

SUBJECT: MEDICATION RECONCILIATION/ VERIFICATION	REFERENCE #3004
	PAGE: 1 OF: 7
DEPARTMENT: PHARMACY	EFFECTIVE:
APPROVED BY:	REVISED:

**POLICY:**

- \_\_\_\_\_ Hospital will implement and maintain a process to obtain and document a complete list of a patient’s current medications upon admission.
- Medication reconciliation is a multidisciplinary process between Nursing, the Pharmacist and the physician with patient/family involvement.
- Medication reconciliation/verification will be performed:
  - Upon admission/entry into the facility, i.e., Emergency Department, Surgery, Direct Admits
  - When a patient is transferred or referred to another setting, service, practitioner or level of care within or outside of this organization
  - Any transition of care where new medications are ordered or existing orders are rewritten (as defined by the organization)
  - At the time of discharge:
    - Medication reconciliation at the time of discharge avoids therapeutic duplication, drug interactions and omissions of medications that may have been discontinued or placed on hold during the patient’s hospitalization.
- The nurse completing the admission assessment will obtain and document the patient’s current medications taken at home. These medications will be listed on the Medication Reconciliation/Verification Form.
  - Pharmacy consultation shall be required for:
    - Patients taking high-risk medications
    - Patients taking anticonvulsants
    - Patients taking more than \_\_\_\_ medications
    - When a patient reports abnormal doses
    - Other

SUBJECT: CONTROLLED DRUG MANAGEMENT ON PATIENT CARE UNITS	REFERENCE #3209
	PAGE: 1 OF: 3
DEPARTMENT: PHARMACY	EFFECTIVE:
APPROVED BY:	REVISED:

**POLICY:**

To ensure adequate control, dispensing and accountability of all controlled substances in conformity with state and federal regulations.

**SECURITY:**

- When not in use, the controlled substances storage area on each patient care unit must be kept double-locked and secure at all times.
- Keys to the controlled substances must only be carried by a nurse approved to pass medications. At no time can the keys be released to an unauthorized person.
- Should a nursing station be temporarily closed, the controlled substances keys must be turned in to the Nursing Supervisor.
- When a nurse takes the controlled substances keys home or the keys are lost, a report must be made to Nursing Administration immediately. If the keys are lost, Engineering Department must also be notified to change the locks on the controlled substances storage area.

**ORDERING CONTROLLED SUBSTANCES:**

- Controlled substance drugs may be ordered from the Pharmacy Department by completing and forwarding a Controlled Substance Order Form to the Pharmacy Department. The medication will be taken from the narcotic cabinet in the Pharmacy Department by the Pharmacist and the Pharmacist will note in the Controlled Substance (Class II) Disposition Logbook; the date, patient care unit, number of units dispensed; indicate the balance of drug remaining; check to see that the inventory is correct and initial the entry. The licensed nurse will then sign the Controlled Substance Order Form upon receipt of the medication.
- When a controlled substance is picked up from the Pharmacy or delivered to any patient care unit, the nurse accepting the controlled substance(s), must ensure that the amount is entered onto the Controlled Substance Disposition Sheet. The nurse is also to ensure that drug delivered or obtained is intact and not broken.

SUBJECT: TITRATING MEDICATIONS	REFERENCE #3314
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DEPARTMENT: PHARMACY	EFFECTIVE:
APPROVED BY:	REVISED:

**POLICY:**

It is the policy of this institution to allow orders for medication titration, which is the progressive increase or decrease of the medication dose in response to the patient's clinical status.

**PROCEDURE:**

- Orders for medications that require titration must include the desired state the prescriber desires for the patient (i.e., titrate medication to achieve B/P of \_\_\_/\_\_\_). Useful dosage adjustment increments must be known before titrating medication to allow clinical staff to determine how much to increase or decrease the medication as attempts are made to achieve the "ordered state" for the patient. Titration increments may vary depending on the patient's clinical status, comorbid conditions and other factors. The frequency of dose adjustments will vary with upward and downward adjustments generally being unequal. (Upward adjustments depend on how rapid the onset of the drug occurs and the length of time before it peaks, downward adjustments are generally related to the drugs half-life and duration.)
- Medications ordered for titration must be approved by the Pharmacy and Therapeutics Committee. Safe dose ranges for medications that are to be titrated must be reviewed and approved by that committee. For titrated medications:
  - A dose limit (maximum and minimum limits) at which the physician must be called for each titrated medication must be set.
  - Accepting orders for titration of medications without dose limits is **unsafe**. Therefore orders received for titrated medication without dose limits will not be prepared or dispensed. The Pharmacist will contact the prescriber to obtain dose limits.
  - If a titrated medication continues at or above the dose limit, the licensed independent practitioner ordering the titrated medication must be contacted and must approve the current dose at least every 24 hours by writing specific orders with a new dose limit at which he/she should be contacted.
  - Dose limits must be clearly documented on all labels of titrated solutions.
  - Dose limits for titrated medications must be included on any preprinted orders, clinical practice guidelines or written protocols for titrated medications.
  - Clinical staff must assess the patient frequently when titrating medications to detect potential problems as early as possible.

