

UNIT DOSE SYSTEM (Medication Cart)

PURPOSE:

To delineate policy for the distribution of medications utilizing the Unit Dose system.

POLICY:

1. Unit Dose 24-hour Supply

The Pharmacy shall supply to those nursing units utilizing the Unit Dose system a 24-hour supply of medications normally not stocked in Med Select units for each patient and for any Nursing unit where 'med expansion' has not been fully implemented in Med Select units/Automated Drug Distribution System (ADS).

2. Maintaining and Dispensing Medications

Medications shall be dispensed in single, unit dose packages when possible and maintained in patient specific bins in Med Select Units/ADS.

3. Patient's Medication Drawer/Bin

Each patient shall have a bin labeled with the patient's room number. The patient's name is affixed to plastic zip-lock bag with the patient's medications (s) and placed into bin. The patient's bin shall be restocked daily with 24-hour supply of prescribed medications with the exception of medications stocked in Med Select units, refrigerated drugs or drugs requiring special storage.

4. Pharmacy's Responsibility

Pharmacy shall be responsible for:

- A. refilling the medications at approximately the same time daily and securing after refilling is completed
- B. notifying the Charge RN/MD when drug variance (s)/error (s) are noted and clarifying order when appropriate.
- C. removing discontinued medications from the patient's specific bin.
- D. retrieving any discharged patient's medications from the "Discharge " bin.
- E. providing patient education regarding medications; precautions; side effects, etc., when requested.

5. Nursing Staff's Responsibility:

Nursing personnel shall be responsible for:

- A. routing copies of all physician's orders to the Pharmacy.
- B. providing timely notification to the pharmacy of change(s) in patient status as applicable.
- C. placing discontinued medications in a plastic zip-lock bag labeled with the patient's name and room number. Tube medications to pharmacy or place in discharge bin in the Med Select unit.
- D. ensuring all admit orders include allergies and weight information.
- E. maintaining cleanliness of the patient specific bin, i.e., cleaning up spills, removing empty packages and plastic bags.
- F. securing the supply cabinet with patient specific bins in MedSelect unit/ADS.
- G. sending a communication slip or MAK message to pharmacy when a drug is missing from a patient's bin, when MedSelect unit is out of medication or when MedSelect unit is malfunctioning. If Pharmacy does not have an order on file for the medication, or the patient is not found on the Med Select Patient Profile, a copy of the original order must be sent with the communication slip or MAK message.
- H. transferring all medications/IV fluids and IVPBs with the patient to the receiving unit if the same service (med to med, surg to surg, not ICUs to general care areas).
- I. communicating with Pharmacy via the "MedSelect Problem Report" any problems or occurrences with the Med-Select system when discrepancy button can not be used.

RESPONSIBLE PARTY	ACTION
RN, RN Applicant, LPN, US, SNT, NT Medical Assistant	<ol style="list-style-type: none"> 1. Transcribes physician's orders. (Orders transcribed by unlicensed staff must be cosigned by a licensed nurse prior to implementation) 2. Stamps MAR with patient's address-o-graph on admission and/or whenever automated MAR is not available. 3. Routes copies of all order sheets to central pharmacy. 4. Labels patient's medication drawer with name and room number.
RN, RN Applicant, LPN	<ol style="list-style-type: none"> 5. Makes timely entry in computer of change in patient status, i.e., transferred, discharged, expired. Notifies pharmacist when applicable. <ol style="list-style-type: none"> a. <u>Transfer:</u> Send all medications/IV fluids and MAR with patient to receiving unit if the same service (med to med, surg to surg, not ICU's to general care areas.) Note: Medication security is maintained at all times during transfer (locked or under constant surveillance) b. <u>Discharges and/or Deaths:</u> Places all medications in a plastic bag labeled with patient's name, and tubes medication, and fluids to Pharmacy and/or places in discharge drawer in ADS/MedSelect Unit.
Pharmacy	<ol style="list-style-type: none"> 6. Notifies Charge RN/MD when drug variance/error is noted and/or clarify order when appropriate. 7. Tubes corrected order and medication(s) to unit. 8. Dispenses 24-hour supply of prescribed drugs not in ADS, stocking at approximately same time daily. (Exchange fill schedule is posted on each nursing unit). 9. May provide counseling to patients suspected of having compliance problems with their medications, and to any patient when requested.
RN, RN Applicant, LPN	<ol style="list-style-type: none"> 10. Verifies correctness of MAR/flowsheet to physician's orders.

RESPONSIBLE PARTY	ACTION
RN, RN Applicant, LPN	<p>11. At the bedside after verifying patient name and medical record number administers medications as prescribed and documents appropriately on the MAR/flowsheet/MAK System.</p> <p>Note: Clinics may verify the patient’s name and birth date.</p> <p><i>Refer to Nursing Policy D-44, Drugs Medication/Administration, for additional medication.</i></p> <p>12. Places all discontinued drugs in plastic bag and labels with patient's name. Tubes discontinued meds, IVs, to pharmacy via pneumatic tube as soon as possible and/or places in discharged drawer in ADS/MedSelect Unit.</p>

<p>References:</p> <p>Nursing Policy: D-44 Drugs/ Medication Administration</p>

Jamie Jett, MBA, RN
Director, Patient Care Support/Medicine Services

Date

Pamela B. Simmons, PhD, RN
Assistant Administrator and CNO
Patient Care Services

Date