

SECTION VII

MEDICATION ORDERING AND DISTRIBUTION (IN-PATIENTS)

CONNECTICUT VALLEY HOSPITAL PHARMACY POLICY & PROCEDURE MANUAL

SECTION: VII CHAPTER: 7.0

MEDICATION DISTRIBUTION THE PERFORMANCE SYSTEM INTERFACED WITH THE PYXIS SYSTEM FOR THE PATIENT CARE UNITS

POLICY:

At Connecticut Valley Hospital, the Pharmacy will use the Performance System for order entry that is interfaced with the Pyxis System. Orders entered cross over into the Pyxis MedStation on the unit that the patient is currently assigned to allowing the nurse to administer the medications in a safe and efficient manner.

The MedStation ensures that the pharmacist has reviewed the medications on the patient profile prior to receiving the initial dose except in an emergency situation. If emergencies do arise, each unit has a list of medications that have been approved by the PNT Committee that they can override during the hours the pharmacy is open. When the pharmacy is closed, all the MedStations will be placed on “critical override” which allows the nurse to access all the medications on their MedStation.

All the MedStations on each unit are located in a locked medication room that only the nurse, pharmacy technician and pharmacist has a key to. No controlled substances are stored in the narcotic cabinets unless the MedStation goes into its Emergency Backup Procedure.

The employee’s sign-on identification and BioID or password will serve as the employee’s electronic signature in the Pyxis System. All employees/agency staff’s sign on will be their state ID number or in the case of agency staff, the last 4 digits of their Social Security Number. All pharmacy and nursing staff will be BioID’ed into the system. In the event they can not be entered this way, they will use a secure password that they enter. These passwords will be between 5 and 10 characters.

Each sign-on ID code will be maintained and archived by the Hospital and will be available for inspection by the Drug Enforcement Agency (DEA) and the State Division of Drug Control upon their request.

Requests for access to the system will be made directly to the Pharmacy Supervisor or the Director of Ambulatory Care Services.

The established hospital policy and procedures for reporting of any loss, unresolved discrepancy, or inventory problem involving medications will be followed.

PROCEDURES:

1. Authorized Access
 - a. Staff members will have different privileges assigned to them that will be determined by the Pharmacy Supervisor and the Director of Ambulatory Care Services.
 - b. Titles used at this facility will include:
 1. Nursing supervisor
 2. Pharmacist
 3. Pharmacy Technician
 4. RN
 5. RN (cubie recoverer)
 6. Super User
 7. System Manager/Pharmacy Manager
2. Privileges for the levels are as follows and include **Console, Station & Med Privileges**:
 - a. **Nursing supervisor: Station privileges** - station report access, activate/create temporary user, admit/edit/discharge patients, create permanent users, assign/load access, add temporary patients, station administrator, independent inventory count, load and unload standard stock; **Med privileges** –remove, inventory; load and unload non-controlled meds only.
 - b. **Pharmacist: Console privileges** - user entry, add/edit/deactivate user template, order entry, system administrator; **Station privileges**- station report access, activate/create temporary user, credit patients, admit/edit/discharge patients, no witness required, assign/load access, add temporary patients, station administrator, independent inventory count, discrepancy documentation, independent load, refill and unload standard stock; **Med privileges** - remove, inventory, load, unload, refill, and RX check non-controlled meds.
 - c. **Pharmacy Technician: Console privileges** - basic pharmacy privileges; **Station privileges** - station report access, station administrator, assign/load access, independent inventory count, discrepancy documentation, load, refill and unload standard stock; **Med privileges** –remove, inventory, load, unload, refill.
 - d. **RN: Station privileges** - station report access, admit/edit/discharge, add temporary patients: **Med privileges** – remove, inventory (controls only).
 - e. **RN (cubie recoverer): Station privileges** – station report access, admit/edit/discharge patients, assign/load access; add temporary patients, independent inventory count, and load, unload standard stock; **Med privileges** –remove, inventory; load and unload non-controlled meds only.
 - f. **Super User: Console privileges**– none; **Station privileges** - station report access, credit patients, admit/edit/discharge patients, create permanent users, station administrator, assign/load access, add temporary patients, independent inventory count, discrepancy documentation, load, refill and unload standard stock; **Med privileges** - remove, inventory, load, unload, refill and Rx check.
 - g. **System Manager/Pharmacy Manager** accesses to entire system.

1. Reports:

A. Four Major categories of reports can be run off the Console that keeps information stored for 31 days. After this, it is archived and retrievable from the Pyxis Consultant.

