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SECTION VIII

PHARMACY SPACE, EQUIPMENT AND SUPPLIES

CONNECTICUT VALLEY HOSPITAL

PHARMACY POLICY AND PROCEDURE MANUAL

SECTION VIII: CHAPTER 8.1:

PHARMACY - SPACE, EQUIPMENT, SUPPLIES MEDICATION UNIT INSPECTION BY PHARMACY PERSONNEL

POLICY:

Drug storage and preparation areas within the pharmacy and throughout the hospital are under the supervision of the Pharmacy Supervisor. Each unit and clinic's medication room and all other drug storage areas shall be inspected by Pharmacy Staff at least once a month to ensure drugs are stored under proper conditions of sanitation, temperature, light, moisture, ventilation, segregation, and security. The area is also checked for unauthorized floor stock, samples of medications, expired medications (if not entered into the Pyxis System), discontinued medications, and soiled or illegible labels.

For each nursing unit, properly controlled drug preparation areas are designated, and locked storage areas or locked medication carts are provided. Those areas are well lit and are secure so that personnel preparing drugs for dispensing or administration will not be interrupted.

Each month a pharmacy technician will perform an inspection of each medication storage area to monitor aspects of its physical condition. Inspection forms list the criteria used by the pharmacy staff to assess the medication storage and preparation areas. This form is signed by the pharmacy technician performing the inspection; counter signed by the charge nurse, unit representative or unit director; the unit pharmacist and the pharmacy supervisor. The completed form is maintained on file in the Drug Storage Area Inspection Notebook located in the pharmacy (see form below). The charge of the unit or clinic or his/her designee is responsible for routine checks of the medication area, refrigerator, and other storage areas for expired medications, discontinued medications, soiled or illegible labels, etc, and returning unusable items to the Pharmacy.

PROCEDURE:

1. Starting about the first week of each month the assigned technician checks the medication storage area using the inspection checklist.
2. The pharmacy technician retrieves a CVH Maintenance and Inspection Checklist Form from the Drug Storage Area Inspection Notebook and goes to the area to be inspected.
3. The top of the form is completed noting the area being inspected and the date of the inspection. Each of the items on the front of the form is evaluated and the result noted by checking YES/NO in the far right hand column.
4. Each problem noted is written on the back of the form.
5. Once the inspection is complete, the nurse, unit representative, or unit director reviews the result of the inspection.
 - A. All problems noted are discussed and actions taken to resolve the problem(s).
 - B. All actions taken or planned are noted on the back of the inspection form.
6. The inspection form is signed by the pharmacy technician performing the inspection; the nurse, unit representative, or unit supervisor; the unit pharmacist and the pharmacy supervisor.
7. Once completed, the form is filed in the Drug Storage Area Inspection Notebook under the correct month.
8. The inspection checklist is initialed in the box corresponding to the area inspected and the month of the inspection by the pharmacy technician.
9. All significant and/or unresolved problems are forwarded to the Pharmacy Unit Supervisor and head nurse/unit director.

REVIEWED: 05/24/94; 09/22/97; 04/00; 8/1/01; 01/13/07; 3/24/14, 1/31/18 revised 02/05/09, 01/30/11,
11/23/12

CVH Maintainence and Inspection checklist

Station:

Inspected by:

Date of inspection:

Pyxis MedStation system/auxiliary/towers	Yes	No	N/A	If no, explain
Internal appearance and organization				
Are the drawers clean and the dividers intact?				
Are look-alike/sound-alike medications properly labeled and separated from other medications?				
Are all the medications in date, per outdate policy?				
Are any unapproved medications present in the medication room/Pyxis medstation system(i.e., samples)?				
Is the Outdated Inventory Report verified? Pull all meds 3 months in advance of expiring including controls.				
Do all pockets/bins have the correct medication and only one medication present?				
Are all pockets properly numbered?				
Are pockets/bins clearly labeled?				
Are pockets/bins/drawers overfilled?				
Does the patient specific drawer contain discontinued or expired medications?				
Are the medications present in the patient specific drawer for current patients and properly labeled?				
Are all controlled substances in single line-item access pockets (i.e., carousel drawers or cubies if no more room in carousel drawer)?				
Are internal and external medications stored separately from one another?				
Are the blue tamper resistant prescriptions stored properly in the Pyxis medstation system?				
Are the oldest medications rotated to the front to facilitate earliest usage?				
Are ONLY medications (e.g., no cameras, paychecks) stored in the med rooms including medication cabinets, refrigerator, and narcotic cabinets? Are any personal belongings in the med room, i.e. pocketbooks, bookbags?				
Are all single-dose vials unopened?				
Are multi-dose vials labeled/dated after first use and discarded per policy (i.e., 28 days)?				
Are the control down time proof-of-use sheets binder present in the medication room and do they correspond to the control substances that are loaded to the Pyxis medstation system?				

