

 مؤسسة مستشفى سرطان الأطفال - مصر Children's Cancer Hospital Foundation - Egypt		Policy Name: <h2 style="text-align: center;">Safe Medication Prescribing</h2>	
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		Issue Date:	01.09.2015
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		No# of Pages:	05
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		Next Review Date	31.12.2025
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1.0 Change of policy

1.1 No changes

2.0 Purpose

- 2.1 These policy and procedure were established to provide the procedure to be followed for medication ordering at CCH.

3.0 Policy

3.1 Policy statement:

- 3.1.1 These policy and procedure of the hospital identify safe prescribing, ordering, and define the elements of a complete order or prescription.

3.2 Scope:

- 3.2.1 This policy applies on all medications' orders and all staff prescribing medications.

3.3 Responsibilities

- 3.3.1 Physician.
 3.3.2 Pharmacist.

4.0 Definitions /abbreviations:

- 4.1 **CCHE:** Children Cancer Hospital – 57357 Egypt
 4.2 **CPID:** Continuous Performance Improvement Department
 4.3 **MMU:** Medication Management & Use

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4.4 MMS: Medication Management & Safety

4.5 CPOE: Computerized Physician Order Entry

4.6 BSA: Body Surface Area

4.7 Tall Man Lettering: it is a typo technique that uses selected capitalization to help make look-alike, sound-alike medications' names pair easier to differentiate, which help physicians reduce the risk of medicine selection errors for medications with such names.

4.8 "Prescriber" or "Practitioner" is a physician or dentist authorized by the hospital and the health authority to prescribe or order medication.

5.0 Procedure:

5.1 General Guidelines:

- 5.1.1 It is the Policy of the CCHE that the Physician order is the reference working document (hard or electronic copy)
- 5.1.2 Medications in CCHE are ordered by the authorized physician (prescriber) via CPOE or a physician order.
- 5.1.3 All medical staff will adhere to the Hospital standards for prescribing medication.
- 5.1.4 All physicians, dentists are authorized to write medications' orders.
- 5.1.5 The Pharmaceutical services department shall process only those medications' orders signed by an authorized physician.
- 5.1.6 All physicians and dentists shall order medications in accordance with the hospital guidelines for complete medication orders.
- 5.1.7 Orders for "PRN" (as needed) should have a dosing interval and reason for administration.
- 5.1.8 Orders should be checked for allergy to the prescribed medication.
- 5.1.9 Orders should be checked for drug – drug interaction.
- 5.1.10 The dose of the prescribed medication should be appropriate to the patient weight / age.
- 5.1.11 Physician shall legibly sign all medication orders on a prescription order form/medication order.
- 5.1.12 Pharmacist shall dispense only those items ordered by a physician or authorized persons as determined by the signature.
- 5.1.13 Verbal ordering, if a physician has dictated orders by telephone (verbal order), it is his /her responsibility to sign this order on the patient's chart after reviewing it for the correct transcription of his/her order within 24 hours (According to verbal order policy).
- 5.1.14 All orders must be signed by the prescribing physician.
- 5.1.15 Include a space between a number and its unit of measurement.
- 5.1.16 Never place decimal and a zero after a whole number (2mg is correct and 2.0mg is incorrect).
- 5.1.17 Always place a zero before a naked decimal (0.5ml is correct and .5ml is incorrect).
- 5.1.18 Never abbreviate the word "unit".

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- 5.1.19 Avoid prohibited abbreviations.
- 5.1.20 Do not abbreviate drug names as they may be misinterpreted and cause error.
- 5.1.21 Medication orders that are incomplete, illegible, or unclear should be resolved with pharmacists and interventions need to be written & documented
- 5.1.22 Precautions for ordering medications with look-alike or sound-alike names when added on Cerner with Tall-man lettering.
- 5.1.23 The hospital establishes, implements, and trains the staff on a process for the safe prescribing, ordering, and transcribing of medications in the hospital
- 5.1.24 Pharmacist should dispense medication prescriptions for whom authorized to prescribe medications according to the following:
 - 5.1.24.1 Chemotherapeutic agents are prescribed by pediatric oncology only including (Consultant, Residents and Registrar).
 - 5.1.24.2 Tramadol (all dosage form) & Nalbuphine ampoules can be prescribed by all hospital doctors; other Narcotics should be prescribed only by anesthesia, palliative/hospice and pain management team.
 - 5.1.24.3 Narcotics at ICU floor stock is prescribed by ICU's physicians.
 - 5.1.24.4 Radioactive materials are prescribed by nuclear medicine physician
 - 5.1.24.5 ther medications can be prescribed by other physicians, dentists, nutritionists & physiotherapists, regarding to specialty.