1. Inventory Reports include:
 - a. Refill pick and Delivery
 - b. Meds ordered and below min
 - c. Stock management worksheet
 - d. Ordered meds not loaded
 - e. Meds without removals
 - f. Outdated inventory
 - g. Empty pockets
 - h. Stock out summary
 - i. Loaded meds w/o orders
 - j. Hospital-wide med summary
 - k. Inventory by station
 - l. All orders by med
 - m. Pended not loaded report
2. System Activity Reports include:
 - a. Entered ADT information
 - b. User modification information
 - c. Console and station activity log
 - d. Service messages
 - e. BioID global
 - f. BioID user activity
 - g. BioID – users not registered
 - h. SMART remote mgr. temperature log
 - i. Login activities
3. Activity Reports include:
 - a. All station events
 - b. Charges and credits
 - c. Billing summary
 - d. Loading and unloading
 - e. Outdated med removal
 - f. Discrepancies
 - g. Returns and waste
 - h. Inventory verification
 - i. Med refill activities
 - j. RX refill and load verification
 - k. Profile override
 - l. Clinical date categories
 - m. Remove warnings
 - n. Return Bin Activity

- o. Smart scan activity
 - p. Reconciled patients charges & credits
 - q. Undocumented wastes
- 4. System Reports include
 - a. Patient profiles which are printed out at request or for outside consultations.
 - b. Formulary
 - c. Users
 - d. Patients
 - e. Devices
 - f. Statistics
 - g. Areas
 - h. Site specific options
 - i. Batch list
 - j. Pharmacy configuration
 - k. Clinical data
 - l. Formulary links
 - m. Kits
 - n. Equivalencies
 - o. Variable dose groups
 - p. Combination dose groups
 - q. XQ messages
 - r. Override groups
 - s. Attention notices
 - t. Archive specifications
 - u. Profile history
 - v. SMART remote mgr. configuration
 - w. Reconciled patients
- 2. Filling and Reloading of meds into Pyxis
 - a. The Pharmacy Services Unit will be responsible for the refill and loading of medications in the Pyxis MedStations.
 - 1. See Section VII, Chapter 7.1
- 3. Emergency Back up Procedure
 - 1. These procedures will be implemented only if instructed by your Nursing Supervisor, Chief of Patient Care Services, Pharmacy Supervisor or Director of Ambulatory Care Services.
 - 2. Emergencies that might occur requiring you to use the procedure include but are not limited to:
 - a. network failure
 - b. power failure

- c. device failure
 - d. other
3. If instructed to use your back up procedure, follow these steps:
- a. Shut the pyxis machine off (use black button on back of cart) which contains the computer. Push it down.
The entire machine should be off. If this fails unplug the cord in the wall.
 - b. Remove both locks on left and right side with your key.
 - c. Pull the back panel off and place on the side.
 - d. Before you open your drawers, make sure you know which red release levers to push. Different drawers have different red releases. Always open the Cubie drawer before the power goes down or your UPS is depleted.
 - e. **Before you open any drawer, remember do not open all drawers at once or the front of the cart will become uneven in weight. The MedStation weight will be off balance and could fall forward if you open all drawers at once.**
 - f. Matrix drawers-push the red release lever forward (located on right side), and drawer will open.
 - h. Cubie drawer-slide the red lever to the left and up. The drawer will open. Push red button in the middle so all “cubie pockets” open at once. Do this before the power goes down 100% or you can’t open them.
 - i. Carousel drawer- push red lever to the right and concurrently push the grey handle forward as far as you can. You must push forward enough to open the “cover” on the carousel.
 - j. If system will remain down, you must remove your controlled substances and place in the double locked narcotic cabinet on your wall. The paper back up system must also be used for controls.
 - k. When the system is ready to go back up, snap back in place the two grey wires and clip them in, put back panel on, lock cart and turn machine on. To put the controlled substances back in your MedStation, you must do an inventory count with a witness. You will be prompted to type in the number of controls. For all entries, you will complete a discrepancy so your reason selected will be bring up system after failure.
4. Controlled substances will be maintained via a paper system that includes a POUS (Proof of Use Sheet). Each nursing unit will have POUS for each controlled substance in their MedStation that will be relocated to the double locked narcotic cabinet on the wall. In the pharmacy, the controlled drug inventory book keeps records of all the controlled substances currently in the vault and those signed out to a MedStation. If a unit requested additional controls, this medication would be removed from the vault by a pharmacist or pharmacy technician and the amount would be deducted from the inventory. Along with this, a POUS would be made out and delivered to the unit that requested it. Both the technician and the nurse on the unit would sign off on the stub indicating that the medication was

received. Nursing would then store the medication in the locked box on the wall. The signed stub will be return to the pharmacy.

