(A) Policy Statement

The Pharmacy and Therapeutics Committee has reviewed the hospital’s formulary and trend analysis of medication errors to determine a list of high-risk/high alert medications. Additional input is incorporated from such organizations as the Institute for Safe Medications Practices (“ISMP”), United States Pharmacopoeia (“USP”) and other national databases reporting information on the use of medications.

(B) Purpose of Policy

To provide the highest quality pharmaceutical care with the minimum number of medication errors and the lowest patient risk. Medications that the Pharmacy and Therapeutics Committee (P&T) has deemed to be high risk or high-alert include the following categories:

- Opiates
- Concentrated electrolyte solutions
  - Potassium (Chloride and Phosphate salts)
  - Hypertonic saline
  - Magnesium sulfate
  - Calcium salts
- Chemotherapeutic Agents
- Anticoagulants
- Insulin
- Total Parenteral Nutrition (TPN)
- Formulary look-alike-sound-alike medications

(C) Procedure

The following processes will be employed in the handling of high-alert medications including, but are not limited to, the following:

**OPIATES**

- Opiates and all other controlled substances shall be maintained under locked storage in both the Pharmacy Department and patient care units.
- Documentation and reconciliation of controlled substance usage will follow all applicable state and federal standards.
- **Epidurals must be ordered on the standard UTMC epidural order set.**
  - Policy: Pharmacy Controlled Substances 3364-133-04
  - Pharmacy 3364-133-75 Automated dispensing cabinets
Nursing Cervical/Lumbar. Thoracic Epidural Infusion of local anesthetics and or opioids for pain management

CONCENTRATED ELECTROLYTE SOLUTIONS

- Concentrated electrolyte solutions are only stored in the Pharmacy Department.
- **Concentrated electrolyte vials are not to be dispensed to patient care units.**

INSULIN

- Prior to administration, it is recommended that the insulin volume be checked by two RN’s.
- Long acting insulin is drawn up by pharmacy and provided in unit of use.
  
  *Policy: Nursing Policy Administration of Intravenous Medication 3364-110-5-02*
  
  *Pharmacy Procedure: Ordering U-500 Regular Insulin 046-IPP*

CHEMOTHERAPY AGENTS

- Dose Calculations are checked by two RN’s.
- Nursing staff must be qualified to administer IV chemotherapy.
- Emergency Medications and equipment is available for immediate intervention.
- Order entry and calculations are checked by two pharmacists, product checked in compounding hood by pharmacist.
- Orders must be written by attending physician or a fellow. No Verbal orders are allowed (Policy 3364-100-70-07).
  
  *Policy: Nursing Policy Admin. of Intravenous Medication 3364-110-5-02*
  
  *Nursing Policy Qualifications for Nurses to Administer IV Antineoplastic Chemotherapy 3364-110-5--08*
  
  *Nursing Policy Administration of Antineoplastic Chemotherapy 3364-110-5--07*
  
  *Nursing Policy Admin. Of chemotherapy with a Known Potential for Hypersensitivity Reactions 3364-110-5--09*
  
  *Hospital Policy 3364-100-70-07 Ordering of Anti-Neoplastic Agents*

  *Pharmacy Procedure: Antineoplastic Agents 009-IPP*
  
  *Safety Manual HM 08-005*

ANTICOAGULANTS

- Standard Concentrations are established for continuous infusions.
- Standard concentrations are programed into the smart pump technology.
- Prefilled IV bags are purchased when available.
- Number of concentrations of Heparin are minimized.
- Appropriate laboratory values will be monitored as clinically appropriate
- Standard order sets and programs are in place to decrease medication errors
  
  *Pharmacy Procedure: Anticoagulant Orders and Anticoagulant Monitoring: 037-IPP*

TOTAL PARENTERAL NUTRITION (TPN)

- Special Compounders are used.
- Electronic standard order sets are used, if the electronic record is unavailable or unable to be used standard paper order sets are use
- TPN must be ordered daily by 2PM.
  
  *Pharmacy Procedure: Exactamix 2400 Operating Procedures: 013-IPP*
LOOK-ALIKE-SOUND-ALIKE MEDICATIONS (LASA)

- Whenever possible bar-code technology is utilized in the filling, checking, and administration of medications to reduce risk of LASA errors.
- Products are segregated in the automated dispensing cabinets (ADC).
- Narcotics are segregated in the Pharmacy narcotic safe.
- High Alert Medications may be identified in the ADC with “Alert” stickers or LASA stickers.