5.2 Procedure to be Followed:

5.2.1 Medication orders must be included:

- 5.2.1.1 Patient's identification barcode.
- 5.2.1.2 Patient demographics:
 - 5.2.1.2.1 At least weight and Age should be documented on the physician order.
 - 5.2.1.2.2 Height and BSA should be documented for medications doses based on BSA (e.g., Antineoplastic, Acyclovir-etc.).
- 5.2.1.3 Date and time of order.
- 5.2.1.4 Medication per generic Name
- 5.2.1.5 Signature/ Stamp of physician (The prescriber(s) must sign the written or electronic order on the day it is issued).
- 5.2.1.6 Full diagnosis
- 5.2.1.7 If patient on chemotherapy protocol: Protocol Name /Detailed position in the protocol (e.g., D15 or W10) should be mentioned.
- 5.2.1.8 Generic Drug name
- 5.2.1.9 Dosage form

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- 5.2.1.10 Dose in units (e.g., 5mg)
- 5.2.1.11 Dosage (mg/kg or mg/m2)
- 5.2.1.12 Max dose
- 5.2.1.13 Diluent limitations & fluid restriction if present
- 5.2.1.14 Route of administration, directions for administration, Rates of administration.
- 5.2.1.15 Frequency of administration (administration times or time interval between doses)
- 5.2.1.16 Duration of therapy according to guidelines.
- 5.2.1.17 Any qualifying instructions of therapy (STAT, NOW, ASAP, PRN)
- 5.2.1.18 The use of "PRN" is qualified. "PRN" (as needed) orders should have a dosing interval and reason for administration.
- 5.2.1.19 Special instructions if present.
- 5.2.1.20 Start date and Stop date.

- 5.2.2 Pharmacy –prepared doses will be according to standard I.V. compatibility charts. Any required restrictions should be mentioned on the physician order.
- 5.2.3 The prescriber(s) must sign the written or electronic order on the day it is issued
- 5.2.4 All medication orders must use only approved abbreviations.
- 5.2.5 All medication orders are reviewed by a pharmacist prior to processing the orders and dispensing medications for patient use. Exceptions would include the need for emergency medication when the physician is present, in which case the medication may be removed from emergency stock. A pharmacist must review these orders as soon as possible, but no more than 24 hours after written regarding Verbal Order Policy.
- 5.2.6 Unclear/Incomplete orders will not be processed until clarified by rewriting.
- 5.2.7 The pharmacist will process medication orders per pharmacy policies and procedures and according to the type of order, see attachment No.1.
- 5.2.8 Process of cancelation or discontinuation of medication prescription refer to (**Verification & reviewing of prescription orders**)

6.0 References:

- 6.1 N/A

7.0 Appendices:

7.1 Related Forms:

- 7.1.1 Medication order in Cerner.

7.2 Related Policy(S):

- 7.2.1 Medication Management Program

7.3 Related Standards:

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7.3.1 JCI standards 7th edition – MMU Chapter. (MMU.4.2)

7.3.2 GAHAR Standards name. MMS. 11, 12 and 13

7.4 Attachments

7.4.1 Order types

7.4.2 Prohibited Abbreviations List

7.5 Attachment No 1:

Order types:

7.5.1 “STAT” order: Medication Available for administration within 45 minutes.

7.5.2 “NOW” order: Medication will be in the unit within 60 minutes of order being received by pharmacy, and administered within 10 minutes of arriving in the unit. If medication is available from the floor stock, medication administered within 10 minutes of prescription.

7.5.3 “ROUTINE” order: Medication will be on unit within 2 hours of order being received by pharmacy and administered according to next Standard Administration Time (Automatically scheduled on system), unless otherwise indicated on the order.

7.5.4 “PRN” order: As needed order; to start for a certain reason (condition) mentioned by the prescriber.