

## IREDELL HEALTH SYSTEM

<b>Dispensing of Medications from the Emergency Department</b>	
Approved by: Rhonda Ruppe, MSN, RN, CEN Vijay Nagpal, MD, Emergency Medicine Randi Raynor, PharmD, MBA, BCPS	Last Revised Date: 02/2021
Emergency Department Committee P&T Committee	Date: 08/2020 Date: 02/2021

**Policy:**

Medications may be dispensed for use outside the Emergency Department (ED) by the provider, registered nurse (RN) under provider supervision, or a person authorized to prescribe and dispense medications pursuant to NC law, when medications are not otherwise available from an outpatient pharmacy.

- Medications shall only be dispensed to a registered patient of the ED.
- The Director of Pharmacy shall develop and supervise a system of control and accountability of all medications administered, or dispensed from the ED.
- The Director of Pharmacy, in conjunction with the P&T Committee and with approval of the Executive Committee of the Medical Staff, shall develop an Emergency Department Dispensing Formulary (appendix A). This formulary shall consist of medications of the nature and type to meet the immediate needs of ED patients, and quantities in each container shall be limited to not more than a 24-hour supply or the smallest commercially available quantity.
- Controlled substances shall be dispensed pursuant to the written or verbal order of a licensed practitioner who is registered with the Federal DEA to prescribe or dispense controlled substances and who is present in the ED at the time of dispensing.
- Medications shall be pre-packaged and pre-labeled (including necessary auxiliary labels) by pharmacy personnel and placed in suitable safety closure containers meeting requirements set forth by the North Carolina Board of Pharmacy. Only a pharmacist, or qualified person under the supervision of a pharmacist, may prepackage medications.
- ED dispensing should be minimized. The provider should provide the patient with a prescription, if an outpatient pharmacy in close proximity to the facility is open.
- Only properly labeled prepackaged medications listed on the Emergency Department Dispensing Formulary may be dispensed to ED patients. Other medications, even though on the facility formulary and stocked in the facility, may not be dispensed to ED patients.

**Procedure:**

1. Pharmacy personnel will stock pre-labeled and pre-packaged medications to the ED Automated Dispensing Cabinet (ACS). The container shall be labeled with, at a minimum:
  - A. Drug name and strength
  - B. Lot number and manufacturer (if not apparent on the package)
  - C. Expiration date
  - D. Cautionary Statements, if any
2. Before the medication is dispensed to a patient, the provider or RN under his/her direction shall appropriately complete the label. The following information shall be placed on the label:

- A. Patient's Name
  - B. Date dispensed
  - C. Directions for Use
  - D. Provider's Name
  - E. Initials of dispensing Provider or RN
3. When the medication is dispensed to the patient, the appropriately labeled, prepackaged container of the medication shall be checked for correctness and given to the patient by the provider or by the registered nurse under the supervision of the ordering provider. *NOTE:* When a controlled substance is dispensed from the ED, the patient and the ordering physician must both be present in the ED. If an in-house provider requests to order a controlled substance to be dispensed to one of their patients in an emergency and the physician is not present in the ED (for example, a staff physician wants to order a controlled substance for an oncology patient in the middle of the night), the staff physician should contact the IMH Pharmacy Department.
4. The patient will receive printed instructions and will be counseled about the medication(s) as part of the discharge procedure. The discharge instructions including information about medications are reviewed with the patient at the time of discharge. This information may include, but not be limited to the following:
- A. Name, description, and purpose of the medication(s)
  - B. Route, dosage, administration, and continuity of therapy
  - C. Special directions for use by the patient
  - D. Common severe or adverse effects or interactions and therapeutic contraindications that may be encountered, including their avoidance, and the action required if they occur
  - E. Techniques for self-monitoring drug therapy
  - F. Proper storage
  - G. Prescription refill information
  - H. Action to be taken in the event of a missed dose
5. The patient will sign the discharge instructions per ED procedures, stating that he/she understands the instructions and has had an opportunity to ask questions. Any refusal to accept counseling for medications dispensed will be evidenced by the patient's refusal to receive and sign discharge instructions.

INITIAL EFFECTIVE DATE: 10/2003

DATES REVISIONS EFFECTIVE: 02/2010, 09/2020, 02/2021

DATES REVIEWED (no changes):

## **Appendix A: IMH Emergency Department Dispensing Formulary**

### **Gastrointestinal Agents:**

Ondansetron ODT 4 mg (Zofran ODT); #4 tablets

Promethazine HCL 25 mg (Phenergan); #4 tablets

### **Pain Control:**

Cyclobenzaprine 5 mg (Flexeril); #6 tablets

Hydrocodone 5 mg/APAP 325 mg (Lortab 5); #4 tablets

Tramadol 50 mg (Ultram); #4 tablets

Oxycodone 5 mg/APAP 325 mg (Percocet 5); #4 tablets

### **Respiratory Medications:**

Albuterol inhaler; 8 gm