5. When the Pyxis system goes up again, reports will be printed out for each MedStation and the POUS will be collected from each unit. The numbers on the print outs and the POUS will be compared to what the current inventory is. Nursing will also be asked to do an inventory count once they “go live” again.
6. Determining the refills for each MedStation for either regular meds or controlled medications would have to be done by the pharmacy technicians and the nurses together. Nursing will be able to communicate what levels are low on each unit and exactly what they need. Pharmacy technicians would actually have to visualize each MedStation drawer, cubies etc to see what is needed. The pharmacist would determine any new orders not currently loaded on the MedStation as they enter new orders into Performance. The pharmacist would then communicate directly to the pharmacy technician assigned to their respective building what new medications they need to load. Medications would then be delivered via the normal process to each MedStation.
8. When the Pyxis system goes up again, in order to keep inventory accurate, each medication in each MedStation would have to be recounted/inventoried. Otherwise, inventory levels would not be accurate. Pharmacy technicians would be assigned this task.

CONNECTICUT VALLEY HOSPITAL PHARMACY POLICY AND PROCEDURE MANUAL

SECTION VI: MEDICATION ORDERING/DISTRIBUTION CHAPTER 7.1: PYXIS MEDICATION SYSTEM

POLICY:

At CVH, Pharmacy staff will use the console and the Pyxis MedStation 4000 for dispensing medications to each nursing unit. This system provides a safe and efficient process for dispensing and facilitates the pharmacist review of physician's order prior to administration of medication to patients.

PROCEDURE:

A. Signing onto the System

1. The first time you log into the system, you will sign on with your assigned state I.D. number (payroll number) and hit the "enter" key. Do not use the "tab" key, as it will not change your screen.
2. A message will appear stating; "your Bio ID is not on record". Would you like to register?" Choose "Yes".
3. Instructions will appear and after reading them, click on the "scan" button on the screen. You will be prompted to enter your ID (state #) and password (which will be "new" until you change it).
4. The screen will prompt you to "place" your finger and when to "remove" your finger. It will take four scans.
5. Your index finger is recommended for use during the "scanning" phase. If for some reason your finger doesn't scan successfully it can be for the following reasons:
 - a. Not covering the entire scanner lens with your index finger.
 - b. Fingers are too cold-rub together to warm them.
 - c. Apply too much or too little pressure on the scanner.
 - d. Having a bandage on your finger.
6. Once you are scanned successfully you will then be prompted to change "your password". Enter in a password, which must be at least five characters long. Your password will only be used in a situation when the Bio ID function fails.

7. The next time you log into the system you will enter your ID (state ID#) and then place your finger on the scanner.

B Main Menu

1. When Pharmacy Technicians sign into the system, they will see the following: Patient information for removal and assign load/refill screen.
2. Pharmacist will have access to additional screens, which includes the patients and their profiles. This will allow them to review any orders or patient clinical information, which crossed the interface from performance into Pyxis.

C. Refill of Medications at the MedStation

1. Batch reports are printed daily at the console in the pharmacy.
2. Obtain a copy of the refill-pick list prior to refilling so you know what each unit needs. A print out will include the medication code, along with the generic and brand name of the medication. Select your medications needed for each unit you are assigned to. Using the ParX barcoding system, each medication will be selected by scanning the medication bin. If the medication selected is incorrect, the ParX will beep at you to try again. This will be done for all medications needed for refill. (See Section XIX, Chapter 19.10)
3. Medications that do not show up on the hand-held ParX barcoder machine will be processed with a barcode via the “On Demand Label” process. To do this, using the hand-held ParX hit enter and choose #1 to pick; choose #5, on demand; select the ward the medication is for and hit enter; pull medication to the counter, scan medication; type in amount and hit enter; bar-code label will print out and will be ready for Pharmacist to check.
4. After the medications are processed in the pharmacy, they can be refilled in the MedStation on the designated unit.
5. Once you arrive at the designated MedStation, from the main menu, select the “refill” icon and tap on it. At the bottom of the screen you will select “scan barcode item”. Scan each barcoded medication, drawer will open and the refill will take place.
6. After establishing the beginning count, the refill quantity already programmed in will show up. Type in the number of tablets/pills you are putting in. Touch accept.
7. Following this, you will be asked to enter the EARLIEST EXPIRATION DATE. This will keep track of all your out dated medications for you. Enter correct date each time. Close the drawer as prompted on the screen.

