

<p><b>Name of Policy:</b> <u>Automatic solid to liquid dosage form conversion</u></p> <p><b>Policy Number:</b> 3364-133-124</p> <p><b>Department:</b> Pharmacy</p> <p><b>Approving Officer:</b> Senior Hospital Administrator, Chair of Pharmacy &amp; Therapeutics</p> <p><b>Responsible Agent:</b> Director of Pharmacy</p> <p><b>Scope:</b> University of Toledo Medical Center</p>	 <p><b>Effective Date:</b> 09/28/2023 <b>Initial Effective Date:</b> 8/1/2017</p>
<p> <input type="checkbox"/> New policy proposal                      <input type="checkbox"/> Minor/technical revision of existing policy  <input type="checkbox"/> Major revision of existing policy                      <input checked="" type="checkbox"/> Reaffirmation of existing policy </p>	

**(A) Policy Statement**

The University of Toledo Medical Center (UTMC) department of pharmacy seeks to serve the needs of its patients. In order to do, pharmacists may interchange solid dosage forms for liquid dosage forms based on the needs of the patients and bioavailability of the drug.

**(B) Purpose of Policy**

Patients are often prescribed oral tablets or capsules. During a hospital stay, a patient may have a feeding tube (such as nasogastric, jejunum, or gastric tube) or other needs which necessitate a change to a liquid dosage form in order to administer the medication. As a result, this policy will serve as a guideline for pharmacists as nurses or other providers request changes in dosage form during the care of patients.

**(C) Procedure**

1. This policy and procedure is to serve as a guideline only. Remember to check the following items prior to interchange of any medication especially those not explicitly included on this list.
  - a. Bioavailability
  - b. Ability to crush or dissolve
    - i. Do not crush extended release, sustained release, or enteric-coated medications tablets.
    - ii. Medication order or nursing comments may indicate that the product cannot be crushed.
  - c. Package or labeling instructions for guidance on interchanges
  - d. Routes of administration of other active medications on the patient’s profile
2. When interchanging a solid/liquid dosage form for an equivalent solid/liquid dosage form, utilize the following steps for purposes of documenting in the patient’s permanent medical record. Interchanges may be initiated by routine pharmacy patient profile review or from requests by nursing or medical staff.
  - a. Discontinue the initial order in the computerized prescriber order entry system.
  - b. Enter the equivalent order into the computerized prescriber order entry system with the following comments “This order was placed as a result of a solid/liquid to solid/liquid switch per the approved automatic PO to enteral pharmacy procedure.”
  - c. Enter a note into the electronic pharmacy documentation system. Per clinical judgment, for cases that are more questionable or involve discussions with medical team, in accordance with institutional policy 3364-133-123 Pharmacist Charting, a note should be created and printed to be placed in the patient’s permanent medical record. The note should detail the medication(s) being evaluated, clinical considerations for oral to enteral conversions, individuals for whom therapy



## **Appendix 1: Recommended Medical Record Note Template for Solid to Liquid Therapy Conversion**

### Solid to Liquid Therapy

The oral therapy of **@DRUGNAME** for **@PN** was clinically evaluated for conversion from solid/liquid to solid/liquid therapy. No contraindications to conversion were noted. Based on approved procedure 072-IPP, Automatic Solid to Liquid Dosage Form Conversion, the therapy was changed from **@DRUG,ROUTE,FREQUENCY** to **@DRUG,ROUTE,FREQUENCY**. Please call pharmacy with any questions or concerns. Thank you.

\*\*If any specific clinical considerations or discussions with providers (RN or MD) were considered prior to interchange, please include that in note.