

POLICY MANUAL

Subject: Types of Medication Orders

Effective Date: 12/13/04

Initiated By: Cinde Stewart Freeman
Chief Quality Officer
Jill Lemonds
Director of Nursing

Approved By: William C. Anderson
Medical Director

Review Dates: 01/10 NC, 02/11 NC, 04/12 NC
03/13 NC, 2/14 NC, 3/15 NC

Revision Dates: 0708 DT

POLICY:

In order to minimize the possibility of error and to ensure consistency in medication order and administration practices, the following standards have been developed with regard to the writing of various types of medication orders by physicians or licensed nurses taking verbal or phone orders from physicians.

PROCEDURE:

1. The following elements are required for the specific type of medication orders listed below:
 - a. As Needed or PRN Orders: Date of Order, Medication Name, Dose, Route, Frequency, Use of "PRN" or "as needed" phrase, and Indication-for Use
 - b. Standing Orders: Date of Order, Medication Name, Dose, Route, Frequency, Indication-for-Use
 - c. Taper Orders: Date of Order, Medication Name, Beginning Dose, Route, Frequency, Indication-for-Use, Amount of Dosage Decrease in standardized units (i.e. mg), and Specific Time Table for Dosage Decrease in standardized units (i.e. hours or days). Example: Scheduled doses of Valium, Phenobarbital, and Subutex protocols.
 - d. Titrating Orders: Date of Order, Medication Name, Beginning Dose, Route, Frequency, Indication-for-Use, Specific Clinical Indication(s) for Increase/Decrease of Dose, Maximum Dose Allowed within Specified Time Frame. Example: Subutex protocols.

- e. Compounded Drugs/Drug Mixtures Not Commercially Available: Date of Order, Medication(s) Name (i.e. each drug in mixture, as well as amount of each); Dose; Route; Frequency, Indication-for Use
 - f. Medication-Related Devices— Date of Order, Name of Specific Device and Associated Medication; Dosage of Associated Medication; Specific Instructions for Use of Device; Frequency for Use of Device; Indication-for-Use
2. The following types of orders are NOT acceptable:
- a. Hold Orders
 - b. Resume Orders
 - c. Herbal Products
 - d. Range Orders
3. Investigational medications may only be given with special permission of the Medical Director after consultation with the patient and the Principal Researcher IF the patient has been admitted while participating in such a study elsewhere AND if not contraindicated by the patient's current medical condition. If approved, the following elements are required: Date of Order, Medication Name, Dose, Route, Frequency, Indication-for-Use. In addition, as a condition of administering the medication, the Principal Researcher shall provide the medical/nursing staff with such education regarding the medication (i.e. rationale for use, mechanism of action, potential side effects, potential adverse effects, etc.), so as to safely administer and monitor the effectiveness of the medication. NOTE: Patients who are admitted and report investigational medication use should be referred to the Medical Director as soon as possible.
No investigational medication may be administered prior to the Medical Director's approval.
4. At the time of discharge, medications that are to be taken at home are listed in the continuing care plan of the Electronic Medical Record. This list includes the following elements: Medication Name, Dose, Route, Frequency, Indication-for-Use, Special Instructions re: Administration, Storage, or Physician Notification.