Pyxis. SMART Remote Manager/Pyxis Remote Manager				
Are only medications stored in the medication refrigerators (i.e., no juices or food present)?				
Is the temperature within range (i.e., between 36° and 46°)? Record temperature:				
Is the freezer free of frost?				
Are all medications in date?				
Are multi-dose vials labeled/dated after first use and discarded per policy (i.e., 28 days)?				

External appearance and surrounding areas				
Is the medication storage area locked if unoccupied? Is the medication cabinet locked?				
Is the outside of the Pyxis medstation system orderly, neat and clean including the BioID fingerprint scanner?				
Is the plastic keyboard cover present and clean?				
Are all medications kept inside the Pyxis medstation (i.e., meds not left on top of the pyxis medstation)?				
Is the printer working and paper present in the printer?				
Is the screen calibrated (should be done monthly)?				
Are all the drawers working properly (i.e., no Recovery Drawer icon on the screen)?				
Are there any unresolved controlled substance discrepancies (i.e., no Document Discrepancy icon on screen)?				
Is the floor space, behind and underneath the Pyxis medstation system, clean and free of debris (i.e., loose medications on the floor, dust, spilled liquids)?				
Are the key(s) to the medication storage cabinets/narcotic cabinet stored according to policy and the narcotic cabinet checked for contents?				
Is the poison control number posted in the medication room or nursing station?				
Is the “Look-Alike, Sound-Alike” and “High Risk” Medication lists posted in the medication rooms?				

Pharmacy Technician _____

Nursing Representative _____

Unit Pharmacist _____

Pharmacy Supervisor _____

PROBLEMS IDENTIFIED:

ACTIONS TAKEN:

PROBLEMS RESOLVED:

YES

NO

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SECTION VIII: PHARMACY - SPACE, EQUIPMENT, SUPPLIES CHAPTER 8.2: SEPARATION OF INTERNAL AND INJECTABLE MEDICATIONS FROM EXTERNALS

POLICY: External Medications Shall Be Separated from Internal and Injectable Medications

- PROCEDURE:**
1. Drugs for external use are stored in a separate drawer in the pyxis medication station.
 - A. In areas where this is not practical, the drugs for external use will be stored in a lockable cabinet in the medication room.
 - B. If they are patient specific they can be separated by dividers in the matrix drawer which is the patient specific drawer.
 - C. Pharmacy Technicians will enter patient specific drawers to separate internal medication from external medication. This will be done monthly or whenever medication is loaded or unloaded in the MedStation.
 2. Drugs for external use prescribed for specific treatments may be stored in the locked treatment room or treatment area on the patient care unit.
 3. All general housekeeping supplies such as bleach and disinfectants are stored separate from drugs in a locked room as prescribed by the Housekeeping Department policies and procedures.
 4. All supplies obtained from central medical supply such as alcohol wipes, hydrogen peroxide, insulin needles and syringes, dental supplies (denture cleaner) will be stored separately from all medications. They will be stored either in another cabinet or on a different shelf in the same cabinet.

REVIEWED: 07/15/93; 09/22/97; 04/00; 3/15/03; 8/01/03, revised 12/30/03; reviewed 01/13/07; revised 02/05/09, 01/30/11, 11/23/12, 3/24/14, 1/31/18

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CHAPTER 8.3: DRUG STORAGE AREAS

POLICY: It Shall Be the Policy of the Pharmacy Department to Assure That All Drugs Are Stored Appropriately, in a Safe, Secure Way That Provides Appropriate Environmental Controls.

- PROCEDURE:**
1. Pharmacy Drugs stored in the pharmacy properly shall be separated into the following groupings:
 - Formulary medications
 - Non-formulary medications
 - Injectables
 - Externals
 - EENT medications
 - Controlled Substances

The pharmacy and medication rooms (and any other area requiring storage of medications) shall be maintained at the proper temperature for drug storage (50 - 75 deg. F). Drugs requiring refrigeration are stored in a refrigerator containing only medications. All refrigerators have a thermometer to ensure maintenance of proper temperature (36-46 deg. F).
 2. Unit refrigerators and the pharmacy controlled substance refrigerator are under the Pyxis System via the remote manager. The Pyxis SMART Remote Manager from Carefusion automates temperature-sensitive medication dispensing and storage device temperature monitoring. It integrates with the pyxis medstation system to provide controlled point-of-use access to temperature sensitive medications and monitors internal temperatures of storage devices. In addition, the system electronically archives transaction and temperature data and generates reports necessary for compliance. Weekly, batch reports are printed for the previous week and monitored accordingly.
 3. Drugs stored in areas other than the pharmacy shall be stored within the pyxis medstations, within the medication cabinets, in the emergency carts, or in medication refrigerators.

