

Name of Policy: Therapeutic Drug Substitution Policy Number: 3364-100-70-05 Approving Officer: Chief Executive Officer, Chief of Staff Responsible Agent: Director of Pharmacy Scope: University of Toledo Medical Center and Medical Staff			
		Effective date: Original effective date: 06/18/1994	
Key words: Therapeutic, Drug, Substitution, Therapy, Dispensing			
<input type="checkbox"/>	New policy proposal	<input checked="" type="checkbox"/>	Minor/technical revision of existing policy
<input type="checkbox"/>	Major revision of existing policy	<input type="checkbox"/>	Reaffirmation of existing policy

(A) Policy statement

A therapeutically equivalent drug may be dispensed following the development of objective interchange guidelines by the medical staff.

(B) Purpose of policy

To promote cost effective, rational drug therapy by controlling the number of similar medications within a given therapeutic class that will be available on the formulary.

(C) Definition

The dispensing of a chemically dissimilar drug for another drug within the same class. Generally, the substituted drug has a pharmacological profile similar to the agent which is being substituted.

(D) Procedure

The Medical Staff Pharmacy & Therapeutics Committee will identify potential therapeutic classes of medications which may provide opportunity for therapeutic interchange. Upon identification, experts in the area of the therapeutic classification will be charged with selecting an appropriate therapeutic class representative drug. In making this selection, the following factors should be considered: efficacy, safety and Pharmacoeconomics. Following the agent election, objective interchange guidelines will be established and will be reviewed with other members of the medical staff.

The therapeutic agent and the interchange guidelines will be created by the Pharmacy & Therapeutics Committee and approved by the Medical Executive. Publication of the substitution guidelines will occur in the "Pharm Report," to notify physicians and other health care professionals of the guidelines.

The electronic medical record will guide practitioners to the appropriate conversions assisting in appropriate conversion and reconciliation. Refer to pharmacy policy 3364-133-36 for ~~currently approved substitutions~~ more information.

<p>Approved by:</p> <p>_____</p> <p>Daniel Barbee Chief Executive Officer</p> <p>_____</p> <p>Date</p> <p>_____</p> <p>Puneet Sindhwani MD Chief of Staff</p> <p>_____</p> <p>Date</p> <p><i>Review/Revision Completed by: Lindsey Eitniew, Director Acute Hospital Pharmacy</i></p>	<p>Policies Superseded by This Policy:</p> <p>Initial effective date: 6/8/1994</p> <p>All Review/Revision Dates:</p> <p>9/11/96 6/9/99 5/8/02 5/11/05 10/22/2008 5/25/2011 5/1/2014 5/1/2017 10/1/2019</p> <p>Next review date:</p>
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