

STATE OF CONNECTICUT  
DEPARTMENT OF DEVELOPMENTAL SERVICES  
NURSING DELEGATION PROCEDURE

**PROTOCOL: ADMINISTRATION OF DIAZEPAM RECTAL GEL**

- I. **Purpose:** To stabilize a person experiencing seizure activity

Definitions: **Licensed Nurse:** A Registered Nurse (R.N.) or an Authorized Licensed Practical Nurse (L.P.N.), working under the direction of a registered nurse, who holds a current license issued by the state of Connecticut under Chapter 378 of the Connecticut General Statutes.

II. **Responsibility:**

- A. Training: Initial training will be conducted by a registered nurse.
- B. Performance:
1. Direct care staff who have completed:
    - a. baseline competency training checklist of DDS
    - b. procedure task specific training
    - c. Medication Certification requirements
  2. Trained med certified staff will follow person procedural guidelines including notifying the licensed nurse as indicated.
- C. Monitoring:
1. The licensed nurse.
  2. Trained staff performing the task under the clinical direction of the licensed nurse will notify the nurse of issues and/or outcomes as directed by the licensed nurse.
- D. Documentation:
1. Individuals who perform the task will record all pertinent information as instructed by the licensed nurse.
  2. The licensed nurse will ensure agency compliance with required documentation.

III. **Training to Include:**

- A. Initial: Overview of the procedure, its purpose. Demonstration of techniques by licensed nurse and return demonstration by the student.
- B. Documentation of Training and Monitoring:
1. Training: The licensed nurse completes training record of staff on “DDS Nursing Delegation Procedure Performance Evaluation Form”.
  2. Monitoring: The licensed nurse completes DDS “Nursing Delegation Task Competency Monitoring Form”.
- C. Frequency of Monitoring:
1. Staff will be monitored in their proficiency at this skill as determined by the licensed nurse, but not to exceed 12 months.

IV. **Related Knowledge:**

- A. Definition of seizures
- B. Overview of Diastat (diazepam rectal gel) drug information
- C. Contraindications for administration of Diastat (diazepam rectal gel)
- D. Documentation procedures for narcotics
- E. Care of persons experiencing seizures
- F. Storing Diastat (diazepam rectal gel)

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Name:

Residence:

Date of Initial Order:

Date Order Renewed:  
(in pencil)

Order:

**I. Diagnosis:**

**II. Purpose of Procedure** (why individual needs procedure)

\_\_\_\_\_  
Signature of Delegating RN

\_\_\_\_\_  
Date

**III. Procedure**

TASK	RATIONALE
<b>A. Gather Equipment:</b>	
1. Wash hands. 2. Collect equipment – Diastat (diazepam rectal gel), lubricant, gloves	<ul style="list-style-type: none"> <li>• To prevent spread of infection</li> <li>• Should be prepared before beginning task</li> </ul>
<b>B. Individual's Preparation:</b>	
1. Explain to individual and staff what you are going to do	<ul style="list-style-type: none"> <li>• This should help to reduce anxiety</li> </ul>
<b>C. Perform Task:</b>	
1. Position individual on their left side (Sims position). Allow for as much privacy as the situation will allow 2. Get Diastat (diazepam rectal gel) container 3. Remove Diastat (diazepam rectal gel) syringe from the container (note pin seal is attached to the cap) 4. Push up with thumb to remove cap from syringe. Be sure seal pin is removed with the cap 5. If rectal tip is not pre-lubricated, lubricate rectal tip with lubricating jelly 6. Put on Gloves 7. Insure the individual is on their left side 8. Bend upper leg to expose rectum 9. Separate buttocks to expose rectum	<ul style="list-style-type: none"> <li>• Individual privacy and dignity should be maintained</li> <li>• Prepare Diastat (diazepam rectal gel) for use</li> <li>• Promote infection control</li> <li>• Improves access to site</li> </ul>

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<ol style="list-style-type: none"> <li>10. Gently insert syringe tip into rectum. <i>Note: rim should be snug against rectal opening.</i></li> <li>11. Slowly count to 3 while gently pushing plunger in until it stops</li> <li>12. Slowly count to 3 before removing syringe from rectum</li> <li>13. Slowly count to 3 while holding buttocks together to prevent leakage</li> <li>14. Keep the person on the side facing you, note time given, continue to observe, and notify nurse for further instruction</li> <li>15. Remove gloves and wash your hands</li> </ol>	<ul style="list-style-type: none"> <li>• This will insure proper administration and maximum effectiveness</li>   <li>• Promote infection control</li> </ul>
<b>D. Check Person's Status:</b>	
<ol style="list-style-type: none"> <li>1. Any measurement outside of normal should be handled according to PRN orders and referred to the nurse as specified</li> <li>2. If Diastat (diazepam rectal gel) is ineffective in relieving seizure activity then 911 shall be alerted</li> </ol>	<ul style="list-style-type: none"> <li>• Staff should be aware of need for follow-up</li> </ul>
<b>E. Care of Equipment</b>	
<ol style="list-style-type: none"> <li>1. Restore or discard all equipment appropriately</li> </ol>	<ul style="list-style-type: none"> <li>• Provide clean environment</li> </ul>
<b>F. Documentation:</b>	
<ol style="list-style-type: none"> <li>1. Document administration of Diastat (diazepam rectal gel) on MAR</li> <li>2. Document administration of Diastat (diazepam rectal gel) on the narcotic disposition record.</li> <li>3. Any other documentation as requested</li> </ol>	<ul style="list-style-type: none"> <li>• Documentation will reflect Diastat (diazepam rectal gel) was administered</li> <li>• Proper narcotic documentation</li> </ul>

**PLEASE NOTE: NO TASK IS CONSIDERED COMPLETED UNTIL DOCUMENTATION AND REQUIRED REPORTING OCCURS. ANY CHANGE OR VARIATION FROM THE PERSON'S BASELINE SHOULD BE REPORTED PROMPTLY TO THE LICENSED NURSE.**