(A) **Policy Statement**

Education will be provided to patients and/or patient families on pertinent drug-food interaction as necessary.

(B) **Purpose of Policy**

To monitor adverse drug reactions at the University of Toledo Medical Center. The data collected will aid the Pharmacy and Therapeutics Committee in its assessment of drug use, individual patient incidents related to drug use, and drug interactions, and will provide the basis for medical and nursing staff education that may minimize the occurrence of adverse reactions.

(C) **Procedure**

1. The Nutrition Committee, which is part of the Surgical Critical Care Conference, with the input from the Medical Staff, Nursing Administration, Pharmacists, Clinical Dietitians, and other pertinent individuals, will determine clinically significant drug-food interactions and review medications as necessary. All actions are reviewed by the Pharmacy and Therapeutics committee.

2. The targeted drug-food interactions will include, but are not limited to the following:

   Grapefruit/Grapefruit juice:  
   - Albendazole
   - Atorvastin
   - Buspirone
   - Carbamazepine
   - Cilostazol
   - Cisapride
   - Clomipramine
   - Cyclosporine

   Vitamin K Foods:  
   - Warfarin

   Tyramine-containing foods:  
   - Isocarboxazid, Linezolid, Phenelzine, Procarbazine, Selegiline, rasagline, and Tranylcypromine

3. Pharmacy will automatically generate a list of patients on the targeted drugs for Clinical Nutrition. Clinical Nutrition staff will counsel patients, newly prescribed and/or as consulted, on cyclosporine, tacrolimus, sirolimus, and tyramine containing foods. Documentation of education and patient understanding will be noted in the medical records.

4. Pharmacy will have the responsibility of counseling patients prescribed Warfarin. Patients requiring education will be identified by nursing and reported to pharmacy daily. Warfarin counseling may include one-on-one, written, videotape or audiotape instruction. Documentation of education and patient understanding will be noted in the electronic medical record.
4. Patients not requiring Clinical Nutrition or Pharmacy counseling include patients on the targeted medications prior to admission, patients incapable of understanding education material, and patients being discharged to an extended care facility.

5. Pharmacy will generate a list of patients on the targeted medications and forward it to the Food & Nutrition office daily and prior to each meal period. Food Service staff will omit necessary foods on the inpatient menus.

6. Patient counseling on grapefruit/grapefruit juice interactions is not warranted during hospitalization as all grapefruit products have been omitted from inpatient menus.

7. Notification of targeted drug-food interactions and the relation of medication administration with regard to meals for pertinent medications will be documented in the electronic medical record.

8. Written information on the targeted drug-food interactions will be provided for patients on the back of the Patient Discharge Instruction form. Nursing will document receipt of the information in the medication section of the Patient Discharge Instruction form.