SUBJECT: MEDICATION ADMINISTRATION	REFERENCE #3501
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DEPARTMENT: PHARMACY	EFFECTIVE:
APPROVED BY:	REVISED:

**POLICY:**

- Medications will be administered only upon the order of physicians, dentists or podiatrists, who are members of the medical staff, are authorized members of the house staff or have been granted clinical privileges to write such orders and under the guidelines of their respective scopes of practice. Administration will be by a physician, registered nurse, licensed practical/vocational nurse, respiratory therapist, physical therapists and/or their respective supervised students.
- Registered nurses may administer all parenteral, oral, rectal and topical medication, including blood and blood products, if not specifically excluded elsewhere by medical staff by-laws.
- Licensed practical/vocational nurses may administer IV electrolytes, nutrients, blood and blood products, if IV certified, and all IM, subcutaneous, intradermal, rectal, topical, sublingual and oral medications, if not specially excluded elsewhere by medical staff by-laws. (Verify with your state’s Board of Nursing.)
- In the instance of intravenous therapy and cancer chemotherapy, only those persons approved by the hospital to administer such medications shall be allowed to do so.
- Oral contrast media is considered a medication. Oral contrast media may be administered, according to policy and procedure, to inpatients and outpatients without a Pharmacist’s review of the physician’s order. This does not include circumstances where an oral contrast media is ordered to be administered to a patient for a non-urgent test. In this situation, the oral contrast media order will be reviewed by the Pharmacist according to the Pharmacist Order Verification policy and procedure before administration.
- The following policies will govern administration of medication in this institution:
  - Medication Administration Record will be compared with the Kardex prior to preparation of any medication at least one (1) time each shift. The individual administering the medication will verify the medication selected for administration is the correct medication based on the medication order and the medication product label. The individual administering a medication will be aware of the following information concerning each medication before administration:
    - Therapeutic action
    - Untoward actions or side effects
    - Antidote (if applicable) and its location

## POSITION DESCRIPTION / PERFORMANCE EVALUATION

Job Title: Pharmacist  
 Prepared by: \_\_\_\_\_  
 Date: \_\_\_\_\_

Supervised by: Pharmacy Director  
 Approved by: \_\_\_\_\_  
 Date: \_\_\_\_\_

**Job Summary:** Interprets physician prescriptions and medication orders. Acts as a drug information resource to patients, medical staff, nursing staff and ancillary department personnel. Compounds and dispenses prescribed medications and other pharmaceuticals for patient care by performing the related duties.

**DUTIES AND RESPONSIBILITIES:**

E = Exceeds the Standard      M = Meets the Standard      NI = Needs Improvement

**Demonstrates Competency in the Following Areas:**

**General Responsibilities:**

<b><u>Demonstrates Competency in the Following Areas:</u></b>	<b><u>E</u></b>	<b><u>M</u></b>	<b><u>NI</u></b>
Reviews prescriptions issued by physicians or other authorized prescribers to assure accuracy and determines formulas and ingredients needed.	2	1	0
Compounds medications using standard formulas and processes, such as weighing, measuring and mixing ingredients.	2	1	0
Monitors all posting onto the patient profiles in order that accuracy, drug allergies, drug interactions, duplicate therapy, rational drug therapy and incompatibilities may be realized and better patient care received.	2	1	0
Checks patient medication cassettes prior to delivery to patient care areas to ascertain that the correct drug, dosage form, schedule and strength is being dispensed.	2	1	0
Performs all aspects of patient care in an environment that optimizes patient safety and reduces the likelihood of medical/health care errors.	2	1	0
Prepares IV admixtures and extemporaneous parenteral products under aseptic conditions.	2	1	0
Directs Pharmacy Department personnel engaged in admixing, packaging and labeling pharmaceuticals.	2	1	0
Answers questions and provides information to physicians, nurses, patients and other healthcare professionals on the appropriate use of medications, drug interactions, side effects, dosage, storage, etc.	2	1	0
Assists in teaching programs (departmental, medical, nursing, community).	2	1	0
Endorses policies and procedures of the department and of the hospital.	2	1	0
Ensures the maintenance and proper operation of equipment and supplies in the work areas.	2	1	0
Maintains established procedures concerning quality control, security of controlled substances and disposal of hazardous waste.	2	1	0
Enters data into the computer system (Pharmacy program), such as patient, prescribed medications and cost, and maintains patient profiles and charge system.	2	1	0
Instructs students and other medical personnel on matters pertaining to the Pharmacy Department.	2	1	0
Reviews and monitors drug therapy that requires dosing adjustments as authorized by the physician.	2	1	0