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SECTION VIII: PHARMACY - SPACE, EQUIPMENT, SUPPLIES CHAPTER 8.4: EXPIRATION DATING

POLICY: There shall be a Policy for the Expiration of Drugs.

- PROCEDURE:**
- 1. Drugs in Manufacturer's Original Containers**
The date established by the manufacturer.
 - 2. Unit Dose Orals - Repackaged by Pharmacy from Bulk**
One year from date of repackaging or the manufacturer's expiration date, whichever is first.
 - 3. Multiple Dose Vials**
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 manufacturers expiration date.
 - 4. Sterile Solutions**
24 hrs. from date and time of opening.
 - 5. Liquid Antibiotics**
Per pharmacy auxiliary label.
 - 6. Nitroglycerin**
Thirty days from date of opening or, if sealed, manufacturers expiration date.

7. **Prepared Stock Solutions**

As noted by the pharmacy

NOTE: The last day of the month is deemed the expiration date when a month/year is provided.

Example: 1/2000 = 1/31/2000

8. **Drugs transferred to a container that is not light or moisture proof.**

25% of date on manufacturing container or 6 months from date of repackaging, whichever comes first.

9. **All medications that are entered into the Pyxis System will be monitored for its expiration date electronically.**

Each time a pharmacist/pharmacy technician refills or loads a medication, the expiration date is also entered. When meds are due to expire, an “out of date” icon will appear on the screen and a report can be printed at the console.

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SECTION VIII: PHARMACY SPACE, EQUIPMENT AND SUPPLIES CHAPTER 8.5 REPACKAGING MEDICATION INTO UNIT-DOSE PACKAGES.

POLICY: Medication shall be dispensed from pharmacy in the form of unit-dose packaging whenever possible using the unit-dose repackaging machine with or without using the automatic medication feeder.

- PROCEDURE:**
- 1) A pharmacist will supervise the instruction and maintenance of the automatic medication repackaging machine.
 - 2) A pharmacist may delegate the supervisory responsibility to a pharmacy technician.
 - 3) Pharmacy Technicians will be trained on the use of the repackaging machine software and repackaging process.
 - 4) The repackaging process outlined in the training session and repackaging machine manual will be followed to avoid complication in repackaging.
 - 5) Complications in repackaging will be reported by the repackaging technician immediately to the pharmacist supervising the repackaging machine and/or the Pharmacy Supervisor.
 - 6) The dispensing tray or automatic feeder will be cleaned with an alcohol wipe or other suitable product before and after medication preparation.
 - 7) All technicians repackaging a medication will wear gloves for sanitary reasons.
 - 8) A medication repackaged will be logged into the Medication repackaging logbook. Any discrepancies will be recorded as necessary.

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SECTION VIII: PHARMACY SPACE, EQUIPMENT, AND SUPPLIES. CHAPTER 8.6 : CUBIE REPLENISHING STATION (CRS)

POLICY: Pyxis Medstation uses a Cubie as a method of storing medication in the medication cart. The Cubie Replenishing Station is used when it becomes necessary to package medication needing separation from medication inventory to avoid the possibility of mixing or confusion due to similarity. Example: Look-alike/Sound-alike medication. A separate area is designated for the preparation and storage of medication prepared using the Cubie Replenishing Station (CRS).

PROCEDURE:

- 1) The CRS uses an IL (Intelligent Logistic Chip) Cubie; It is a plastic container with a locking flip lid, which allows electronic identification of medication contained in the cubie by the Medstation. This prevents the mis-identification of a drug using the manual system of replenishment.
- 2) The medication is selected from a special list of medications specifically created for this pyxis medstation. A label is produced by the CRS printer to identify the medication and quantity supplied. The label is placed on the inside cover of the cubie lid and signed (initials) by the technician filling it and the pharmacist checking it.
- 3) The filled IL cubie is placed in the CRS drawer for storage. Pre-filled cubies may be prepared in advance and stored in inventory adjacent to the CRS.
- 4) After preparation by the technician a pharmacist will verify the accuracy of the repackaging and initial the inside label.
- 5) The prepared cubie may be then taken and placed in the unit MedStation.
- 6) This procedure lowers the capacity for errors – mis-identification of a drug by allowing the technicians to fill the cubies and pharmacists to check them in advance of the actual process of replenishment. (See Section XIX, chapter 19.7)

