# CPQIH Training Basic @ THANJAVUR Group 6 Assignment

#### **MEDICATION MANAGEMENT & SAFETY**

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# MEDICATION MANAGEMENT & SAFETY

## 7 STANDARDS 22 OBJECTIVE ELEMENTS

#### SUMMARY OF STANDARDS

STANDARD	DESCRIPTION
MOM.1	Documented procedures guide the organization of pharmacy services and usage of medication
MOM.2	Documented policies & procedures guide the storage of medications
MOM.3	Documented procedures guide the prescription of medications
MOM.4	Policies & procedures guide the safe dispensing of medications
MOM.5	There are defined procedures for medication administration
MOM.6	Adverse drug events are monitored
MOM.7	Documented policies & procedures govern usage of radioactive drugs.

#### INTENT

- The organisation has a safe and organised medication process. The process includes policies and procedures that guide
  - Availability
  - Safe storage
  - Prescription
  - Dispensing
  - Administration of medications
  - Monitoring

### **Availability**

- Required Licenses to run a pharmacy are available
- Pharmacists required to run pharmacy are available
- Pharmacy can be run by hospital or outsourced
- List of Medications(Formulary)
- List of Emergency Medicines are Defined and available at all times. Checked daily for availability
- List of High Risk Medications
- List of Implants that are used
- Quality of Drugs and Implants
- Inventory Management and Control techniques to avoid stock out situations
- Drugs and Implants are procured and managed by the pharmacy

### **Safe Storage**

- Stored as per manufacturers specifications
- Stored on FIFO Basis
- LASA Medications identified and stored separately
- Storage Room should be clean, well ventilated and protected from direct sunlight
- Expired Drugs should not be stored / used.
   Return to vendor or destroy(documented)
- Narcotic Drugs and Radiation Drugs should be securely stored
- Emergency Medicines are stored separately
- High risk drugs can be color coded and stored separately

#### **Prescription**

- Registered Doctors are authorized to prescribe
- Entry made by assistant / nurse to be verified by treating doctor
- List of drugs for Verbal orders and only those can be ordered verbally and countersigned by ordering doctor within specified time
- OP Prescriptions are written in a specified format
- IP Prescriptions are written in an uniform location
- For Modification in order, fresh order has to be written
- Medication Orders should be written legibly in CAPITAL letters with medicine name, strength, frequency, dose, route and other instructions
- When prescribing high risk medications, the doctor should follow national / international guidelines , regulatory bodies and SOP for prescription

### Dispensing

- Qualified Pharmacist should be available at all shifts
- Before dispensing, check medicines with prescription and expiry date
- High risk drugs should be independently double checked before dispensing
- Staff should be trained in dispensing and awareness of high risk drugs

#### **Administration of Medication**

- Medications can be administered only by trained personnel(Doctors, Registered Nurse)
- Test Dose for some medications where required (DYE Injection, Antibiotics, Sulpha Drugs)
- Policy on self administration of medication (typically after discharge)
- Medication order checked prior to administration
- Before administration of high risk medication, medication order is double checked
- Prepared medication should be labeled immediately. Next drug preparation starts after this labeling is complete
- Label should have details like drug name, dilution, dose, route and prepared time
- Any medicine that cannot be identified should be discarded
- Medication administration should be documented immediately
- Proper records should be kept in each area for usage of narcotic drugs along with the patient name, UHID, quantity used and quantity discarded. Empty vials should be handed to pharmacy

#### **Adverse Drug Event Monitoring**

- Adverse Drug Event is an injury resulting from medical intervention. This includes
  - Adverse Drug Reactions Undesirable experience that has happened to a patient while taking a drug that is suspected to be caused by drug or drugs
  - Medication Errors Mishaps that occur during prescribing, transcribing, dispensing and administering drug.
  - Overdoses
  - Allergic Reactions
- Not all Adverse Drug Reaction and Medication Errors are Adverse Drug Event
- ADE should be reported within specified time
- ADE should be analyzed and monitored
- CAPA should be taken based on the analysis and appropriately documented

### Safe Disposal

- Expired Drugs
  - Record of Destruction
  - Destroy to prevent reuse as per norms
- Narcotics
  - Unused Narcotics should be washed in running water in the presence of senior nurse
  - Record disposal of narcotics
- Radioactive Drugs
  - As per AERB Guidelines
  - Dilute & Disperse, Delay & Decay, Concentrate and Contain, Incinerate

## Thank You