8. When refilling medication make sure you do not over fill these drawers as they will cause drawer failures. Cubie drawers on average can hold up to twenty tablets but it depends on their size. Do not push them in a drawer to fit. You can easily reselect a bigger drawer or use two different drawers.
9. Do make sure that you check the medication you are refilling with the MedStation screen. Compare the name of the medication you are refilling with the MedStation screen and with the refill list you used in the pharmacy.

D. Loading Medication at the MedStation

1. Using the scanned barcodes on each baggie of medication, the medications can then be loaded to the appropriate medstation.
2. The loading icon is used for loading NEW medications at this MedStation. Tap on the “Load” icon.
3. Tap on “Assign and Load” on the bottom of the screen. A list of all the medications on the hospital formulary will appear.
 - a. Select the medication you are loading by scrolling down or
 - b. Select the medication you are loading by typing the first letter of the name of the medication and you will automatically be advanced to that letter.
 - c. Both of these can be selected by brand/generic name. Tap on radio button on bottom of the screen and make sure it is green.
 - d. In the event the list contains two medications with the same name, select the medication to load with med ID code that corresponds to the code on your “meds not loaded” bulletin.
4. After selecting the medication tap on it and the next screen will tell you which drawers are empty
 - a. You can select a matrix drawer, half height pockets, carousel etc. The drawer number and pocket number will be documented on the screen. Select the correct size drawer and pocket according to the number and size of the medication you are adding.
 - b. Most of the controls will be placed in carousel drawer.
 - c. Most patient specific items will go into previously assigned patient drawers, which will be Matrix drawers.
 - d. Be careful not to load Look Alike/Sound Alike (LASA) medications to the same matrix drawer. They should be separated by cubies or in different matrix drawers.
5. After you select the drawer; the next screen will require you to enter the

following:

- a. maximum number
 - b. minimum number
 - c. current number
 - d. Click on “outdate tracking” so that the expiration dates can be tracked electronically.
 - e. Click on standard tracking if this is a standard med for this unit
6. When completed, click on “Load” and drawer will open. Click on “Accept” for the quantity you are entering. Enter the earliest expiration date and tap on “Accept”. Close drawer as prompted after this.

E. Inventory

1. Medications at each MedStation can be inventoried by:
 - a. all medications
 - b. by medication name
 - c. medication class
 - d. by drawer
2. If you select to inventory the entire MedStation, the inventory will start with drawer 1 with no chance to cancel until the next non-controlled drawer comes up. Then you can hit cancel all meds or suspend inventory. If you hit suspend inventory, a box comes up asking, “Do you want to interrupt inventory?” Answering “yes” will log you out.
 - a. If you select by medication name, you can tap on those medications you want to inventory only. The selections will turn blue. Tap on “inventory selection” next. The following screen will give you the “beginning count”. If you disagree with the beginning count just type in the correct number and hit “Accept”.
3. If you select by class you will only inventory that class of medications. Touch the screen and your selection will turn blue. Select “inventory selections” and confirm count. You can also skip the medication here or “cancel out” without counting all medications.

F. Unload Menu

1. To unload any medications tap on the “unload menu” on the main screen. On the next screen, tap on “unload”.
2. You can then unload by specific medications name. Tap on one medication name and it will turn blue. Select “unload selection” (a warning will appear “Order exists for selected meds. Continue to unload?”). If a patient is on this

medication then further investigation is needed before unloading. The quantity to be removed will appear. You can change this amount if it is incorrect. The screen will tell you which drawer and pocket number the medication is in. Select “accept” and drawer opens. Remove the medication as prompted.

G. Reports Menu

1. You can print any reports listed under reports menu you need. Most of these can also be printed at the console in the pharmacy.

H. User Menu

1. Under user menu, you can change your password if you want and select options in the “user preference menu”.
2. Select the “user preference menu”;
 - a. Select login preference- you can set up each MedStation to default to the main menu when you sign in, to load, refill, system menu, unload, inventory or reports. Otherwise it will automatically default to “main menu”.
 - b. Select “list preferences” which also allows you to set by your preference. You can select medication list by generic name or brand name, refill lists by all medications or those at a below minimum and inventory list by drawer, medication or class.

I. Console Considerations

1. You should pend your medication at the console and it will be ready to load at the MedStation when you arrive.
2. Sign onto the console. Select the Inventory on top of the screen. Select the unit, then hit select and it will bring up all the meds on that unit. The select, “assign new medication” and the hospital formulary will appear. Select the medication you want by either brand or generic name. Then highlight the med and hit select. After this you must select a drawer you want to put it in such as a matrix, cubie etc. Identify the drawer and pocket. Hit select and enter max, min and quantity you’re putting in. Click on “Outdate tracking” and “Standard tracking” and then hit save.
3. When you get to the designated MedStation, select “load” icon and the medication you pended will show up. Select them and assign accordingly.

