authorised to administer the medicine(s) specified in this protocol by their Professional Line Manager or Ophthalmic Consultant. All authorised staff are required to read the protocol and sign the Agreement to Administer Medicines Under Protocol (Appendix 1). A Certificate of Authorisation (Appendix 2) signed by the authorising professional/manager should be supplied. This should be held in the individual health professional's records, or as agreed locally.
Record of administration	An electronic or paper record for recording the screening of individuals and the subsequent administration, or not of the medicine(s) specified in this protocol must be completed in order to allow audit of practice. This should include as a minimum: • Date and time of administration • Individuals name and CHI • Exclusion criteria, record why the medicine was not administered (if applicable) • Record that valid consent to treatment under this protocol was obtained • The name, dose, form, route of the medicine administered • Advice given, including advice given if excluded or declined treatment under this protocol • Signature and name in capital letters of the healthcare professional who administered the medicine • Record of any adverse effects (advise individuals GP/relevant medical practitioner) • Record of batch number and expiry date in case of recall or adverse event. Depending on the clinical setting where administration is undertaken, the information should be recorded manually or electronically, in one (or more) of the following systems, as appropriate: • Secondary Care Medical Notes • HEPMA • Individual service specific systems.

Audit	All records of the medicine(s) specified in this protocol will be filed with the normal records of medicines in each practice/service.
References	**Electronic Medicines Compendium** http://www.medicines.org.uk Minims Tropicamide 1% w/v, Eye Drop solution– Date of revision of text 22/09/16, accessed 22/05/2025. **British National Formulary** https://about.medicinescomplete.com/ accessed 22/05/2025 **The Royal College of Ophthalmologists:** Eye Drops Instillation by Unregistered Health Care Professionals for use within NHS Ophthalmic Services (November 2020)

Appendix 1

Healthcare Staff Agreement to Administer Medicine(s) Under Protocol

I: _____ (Insert name)

Working within: _____ e.g. Area, Practice

Agree to administer the medicine(s) contained within the following Protocol

Protocol For The Administration Of Minims Tropicamide 1% Eye Drops By Registered And Unregistered Healthcare Staff Working Within NHS Grampian Diabetic Eye Screening Service, Version 2

I have completed the appropriate training to my professional standards enabling me to administer the medicine(s) under the above protocol. I agree not to act beyond my professional competence, nor out with the recommendations of the protocol.

Signed: _____

Print Name: _____

Date: _____

Profession: _____

Professional Registration number/PIN: _____

Appendix 2

Healthcare Staff Authorisation to Administer Medicine(s) Under Protocol

The Lead manager/Professional of each clinical area is responsible for maintaining records of all clinical areas where this protocol is in use, and to whom it has been disseminated.
The Senior Nurse/Professional who approves a healthcare professional to administer the medicine(s) under this protocol is responsible for ensuring that they are competent, qualified and trained to do so, and for maintaining an up-to-date record of such approved persons.
The Healthcare Staff Member that is approved to administer the medicine(s) under this protocol is responsible for ensuring that they understand and are qualified, trained and competent to undertake the duties required. The approved person is also responsible for ensuring that administration is carried out within the terms of the direction.
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Local clinical area(s) where the listed healthcare professionals will operate under this protocol:

Name of Healthcare Professional	Signature	Date	Name of Manager	Signature	Date

Protocol For The Administration Of Minims Tropicamide 1% Eye Drops By Registered And Unregistered Healthcare Staff Working Within NHS Grampian Diabetic Eye Screening Service, Version 2					
Name of Healthcare Professional	**Signature**	**Date**	**Name of Manager**	**Signature**	**Date**