

 <p>Connecticut Valley Hospital Nursing Policy and Procedure</p>	<p>SECTION F: MEDICATION POLICIES AND PROCEDURES</p> <p>CHAPTER 23: MEDICATION MANAGEMENT</p> <p>POLICY AND PROCEDURE 23.9 Treatments</p>
<p>Authorization: Nursing Executive Committee</p>	<p>Date Effective: May 1, 2018 Scope: Registered Nurses and Licensed Practical Nurses</p>

Non-Medication Treatments

A. Treatment Administration Record (TAR)

- At the top of the TAR, enter the current month and year. Record or addressograph patient name and MPI number in the appropriate area.
- Document any allergies.
- In the “date reordered” block, in ink, enter the date ordered or renewed
- In the “Initials” block, enter the transcriber’s initials in the upper half of the slashed box.
- In the “Nurse identification” block, enter Transcriber (Nurse) initials and signature.
- In the first open block, in ink, enter the treatment and directions.
- In the “expiration date” block, note the expiration date and time in pencil.
- In the “hour” column, indicate the hours of treatment, including A.M. or P.M.

Every Treatment must be entered in a separate block.

As additional TAR’s are added, the *sheets must be numbered and stapled*.

Treatments which include medication(s) must be transcribed onto the Medication Administration Record (MAR).

EXAMPLE

TREATMENT KARDEX

Month April Year 2014

ALLERGIES:

Identification of
Nurses (Initials
and Signatures)

MS	Mary Smith

NKA

Date (Re)Ordered	Initials		Expr. Date	HR	1	2	3	4	5	6	7	8	9	10	11	12	13	14
2/2/14	MA		2/10/14	8														
		Dry sterile dressing (DSD)																
		DSD to right foot x 7 days																
		@ 8:00 AM daily.																

B. Physician's Order Sheet:

- Orders written by two (2) different physicians must be transcribed and signed-off separately.

When all orders have been transcribed from the physicians order sheet, completely underline the order, extending the line up the right-hand side of the orders to insure that the last order is enclosed and that there is clarity about which orders have been transcribed. Sign-off these orders with name, credentials, date, and time. If the physician writes an order without indicating the time written, the transcription time will be considered the time the order was transcribed, and the expiration date and time calculated accordingly.

EXAMPLE:

Dry sterile dressing (DSD)
DSD to right foot x7 days
@ 8:00 AM daily
J. Smith, MD

N. Nurse, RN
11:00 AM 2/2/14

- If items are required from the pharmacy, remove Pharmacy copy from the physician's order sheet and forward to the Pharmacy. STAT orders may be phoned or faxed directly to the Pharmacy **at ext. 6140.**
- When the last Pharmacy copy has been removed, line out any excess space remaining on the bottom of the face sheet (white copy) to insure that no further orders can be written. The white copy of the physician's order sheet is the only copy that permanently remains in the patient's medical record. Insert a new Physician's Order sheet into the medical record and record the patient's name, MPI number, and known allergies.

C. Renewals:

When a Treatment is renewed exactly as previously ordered, note the renewal date in ink in the next block under the “date ordered” column of the TAR. Adjust the expiration date and time in pencil. Initial the corresponding top half of the slashed block in the “Initials” column.

2/9/14 Renew DSD to RT foot
daily @ 8:00 AM daily x7 days.
J. Smith, MD

N. Nurse, RN
11:00 AM 2/9/14

EXAMPLE

Date (Re)Ordered	Initials		Expr. Date	HR	10	11	12	13	14	15	16	17	18	19	20
2/2/14	MS JD		2/16/14	8								X			
2/9/14	MF	DSD to right foot daily @ 8:00 AM x7 days.													

D. Expiration/Discontinuation of Orders:

1. Automatic and/or specified stop dates should be indicated on the TAR by placing an “X” in the box next to the last dose, or by outlining (in pencil) the box that will contain the last dose sign-off. This is in addition to the expiration date and time noted in the expiration date box.
2. When a Treatment order expires or is discontinued, a licensed nurse should highlight the order on the TAR. Write “D/C” and indicate the date, time, name, and credentials in the sign-off areas of that med.

E. Clarification of Orders:

Orders that are not clear should be clarified before transcription, **NEVER** alter the original of an order that has already been transcribed. The unclear/illegible/incomplete order should be discontinued and rewritten as a new order upon discussion with the physician, **and a MERF completed as indicated.**

