

Administrative Policy
POLICY NO.: 200.02.105A

POLICY TITLE: Medication Administration

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Approved by: Quality Improvement Patient Safety Committee (QIPSC)

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SUMMARY & PURPOSE: The purpose of this policy is to outline the basic requirements of the medication administration and monitoring process.

SCOPE/APPLICABILITY: This policy applies to all the HWCOC Clinical Locations where faculty, students and /or staff provide care to patients. The HWCOC clinical locations are: FIU Health Modesto Maidique, ("MMC"), FIU Health Broward, Green Family Foundation NeighborhoodHELP Mobile Health Centers and Household visits. For the faculty, students and staff that are providing patient care in the *affiliated* hospitals, outpatient and diagnostic centers the policies and procedures of those institutions will govern their reporting responsibilities.

POLICY: Appropriately, credentialed and trained clinical personnel (licensed professionals) administer and monitor medications and provide timely, accurate, and patient specific clinical documentation.

DEFINITION:

Medication: Any prescription drugs, sample drugs, herbal remedy, vitamin, nutraceutical, over-the-counter drug, vaccine, diagnostic and contrast agents, radioactive medications, respiratory medications, parenteral nutrition, blood derivatives, intravenous solution, and any other products designated by the Food and Drug Administration as a drug.

PROCEDURE:

1. Medication Orders:

- a. Authorization of Medications- All medications are administered only upon order from an authorized licensed prescriber. Licensed prescribers include physicians, physician assistants, and nurse practitioners.
- b. Medication orders must be complete by containing the following:
 - i. Name of medication.
 - ii. Dose.
 - iii. Route.
 - iv. Reason/Indication the medication is prescribed.
- c. The medication order must be dated, timed, and signed by the licensed prescriber.
- d. Verbal medication orders should be limited to situations in which written or electronic communication is not feasible by the healthcare provider. In accordance with FIU HWCOP Departmental Policy 200.02.102P Verbal Orders.
- e. The licensed provider/prescriber shall educate the patient, or if appropriate, the family about common side effects or other concerns about the medication.

2. Administration of Medications:

- a. Licensed professionals authorized to administer medications include: Registered nurses, licensed practical nurses, certified medical assistants, paramedics, physicians, physician assistants, and nurse practitioners.
- b. The licensed professional shall discuss any unresolved, significant concerns about the medication with the prescriber and/or relevant staff involved with the patient's care and treatment.
- c. Prior to and after each administration of medication, the licensed professional will perform safe and effective hand hygiene practices. In accordance with FIU HWCOP Administrative Policy 200.02.103P Hand Hygiene.
- d. Prior to each administration, the licensed professional will wear the appropriate personal protective equipment.
- e. Prior to each administration of medication, the following accepted standards of practice are required to be confirmed by the licensed professional:
 - i. Right patient: Verifies correct patient by using the appropriate two patient identifiers.
 - ii. Right medication: Verifies medication being given to patient matches that prescribed and that patient does not have a documented allergy to it.
 - iii. Right dose: Verifies the dosage of medication matches the prescribed dose, and that the prescription itself does not reflect an unsafe dosage level (dose that is too high or too low).
 - iv. Right route: Verifies method of administration is correct. Orally, intramuscular, intravenous, etc., is appropriate for that particular medication and patient.
 - v. Right time: Verifies adherence to the prescribed frequency and time of administration.
- f. Documentation of the medication administration is required and shall occur after the actual administration of the medication to the patient. Documentation is performed in the patient's medical record.
- g. The licensed professional shall monitor the patient of side effects and the effectiveness of the medication and document any concerns in the patient's medical record.
- h. Medication errors and adverse drug reactions shall be reported to the prescribing provider and an incident report completed regarding the event. In accordance with FIU HWCOP 200.03.100A Administrative Policy Incident Reporting.

3. Labeling of Medications:

- a. Licensed professionals shall label all medications, medication containers, and other solutions on and off the sterile field in procedural settings.
 - i. Medication containers include syringes, medicine cups, and basins.
- b. In procedural settings both on and off the sterile field, label medications and solutions as soon as they are prepared, unless they are immediately administered. This applies even if there is only one medication being used.
 - i. An immediately administered medication is one that an authorized staff member prepares or obtains, takes directly to a patient, and administers to that patient without any break in the process.
- c. Labeling occurs when any medication or solution is transferred from the original packaging to another container.
- d. Medication or solution labels must include the following:
 - i. Medication or solution name.
 - ii. Strength.
 - iii. Amount of medication or solution containing medication (if not apparent from the container).
 - iv. Diluent name and volume (if not apparent from the container).
 - v. Expiration date when not used within 24 hours.
 - 1) Opened or punctured multi-dose vials may be used for no more than 28 days unless the manufacturer specifies otherwise. A 28-day expiration date will be documented on the affixed label on the medication.
 - vi. Expiration time when expiration occurs less than 24 hours.
- e. Verify all medication or solution labels both verbally and visually. Verification is done by two individuals qualified to participate in the procedure whenever the person preparing the medication or solution is not the person who will be administering it.
- f. Immediately discard any medication or solution found unlabeled.

4. Storage of Medications:

- a. All medications are kept in the designated secure medication room/area according to manufacturer's recommendations and locked when appropriate.
- b. Access is restricted to licensed authorized personnel only.
- c. Medications are not to be stored or handled in lab coats, pockets, or fanny packs as body temperature may affect the integrity of the medication.

5. Outdated, mislabeled, or otherwise unusable medications not available for patient use:

- a. Medications are outdated after its expiration date, which is set by the manufacturer.
- b. Medications may become unusable prior to its expiration date if it has been subjected to conditions that are inconsistent with the manufacturer's approved labeling.
- c. When a medication becomes outdated or unusable, the licensed professional shall immediately remove the medication from service. A designee will document the outdated medication on the medication expiration log sheet and discard the medication according to manufacturer's guidelines and in accordance with law and regulations.

SUPPORTING/REFERENCE DOCUMENTATION:

- State Operations Manual (SOM), Appendix A, Survey Protocol, Regulations and Interpretive Guidelines for Hospitals. A-405/ §482.23 (c) Standard: Preparation and Administration of Drugs.
- The Joint Commission 2019 Ambulatory Health Care National Patient Safety Goals.
https://www.jointcommission.org/assets/1/6/NPSG_Chapter_AHC_Jan2019.pdf

RELATED POLICIES, PROCEDURES, AND ASSOCIATED FORMS:

- HWCOP Administrative Policy: *Patient Identifiers* **200.02102A**
- HWCOP Administrative Policy: *Incident Reporting No.:* **200.03.100A**
- HWCOP Departmental Policy: *Verbal Orders* **200.02.102P**
- HWCOP Administrative Policy: *Hand Hygiene* **200.02.103P**