



CURRENT MEDICATION PROTOCOL

GUIDING PRINCIPLE

We are committed to a culture of recovery throughout our systems of care, in our interactions with one another, and with those persons and families who trust us with their care.

OVERVIEW

Qualified healthcare staff shall work together to accurately maintain and communicate consumer medication information.

DEFINITION

- **Medication:** Any product designated by the Food and Drug Administration (FDA) as a drug, as well as any prescription medications, sample medications, herbal remedies, vitamins, nutraceuticals, over-the-counter drugs, vaccines, diagnostic and contrast agents used on or administered to persons to diagnose, treat or prevent disease or other abnormal conditions, radioactive medications, respiratory therapy treatments, parenteral nutrition, blood derivatives and intravenous solutions (plain, with electrolytes and/or drugs).
 - This definition of medication does not include enteral nutrition solutions (which are considered food products), oxygen and other medical gases.
- **Qualified Healthcare Staff:** In the context of this protocol refers to Registered Nurses (RN), Licensed Practical Nurses (LPN), psychiatrists and physicians.

STANDARD OF CARE

- The process of documenting the consumer's current medication is used to obtain and document a complete list of a consumer's current medications upon admission/re-admission to an inpatient unit and as part of an outpatient assessment including, when possible, the name, dosage, route, frequency and purpose for every scheduled and as-needed medication a consumer/family reports.
- The consumer's medication information shall be collected and documented conducted by qualified healthcare staff involving the consumer/family.
- Psychiatrist/physicians and other qualified healthcare staff managing the consumer's medications shall review the Medication Administration Record (MAR) in order to determine whether the type and dosage of medications is indicated by the consumer's needs.
- The attending psychiatrist/physician will recommend changes in the consumer's medication regimen and make any additions, deletions or corrections to the consumer's medication regimen using the doctor's order sheet.

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- Any changes in a consumer's medication regimen shall be closely observed to identify improvements or decomposition in the consumer's condition.
- The MAR shall be placed in a highly visible location (i.e., where the doctor's orders are placed) within the consumer's medical record to assure easy accessibility by providers writing orders and other qualified healthcare staff involved in managing the consumer's medications.
- A complete list of the consumer's medications will be provided to the consumer or the consumer's family upon discharge.

INPATIENT PROTOCOL

If Inpatient Consumer:

- The RN completing the Nursing Assessment will obtain and document the consumer's current medications taken at home on the Nursing Assessment.
 - Anytime a consumer is re-admitted a new assessment shall be completed.
- The RN shall rely on the consumer, as well as other sources (family, consumer's pharmacy, consumer's prescription containers, transfer records, current medical records, etc.) to document the current medication list as accurately as possible.
- If the consumer has a home medication list, a photocopy of the list shall be placed in the consumer's medical record.

RN Responsibilities for Inpatient Consumers:

- The RN shall be responsible for comparing the medication information provided by the consumer with medications ordered at admission to identify and resolve any discrepancies, including omissions, duplications, contraindications, unclear information and/or changes.
 - The RN will notify the consumer's psychiatrist/physician of any discrepancies.
- Changes in medication orders will be made on the doctors' order sheet.

Discharge from an Inpatient Unit:

- The RN will provide the consumer (or family, as needed) with information on all medications prescribed for after discharge.
- Medication information given to the consumer at discharge shall include, at a minimum, medication name, dose, route, frequency and purpose.

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Discharge Instructions:

- Consumer medication discharge instructions shall include how to take the medications prescribed, the time for the next dose, proper storage and how long to take any new medications that may be prescribed.
 - The information shall be documented on the Discharge Instructions form and a copy shall be given to the consumer and/or family.

OUTPATIENT PROTOCOL

If Outpatient Consumer:

- The psychiatrist completing the medication review will obtain and document the consumer's current medications taken at home.
 - These medications will be listed on the Current Medication List Form.
- The psychiatrist shall rely on the consumer, as well as other sources (family, consumer's pharmacy, consumer's prescription containers, transfer records, current medical record, etc.), to document the current medication list as accurately as possible.
- If the consumer has a home medication list, a photocopy of the list shall be placed in the consumer's medical record.

Psychiatrist Responsibilities for Outpatient Consumers:

- The psychiatrist shall be responsible for comparing the medication information provided by the consumer with medications prescribed for treatment in order to identify and resolve any discrepancies, including omissions, duplications, contraindications, unclear information and/or changes.
- Changes in medication orders will be made on the doctors' order sheet.

INPATIENT AND OUTPATIENT PROTOCOL

Updates:

- Anytime a consumer's medication regimen changes, the MAR and Current Medication List form shall be updated immediately.

Performance Improvement:

- The medication reconciliation process will be monitored via performance improvement activities, and changes will be made to improve processes as needed.



FORMS

- Discharge Instructions Form
- Medication Administration Record (MAR)
- Current Medication List Form

REFERENCES

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- Amended Permanent Injunction (API) filed 6/30/05

APPROVED:		Date: 
	_____ Wilfred Aflague Director	_____