J. Moving medications from drawer to drawer, cubie to cubie, or to a different pocket in same drawer

1. First you have to “unload” the medication from the drawer/cubie it is currently in. Refer to the “unload section F”.
2. After this, select the “assign and load” icon to load the medication in a new drawer/cubie. Identify which drawer/cubie you want to put them in and follow the steps for “load a new medication” under section D.

K. Switching entire Matrix Drawers:

1. Select the “unload menu” on the main menu.
2. Tap onto the “unload icon and when the screen displays a message, select “OK”.
3. Tap on “select by drawer” at bottom of the screen.
4. Touch on the drawer you want to switch with.
5. Select the “unload all meds” icon.
6. When the drawers are open, remove the plastic container with the meds in them and put them into the newly assigned drawer. Take out the plastic container in this new drawer first.
7. Following this, all the medications loaded into the newly assigned drawer must be entered with the maximum number, minimum number and current number you are loading. You will also be asked for the expiration dates so enter the earliest date listed on the medication packets.
8. Upon completing this, you can run a report to verify or you can go into inventory and select one of the meds you unloaded and reloaded to ensure that the correct drawer opens up.

L. Calibrating the MedStations

1. On a monthly basis, the pharmacy technicians will calibrate each MedStation when doing their monthly environmental rounds.
2. Once they sign in, from the main menu they must select the “system menu”. Then select “system configuration” on the next screen.
3. Touch the “Calibrate Screen” icon on the bottom of the screen.
4. You will be prompted to follow some steps and ensure that the cursor will follow your finger. If it does, then you can exit the program.

M. Outdated Medications

1. Every time a pharmacy technicians signs onto a MedStation, they should check the “outdated icon” if it appears. If Medication is outdated or projected to be outdated soon; they should remove it from the drawer.
2. Once the medication is removed, you will enter the earliest expiration date of the medications that remain in the drawer.

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SECTION VII: MEDICATION DISTRIBUTION CHAPTER 7.2: MEDICATION SUPPLY FOR THE PATIENT CARE UNITS

POLICY:

Medications are supplied for the patient care units in unit dose packaging whenever feasible. A limited amount of medication is provided patient specific via patient medication drawers in the medication carts.

PROCEDURE:

2. Patient specific medications are filled with a sufficient supply of medication provided based on the needs of the patient. Each pharmacist is notified by the unit nurse of the need for a new supply.
 - A. When patient specific medication is needed, the pharmacist based on needs of the patient and the request from the nurse, will computer generate two patient specific medication fill labels which appear at the Central Pharmacy printer. A technician will fill and apply the label to the medication container. A duplicate label is initialed by the technician as well as the pharmacist as a final check that the medication has been filled accurately. The duplicate label is then placed in a weekly label bin and saved for 7 days for reference. The medication is then placed in the appropriate building delivery bin. In the event the medication is packaged in an outer container (box) the medication label is placed on the medication itself and the patients name is written on the outer container prior to delivery to the unit. Every attempt is made to store all medication in the Pyxis MedStation. Exception is made for refrigerated items, liquids and special need storage, topical preparations.
 - B. Unit dose medication delivery.
 1. Transport medications to the medication room on the unit.
 2. Place the glassine baggies containing the patient specific medication in the patient specific drawers under the patient's name.
 3. All medication delivered to the units is to be placed in the Pyxis MedStation drawers or inside other designated areas. At no time should medication be left outside these specified areas or on top of the Pyxis Medstations.
 4. STAT and NOW medication orders for all units are phoned and/or faxed to the pharmacy for immediate processing.

REVISED: 07/15/93, 09/22/97, 03/15/03, 8/1/03, 10/27/04; Reviewed 01/13/07, 3/24/14; Revised 02/05/09, 01/30/11, 11/23/12, 1/30/18

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SECTION VII: MEDICATION DISTRIBUTION CHAPTER 7.2.1: MEDICATION SUPPLY FOR THE COTTAGE PROGRAM

POLICY: Medications are supplied for the patients residing in the Cottage Program via bubble-pak. A 30 day supply of medications is sent to the Cottage following the medication renewal process and/or following the addition of new medications to the patient's medication profile.

