


<b>Name of Policy:</b> Pharmacist Charting <b>Policy Number:</b> 3364-133-123 <b>Approving Officer:</b> Chief Operating Officer <b>Responsible Agent:</b> Administrative Director Pharmacy Services <b>Scope:</b> University of Toledo Medical Center		 <b>Effective date:</b> <b>Original effective date:</b> 5/1/2017	
Key words: Pharmacist, Charting, Pharmacy, iVent, Orders			
<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:**

The Pharmacy and Therapeutics Committee and Medical Executive Committee approve pharmacists documenting in the official patient medical record.

**(B) Purpose:**

Provide consistent documentation and clear communication to the entire medical team in the patient’s record by pharmacists.

**(C) Procedure:**

1. Order Writing
  - a. All UTMC pharmacists may enter or write verbal, telephone, consulted orders, and per protocol orders with a physician co-signature.
2. Information to be documented in the electronic medical record (EMR)
  - a. The pharmacist will document an intervention and post as a progress note in the EMR in the following situations. The list is to provide guidance, but, due to the complexities of patient care, is not absolute or all inclusive.
    - i. Official consults, initially and with each dose change or pharmacist-ordered lab result.
3. Interventions to be documented in an ivent
  - a. Whenever the pharmacist verbally suggests a significant change in the medication regimen with the team.
  - b. Admission medication reconciliations
  - c. Discharge medication reconciliations

- d. Risk Evaluation and Mitigation Strategies (REMS)
  - e. Specialty medication coordination
  - f. All U-500 insulin clarifications need to be documented.
  - g. Regulatory agencies require routine pharmacist evaluations of patients with complex disease states (i.e. post-op transplant recipients and donors) and this will be documented
  - h. Researched Overrides:
    - 1. If the pharmacist obtains additional clarification related to allergies or drug interactions beyond the physician's initial response in the EMR, the pharmacist shall document this new information.
    - 2. If the pharmacist researches a recommendation and believes that the rejection of this recommendation is a concern for patient safety, the researched recommendation should be included in the medical record, despite being rejected.
4. Examples of when not to enter an intervention note or iVent unless circumstances indicate doing so will improve coordination of care
- a. Phone clarifications of simple orders immediately resolved with no impact on patient care
  - b. Any time the change of an order is documented with the comments 'Per Protocol' or 'Per Policy' based on approved therapy management policies and procedures at UTMC.
  - c. Falls assessment
  - d. OARRS analysis
  - e. Anytime a physician order is not being processed within a reasonable amount of time
5. Charting of education
- a. Pharmacists or other trained personnel under a pharmacist's supervision will document education performed in the medical record

Approved by:	<b>Policies Superseded by This Policy:</b>
	• <i>none</i>

<p>_____ Daniel Barbee Chief Executive Officer</p> <p>_____ Date</p> <p>_____ Holly Smith Administrative Director Pharmacy Services</p> <p>_____ Date</p> <p>_____ Russell Smith Chief Operating Officer</p> <p>_____ Date</p> <p><i>Review/Revision Completed by:</i></p> <p><i>Pharmacy</i></p>	<p>Initial effective date: 5/1/2017</p> <p>Review/Revision Date: 9/1/17 5/2020 6/2023 5/2026</p> <p>Next review date:</p>
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