

Name of Policy: Pharmacy and Therapeutics Committee Policy Number: 3364-87-19 Approving Officer: Chief Executive Officer, Chief Operating Officer, Chief of Staff Responsible Agent: Administrative Director Pharmacy Services Scope: University of Toledo Medical Center		 Effective date: Original effective date: 03/14/2001	
Key words: Pharmacy & Therapeutics, Committee, Formulary, Patient Outcomes, Quality and Safety			
<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

It is the policy of the University of Toledo Medical Center and its Medical Staff that a Pharmacy and Therapeutics Committee will be appointed as defined below.

(B) Purpose of policy

The Pharmacy and Therapeutics Committee is responsible for the effective and efficient operation of the formulary system to optimize patient outcomes, quality and safety, and financial stewardship. The Pharmacy and Therapeutics Committee is responsible to the Medical Staff as a whole, and its ~~policy~~ recommendations for hospital wide policies are subject to approval by the Medical Executive Committee. The Pharmacy and Therapeutics Committee is responsible for ~~in~~ the formulation of broad professional policies relating to drugs, nutritional supplements, and nutraceuticals in the hospital, including their evaluation, selection, procurement, storage, distribution, administration, and use.

(C) Procedure

The Pharmacy and Therapeutics Committee shall be responsible for developing and maintaining surveillance of drug utilization policies and practices. This shall include:

- a. Assisting in the formulation of the broad professional policies regarding the evaluation, appraisal, selection and procurement, storage, and distribution, —use, safety procedures, and all other matters relating to drugs in the hospitals.
- b. Advise the Medical Staff and Hospital's Pharmacy Department on matters pertaining to the choices of available drugs.
- c. Make recommendations concerning drugs to be stocked on nursing units and by other services.

- d. Develop, and review periodically, a formulary or drug list for use in the hospitals and outpatient formulary.
- e. Evaluate clinical data concerning new drugs or preparations requested for use in the hospitals.
- f. Review adverse drug reactions and medication errors:
- g. Review the clinical usage of antibiotics, including prophylactic use of antibiotics for inpatient, outpatient, and emergency care patients.
 - i. This should include both clinical and statistical assessments.
 - ii. Develop suitable criteria for selection and use of antibiotics by using susceptibility/resistance trend studies performed in conjunction with infection control function and pharmacy-originated statistical/prevalence studies as information bases.
 - iii. Selective or restrictive use of an antibiotic should be based on the results of documented information and should be implemented through the Medical Staff or the Service Chief with the Infection Control Committee being informed or consulted as appropriate.
- h. Perform such other duties as assigned by the Chief of Staff or the Executive Committee.
- i. Maintain a permanent record of all activities relating to the Pharmacy and Therapeutics Committee and to submit periodic reports and recommendations to the Executive Committee concerning drug utilization, policies and procedures in the hospitals.
- j. Participate in emergency preparedness planning as it pertains to pharmaceuticals and therapy.
- k. The pharmacy and therapeutics committee will perform class reviews based on the same criteria medications are added or removed from the formulary. Class reviews can result in addition, removal, or therapeutic substitutions per ~~policy 3364-133-36~~UTMC's Therapeutic Drug Substitution policies and procedures.
- l. The Pharmacy and Therapeutics Committee will review the ~~f~~Formulary and the look- alike-sound-alike medication list at least once a year
- m. Review medication errors and promote safe use of medications throughout all patient care areas through policies and procedures.
- ~~n.~~ Review plans for medication shortages
- ~~n-o.~~Approve pharmacy department specific policy updates
- ~~o-p.~~ Drug utilization criteria are developed, and monitoring is conducted to assure the quality and appropriateness of drug therapy provided to patients.
 - i. The Pharmacy and Therapeutics Committee~~P&T~~ will oversee the development of specific procedures relating to the usage of medications.
 - ii. All information is reported through ~~separate~~the appropriate committees ~~as appropriate. as define in the institutional Performance Improvement Plan.~~

(D) Composition

- a. The Pharmacy and Therapeutics Committee will consist of representatives from the Clinical Services of the hospitals, Nursing Services, Pharmacy Service, Quality Management and Administration, and other representatives as the medical staff deem necessary.

(E) Meetings

- a. The Pharmacy and Therapeutics Committee shall meet at least quarterly and send written reports to the Chief of Staff for Executive Committee review and approval. The minutes shall include attendance of members.
 - b. The Pharmacy and Therapeutics Committee is a peer review committee as defined by section 2305.25 of the Ohio Revised Code. As such, the committee's proceedings and records are held in confidence.
- (F) Voting Status: Each member of the Pharmacy and Therapeutics Committee shall have voting rights.
- a. Quorum
 - i. A quorum of the Pharmacy & Therapeutics Committee shall consist of the members present at each meeting. A minimum of five (5) members, with at least three (3) staff ~~physician provider~~ members, of the Committee shall be required to approve any and all Formulary changes. Voting may be conducted through email and aggregated.
 - ii. Department Chairs of members not maintaining a 50% attendance rate may be asked to designate an alternative representative for appointment consideration.
- (G) Subcommittees
- a. Subcommittee may be permanent or ad hoc to work on a specific issue.
 - b. All work at subcommittees will be approved by the committee at large.

<p>Approved by:</p> <hr/> <p>Daniel Barbee Chief Executive Officer</p> <hr/> <p>Date</p> <hr/> <p>Puneet Sindhwani, MD Chief of Staff</p> <hr/> <p>Date</p> <hr/> <p>Russell Smith Chief Operating Officer</p> <hr/> <p>Date</p> <p><i>Review/Revision Completed by: Pharmacy</i></p>	<p>Policies Superseded by This Policy:</p> <ul style="list-style-type: none">• <i>MS-019 Pharmacy and Therapeutics Committee</i> <p>Initial effective date: 03/14/2001</p> <p>Review/Revision Date: 11/19/03 02/14/07 11/25/09 11/25/12 5/1/2015 12/1/2016 10/1/2019 2/27/2023</p> <p>Next review date:</p>
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