What happens after rapid tranquillisation?

The staff will request to take physical observations like blood pressure and pulse. This will happen for every 15 minutes for the 1st hour, then hourly for 2 hours or until the person becomes active and there are no further concerns.

The staff will inform the doctor about the incident.

Following an incident where rapid tranquillisation has been given, staff will offer the person an opportunity to talk about what happened. A plan can then be made which will help avoid this situation happening again.

Giving us feedback

If you want to give feedback (comments, compliments, concerns or complaints) about the service that you, or someone you care for, have received, we recommend you speak to a member of staff from that service in the first instance.

Or you can contact the Patient Support Service for help and advice.

Tel: 0300 013 4799

Email: feedback.cnwl@nhs.net

If you need an interpreter, or other support to give feedback, please let us know and we will do our best to make this possible for you.

WHAT YOU NEED TO KNOW ABOUT: RAPID TRANQUILLISATION
What is rapid tranquillisation?

Rapid tranquillisation is the use of medicine to help calm a person who is extremely distressed and is at risk of harm to themselves, or possibly those around them. This is only normally used when other methods haven’t worked.

“Rapid Tranquillisation is used as a way to calm distressed patients.”

Why would someone need to be given rapid tranquillisation?

When a person is very scared or distressed they can sometimes pose a risk to themselves, or to those around them.

Do I have a choice?

You can make an advanced statement about how you would prefer to be treated and what might work best for you in situations that could result in restraint. You can do this by completing an advanced statement in your CNWL Health & Wellbeing Plan. If you do not have a copy of the CNWL Health & Wellbeing Plan, please ask your named nurse for a copy.

Types of rapid Tranquillisation

There are two routes to take rapid tranquillisation.

1. Staff will first offer someone medicine in tablet or liquid form that can be swallowed.

2. If someone does not like tablets or liquids, or refuses to take them, and are putting their or others safety at risk then medication can be given via an injection into their muscle – usually around the hip area.
When a person is upset they may deliberately hurt themselves and we want to keep them safe.