PROCEDURE:

1. Physician orders for patients residing in the Cottage Program are written by the Cottage psychiatrist and medical physician and faxed to the appropriate pharmacist to be processed into the Pharmacy Performance computer system.
2. All renewals, as well as new medication orders are then packaged from bulk stock into individual patient bubble-paks.
3. Each bubble-pak is labeled with the patients name, medication directions, medication name, quantity, physician name, date, original lot number and the CVH expiration date. One medication is packaged per bubble-pak and a 30 day supply of medications is sent.
4. A master log of all medications filled and delivered to the cottage is kept in the central pharmacy.
5. Medications ordered prior to the next scheduled renewal date, will be packaged into bubble-paks with the number of pills necessary to reach the next medication delivery date.
6. The bubble-paks are delivered to the assigned medication storage room in the cottage by the pharmacy technician.
7. An even exchange between the pharmacy technician and the nurse is performed.
8. Any medication that has been discontinued in the interim between medication renewals will be picked up by the pharmacy technician and brought back to the pharmacy.
9. For controlled medications, the procedure is slightly different:
 - a. An RX removal function is performed in the CII Safe for the medication needed.
 - b. The medication is packaged via bubble-pak as described in #3 above.
 - c. A proof-of-use sheet is filled out corresponding to the number of pills

being sent.

- d. The RX signature delivery sheet is also sent along for nursing signature as a receipt.

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SECTION VII: MEDICATION DISTRIBUTION CHAPTER 7.3: MEDICATION SUPPLY FOR THE DIALYSIS UNIT

POLICY: Medications are supplied for the dialysis unit in unit dose packaging and in the smallest concentrations whenever feasible.

PROCEDURE

1. The dialysis unit will be stocked with medication depending on the medication the patients receiving dialysis require.
2. The dialysis unit is refilled regularly as the medication minimums are reached.
3. The medications are selected using the ParX barcoding system. Each medication will be selected by scanning the medication bin. The pharmacy technician will repeat this process for all medications needing to be refilled in the dialysis unit. After the medications are processed in the pharmacy, the pharmacy technician can then go to dialysis and refill the medications to the dialysis medstation. This process is done the same way all other unit Medstations are refilled. See Section 7.1.C.
4. The dialysis nurse will remove the medications from the Pyxis medstation as needed for the patient. Any unused injectable medications will be disposed of. Each injectable medication will be for single use only. All injectable medications will be stocked as single dose vials in cubie pockets with warning labels affixed to each vial. **NO** one injectable medication will be used for more than one patient.
5. Medications will remain in the Pyxis medstation or Pyxis refrigerator until the designated time of use. No medications will be removed earlier than the designated time of use and stored elsewhere.

CONNECTICUT VALLEY HOSPITAL PHARMACY POLICY AND PROCEDURE MANUAL

SECTION VII: MEDICATION ORDERING (IN-HOSPITAL) CHAPTER 7.4: APPROVED ABBREVIATIONS

POLICY: Abbreviations and Chemical symbols shall be utilized only if they appear on a standard list in the Health Information Management Policy and Procedure Manual.

PROCEDURE: Refer to HIM Policy and Procedure Manual
Section 6: Information Systems: Coding, Data Entry, Abbreviations
Policy 4.0 Approved Abbreviations List (13 pages)

Reviewed 07/15/93; Revised 03/15/03; Revised 12/31/03; Reviewed 01/13/07, 02/05/09, 01/30/11, 11/23/12,
3/24/14, 1/30/18

CONNECTICUT VALLEY HOSPITAL

PHARMACY POLICY AND PROCEDURE MANUAL

SECTION VII: MEDICATION ORDERING (IN-HOSPITAL)

CHAPTER 7.4.1 UNACCEPTABLE ABBREVIATIONS LIST

POLICY: The following documentation practices and abbreviations may **NOT** be used in any documentation in the patient's medical record, including Physician Orders and Progress Notes.

PROCEDURE: The following list of abbreviations is not allowed in the ordering of medications:

Prohibited Abbreviation	Approved Notation
AU	each ear
IU	international unit
MS, MSO ₄	morphine sulfate
MgSO ₄	magnesium sulfate
OD	right eye
o.d.	overdose
OS or o.s.	left eye
OU	both eyes
QD or q.d.	daily
QOD or q.o.d.	every other day
U or u	unit

Approved use of Zero and Decimal Point when recording medication dosage.

