

 <p><b>Connecticut Valley Hospital Nursing Policy and Procedure</b></p>	<p><b>SECTION F: MEDICATION POLICIES AND PROCEDURES</b></p> <p><b>CHAPTER 23: MEDICATION MANAGEMENT</b></p> <p><b>POLICY AND PROCEDURE 23.19 Monitoring and Reporting of Adverse Drug Reactions</b></p>
<p>Authorization: Nursing Executive Committee</p>	<p>Date Effective: May 1, 2018 Scope: Registered Nurses and Licensed Practical Nurses</p>

**Standard of Practice:**

The nurse will immediately notify the physician and contact the ADR hotline whenever there is a suspicion of an adverse drug reaction as well as assess and attend to the patient who is suspected of experiencing an adverse drug reaction.

**Standard of Care:**

The patient can expect to receive immediate care and treatment by the nurse as prescribed by his/her physician.

**Policy:**

Licensed nursing staff shall report adverse drug reactions to both the Physician and the ADR hotline by calling ADRS (2377).

**Definitions:**

Connecticut Valley Hospital uses the definition of ASHP (American Society of Health- System Pharmacists): An ADR is “any unintended, undesired, or excessive response to a medication”.

- a. Any unintended and/or unexpected response to a medication that causes or prolongs hospitalization and/or requires treatment with a prescription drug and/or requires modification of existing drug therapy and/or is fatal or life-threatening”. Adverse drug reactions should be reported if, in the view of the reporter, it will affect the patient’s current and future medical therapy. Adverse reactions due to administration of established drugs and diagnostics, investigational drugs and biological agents are to be reported. Reactions observed for patients are reportable.
- b. Non-reportable side effect is an expected, well-known reaction resulting in a little or no change in patient management (e.g., drowsiness or dry mouth due to administration of certain antihistamines or nausea associated with the use of antineoplastics). Minor temporary or reversible side effects normally associated with a drug in question need not be reported. It is also not necessary to report anticipated reactions resulting from a known pharmacological effect of a particular agent.

**Procedure:**

1. The Registered Nurse will assess the severity of the reaction, monitor the patient for any change in condition, and assign a nursing staff member to remain with the patient until evaluated by the medical provider.
2. Notify the patient's attending physician, ACS medical provider, or on-call physician of assessment findings.
3. Document an Integrated Progress Note addressing the assessed adverse drug reaction and include all specific signs and symptoms, patient complaints as well as any measures taken to ensure the safety and well-being of the patient.
4. Call extension 2377 and report the alleged adverse drug reaction.
5. The unit pharmacist will complete the Suspected ADR Consult Form.