LOUISIANA STATE UNIVERSITY HEALTH SCIENCES CENTER  
- SHREVEPORT  

PHARMACY SERVICES  

Purpose:  
To establish responsibility for drug distribution and appropriate drug therapy for both inpatient services and the outpatient clinics within the guidelines of State & Federal Regulations, Joint Commission and standards of practice.  

Policy:  

1. Pharmacy Location Hours Telephone  
Central Pharmacy AG-13 24 hours daily 675-5175  
Feist-Weiller Cancer Center Satellite B-410 8am-4:30pm M-F 813-1500  
ACC Pharmacy 1606 Kings Hwy Shreveport, LA 8am-4:30pm M-F 813-1815  
Research Pharmacy B-134 8am-4:30pm M-F 813-1197  

2. Pharmacy Services shall be responsible for responsive and accurate drug storage, distribution, appropriate and safe usage of drugs, inventory control, budget, patient billing for medications and all policies and procedures regarding such activities. Select Department specific policies regarding medication distribution, administration and control shall be submitted to the P&T Committee for review prior to initiation. The pharmacy shall review all non-emergent/non-urgent medication orders prior to administration.  

3. Drugs stocked in the hospital  

a. Only drugs approved for inclusion in the United States Pharmacopoeia, National Formulary, New Drugs or Accepted Dental Remedies, or which are approved by the Hospital’s P&T Committee, shall be eligible for use in the Hospital. Drugs requested by members of the Medical/Dental staff not listed in the above compendia, or not yet evaluated by the P&T Committee shall be obtained and considered tentatively approved only if the request is signed by the department
head or service chief. Tentatively approved drugs shall be submitted to the P&T Committee for evaluation at the next scheduled meeting.

b. Drug products classified by the FDA as ineffective will not be stocked by the Hospital Pharmacy; possibly effective drugs may be obtained at the individual physician’s discretion.

c. The Pharmacy shall be responsible for informing the appropriate physician and nursing unit if a drug or dosage form is not immediately available.

d. LSUHSC Pharmacy will substitute generic equivalents of brand name drugs ordered. If the physician has reasons to believe the generic drug is not equivalent, such information should be documented and forwarded to the Pharmacy.

e. Pharmacy will not purchase over-the-counter non-formulary medications.

4. Compounding of Items

a. In situations where drugs not commercially available are widely used based on literature reports and where there exists a recipe for the preparation of these products, Pharmacy will prepare them when possible.

b. If a recipe is not available or if the product is to be made from non-sterile drugs or impure chemicals, the prescriber will submit a completed non-formulary request and the P&T Committee (or P&T Committee Chairperson/Medical Director in an emergent situation) will review the feasibility of Pharmacy mixing these products on an individual basis.

5. Drug packaging and Labeling

The Pharmacy Service shall be responsible for the proper packaging and labeling of all drugs or chemicals dispensed by the Pharmacy for use in patient treatment. Labels used by the Pharmacy shall be distinctive and not used by other Hospital departments.

All medications shall be labeled with:

- Drug name, strength and amount (if not apparent from the container),
- Expiration date when not used in 24 hours,
- Expiration time when expiration occurs in less than 24 hours
- For all compounded IV admixtures and parenteral nutrition solutions, the date prepared, the diluents preparing, and the pharmacist initials,
- Patient name
- Patient location
• Directions for use and applicable cautionary statements either on the label or attached as an accessory label (example: requires refrigeration or for IM use only)

(administrator's signature)

Administrator

6/22/12

Date

Approved by Clinical Board: June 2000, 4/17/01, 2/17/04, 2/20/07, 6/19/12
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