<u>Doses expressed in</u>	<u>Use of zero/decimal point</u>	<u>Approved Notation</u>
whole numbers	no zero/no decimal point	5 mg
Less than whole Numbers	Use zero before decimal point	0.5 mg

CONNECTICUT VALLEY HOSPITAL

PHARMACY POLICY AND PROCEDURE MANUAL

SECTION VII: MEDICATION ORDERING (IN-HOSPITAL) CHAPTER 7.5: DATED MEDICATIONS

POLICY:

Outdated or otherwise unusable drugs are identified, and their distribution and administration prevented. All such medications shall be returned to the pharmacy for disposition (e.g., return for credit or destruction). Expiration dates indicate that the medication, after a designated period of time loses some of its pharmacological activity and should be removed from stock.

PROCEDURE:

1. The shelf life of all medications is indicated by an expiration date. The expiration date will be indicated on all items in the original manufacturer's container and items prepackaged or prepared by the pharmacy.
 - A. Expiration date of opened bulk liquids is the manufacturer's expirations date. Also see Section VIII Chapter 8.4 Procedure 1.
2. All multiple dose vials will contain an auxiliary label for the nurse to write the date when the vial is opened as well as the 28 day expiration date at which time the multi-dose vial is to be discarded. Pharmacy technicians will make sure that all multi-dose vials are discarded after the 28 day expiration date (unless preceded by the manufacturer's expiration date). An exception to this procedure is Influenza vaccine. The influenza vaccine has 10 doses per vial however; the expiration date is the manufacturer's expiration date.
3. Expiration dates are checked by Nursing as part of the routine medication administration process and during the pharmacy technicians regularly scheduled environmental rounds. Pharmacy is notified of any outdated medications discovered.
4. Pharmacy Technicians will check for outdated patient medication. The pharmacy will immediately replace the outdated medications with medication that has a valid expiration date.
5. Pharmacy staff inspects all medication storage areas on a

daily basis by checking for the outdated icon on the MedStations and proper storage conditions. (See policy 8.1) Pyxis provides outdated icons and reports for outdated medications.

6. All outdated medications identified are stored in the pharmacy for appropriate disposition; return to the manufacturer for credit or destruction.

A. Outdated medications are sequestered and stored separately from dispensing stock.

1. Separate, clearly labeled areas are provided for those medications to be returned for credit and for those medications that are to be destroyed.

CONNECTICUT VALLEY HOSPITAL PHARMACY POLICY AND PROCEDURE MANUAL

SECTION VII: MEDICATION ORDERING (IN-HOSPITAL) CHAPTER 7.6: USE OF THE METRIC SYSTEM

POLICY:

The metric system shall be used throughout the hospital for all medication related activities. This includes but is not limited to medication orders, the pharmacy patient profile, the nursing Kardex, admission records, discharge records, out patient prescriptions, medication packaging, and progress notes.

PROCEDURE:

1. All medication related documents shall be written using the Metric System.
2. All medication containers shall be labeled with the strength in the Metric System.
3. Each patient care unit shall have a conversion chart for nursing and medical practitioners use.

CONNECTICUT VALLEY HOSPITAL PHARMACY POLICY AND PROCEDURE MANUAL

SECTION VII: MEDICATION ORDERING (IN-HOSPITAL) CHAPTER 7.7: PROCUREMENT OF DRUGS AND CHEMICALS

POLICY:

The pharmacy is responsible for the timely procurement of safe and efficacious drugs and chemicals in accordance with patient care needs. All purchasing is done using contracts issued by the Purchasing Division if available. Most medications are purchased through a state-contracted wholesaler as the primary vendor on an as needed basis, but may be purchased directly from the manufacturer as necessary. Invoices are then forwarded FSB 460 Silver Street, Middletown CT, for processing and payment.

PROCEDURE:

1. As medications are dispensed, the person picking the item(s) from inventory takes note of the supply left in stock.
 - A. Items that appear to need re-ordering are noted on the want list or ordered immediately using the hand-held device for ordering. For each item placed on the want list, the description, wholesaler re-order number (if available), and a proposed quantity to order is noted.
2. Each afternoon at about 3pm the pharmacy technician assigned to ordering gathers the want list/hand-held device and processes each item using the prime vendor wholesaler's computerized reordering system.
 - A. Each item is entered for reorder using the vendor reorder number, NDC number, or item description.

- B. Each item is double checked to insure the correct quantity is being ordered and if the item ordered is available at a contracted price.
 - 1. Scan the screen for the contracted item by noting the items that are highlighted.
 - 2. Make note of the average monthly use from the computer screen. Use this as a guide for quantities to be ordered. An average of 10 days supply is normally the quantity stocked in the central pharmacy. For pre-packaged medications and medications for the cottage, we stock an average of 30 days.
- 3. Once complete, transmit the order via Cardinal to the wholesaler.
- 4. After reviewing a message from the computer noting that the transmission was successful wait about 5 minutes and retransmit to receive an order confirmation list.
 - A. If the initial transmission was unsuccessful the computer will automatically retransmit in 10 minutes.
- 5. Once the confirmation is received go to the print documents section and print hard copy of the confirmation list.
- 6. Review the confirmation list for out of stock items and other items that were ordered; these will not be shipped on the following day.
- 7. Reorder the items using alternate contract pricing or if the item is needed immediately order non-contract items. Use the process described in #2-6 above.
- 8. Ordered items are delivered by the wholesaler on the next day the pharmacy is open.
- 9. Check in all items by comparing what was actually delivered to the invoices.
 - A. Clearly note all discrepancies and actions taken to resolve noted discrepancies on the invoice and invoice copy.
- 10. Mark or stamp each invoice and invoice copy 'RECEIVED' and then date and initial the invoice and invoice copy.
- 11. Log in each invoice copy on the Pharmacy Purchase Order Record.
- 12. File all invoice copies in the purchase order notebook for that month.
- 13. Immediately forward by mail all original invoices to FSB 460 Silver St. Middletown CT. for processing and payment.

CONNECTICUT VALLEY HOSPITAL PHARMACY POLICY AND PROCEDURE MANUAL

SECTION VII: MEDICATION ORDERING (IN-HOSPITAL) CHAPTER 7.8: PROCUREMENT OF DRUGS AND CHEMICALS FOR DENTAL SERVICES

POLICY: The pharmacy is responsible for the timely procurement of all dental pharmaceuticals in accordance with dental care needs for patients. All purchasing is done using a state-contracted wholesaler, Cardinal Health, and in some cases, from three dental manufacturers who only supply the other dental products not located through the prime wholesaler. These three manufacturers include, Orapharma, Ultradent and Henry Schein. List of dental pharmaceuticals is attached.

PROCEDURE:

1. The dental department will produce a list of medication needed as their supply diminishes.
2. This list will then be forwarded to the pharmacy department for procurement by the pharmacy supervisor.
3. All of these medications will be received through the pharmacy department and checked against the purchase order.
4. The medications will then be delivered to the dental department by an available pharmacy technician or may be picked up by any dental department personnel.
5. Pharmacy personnel will monitor these medications during the monthly ward inspections to ensure that they are properly and safely stored.

Dental Pharmaceuticals

1. Dental Emergency Box

2 Arestin (minocycline HCL)



3. Peridex (0.12% chlorhexidine)

4. Sodium Fluoride



5. Gelfoam- hemostatic surgical packing (purified pork skin gelatin)



6. Surgicel-hemostatic packing (oxidized regenerated cellulose)



7. Citanest (prilocaine HCL) - injectable local anesthetic
8. Lidocaine 2% and Epinephrine 1:100,000 - injectable local anesthetic
9. Septocaine-injectable local anesthetic
10. Gingicaine topical anesthetic (active ingredient is benzocaine)



11. Proflouride Varnish
12. Carbocaine 3%
13. Mi-Paste Plus
14. Oraqix

Revised 11/16/06; Reviewed 01/13/07, 02/05/09, 01/30/11, 11/28/12, 3/24/14, 1/30/18

CONNECTICUT VALLEY HOSPITAL PHARMACY POLICY AND PROCEDURE MANUAL

SECTION VII: MEDICATION ORDERING (IN-HOSPITAL) CHAPTER 7.9: USE OF RUBBER SIGNATURE STAMPS

POLICY: The use of rubber signature stamps on prescriptions and orders is not permitted.

PROCEDURE: In compliance with Federal and State regulations and CVH Policy, all prescriptions and orders in the Pharmacy must be hand signed by the practitioner.

CONNECTICUT VALLEY HOSPITAL PHARMACY POLICY AND PROCEDURE MANUAL

SECTION VII: MEDICATION ORDERING (IN-HOSPITAL) CHAPTER 7.10: SUPPLEMENTARY OF AUXILIARY LABELS

POLICY: Supplementary or Auxiliary Labels Shall Be Used Wherever Indicated.
The Pharmacy shall affix appropriate auxiliary labels to all medication containers where indicated. Included are "KEEP IN REFRIGERATOR", "SHAKE WELL BEFORE USING", "FOR EXTERNAL USE ONLY", etc.

PROCEDURE:

1. As part of the process of checking discharged or temporary visit medications dispensed, the pharmacist will ensure that all-applicable auxiliary labels are affixed.