

Dispensing practices and recordkeeping must include antidiversion strategies. When medications are prepared by someone different from the person administering the medication (for example, when medications are prepared by the surgical nurse to be administered to a patient during a surgical procedure in the operating theatre by the surgeon), the risk of a medication error is increased. Thus, when a medication is removed from its original packaging or prepared and dispensed in a different form/container—and not immediately administered (for example, insulin, medications prepared for use during a surgical procedure in the operating theatre, intravenous continuous drip medication, total parental nutrition [TPN])—the medication must be labeled with the name of the medication, the dosage/concentration of the medication, the date of preparation, the date of expiration, and two patient identifiers. When medications are prepared for use during a surgical procedure in the operating theatre and unused portions are discarded immediately following the surgical procedure, the patient's name and expiration date may not be necessary.

### **Measurable Elements of MMU.05.03**

1. The hospital dispenses medications and maintains records in accordance with laws and regulations, licensure, and professional standards of practice.
2. Medications are dispensed in the most ready-to-administer form available.
3. The system supports accurate and timely dispensing and documentation of dispensing practices that meet patient needs.
4. ⑩ The hospital has a written policy for medication labeling practices that at minimum includes the following:
  - Information on medication labels
  - Medications not immediately administered
  - Preparing individualized medications for multiple patients (*See also* IPSG.01.00, ME 1)
  - When a patient medication(s) is prepared by someone other than the person administering the medication*(See also* IPSG.03.02, ME 1)
5. All medications prepared in the hospital are correctly labeled with the following:
  - Medication name, strength, and amount (if not apparent from the container)
  - Expiration date when not used within 24 hours
  - Expiration date and time when expiration occurs in less than 24 hours
  - The date prepared and the diluent for all compounded intravenous admixtures and parenteral nutrition formulas

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## **Administration**

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### **Standard MMU.06.00**

Medication administration is safely performed by qualified individuals.

#### **Intent of MMU.06.00**

Each hospital is responsible for identifying those individuals with the requisite knowledge and experience and who are also permitted by licensure, certification, laws, or regulations to administer medications. Administering a medication to treat a patient requires specific knowledge and experience. A hospital may place limits on medication administration by an individual, such as for controlled substances or radioactive and investigational medications. In emergency situations, the hospital identifies any additional individuals permitted to administer medications.

The medical record of each patient who receives medication contains a list of the medications prescribed or ordered for the patient and the dosage and times the medication was administered. Included are medications

administered “as needed.” If this information is recorded on a separate medication form, the form is inserted in the patient’s medical record at discharge or transfer.

The hospital defines the verification process to be used in administering medications. When the medication is prepared and dispensed on the patient care unit, the process of appropriateness review described in MMU.05.02 must also be carried out by a qualified individual.

In support of the patient’s engagement in all aspects of their medical care and treatment, patients are informed about the medication they are being given and provided with an opportunity to ask questions about the medications. Medications are administered to the patient on a timely basis and noted in the patient’s medical record.

### **Measurable Elements of MMU.06.00**

1. Only authorized clinical staff administer medications. The hospital defines those who are authorized to administer medication, with or without supervision, in accordance with laws and regulations. The hospital may place limits, when appropriate, on the medication administration of individuals.
2. The hospital implements a process for medication administration to verify that the medication is correctly administered in accordance with the medication prescription or order. (*See also* MMU.05.02, ME 2)
3. Prior to administration, the individual administering the medication must do the following:
  - Verify the identity of the patient.
  - Verify that the medication selected matches the medication order or prescription and product label, including time, frequency, dose, and route.
  - Visually inspect the medication for particulates, discoloration, or other loss of integrity.
  - Verify that the medication has not expired.
  - Verify that no known contraindications exist.
  - Verify that the medication is being administered at the proper time, in the prescribed dose, and by the correct route.
  - Discuss unresolved concerns about the medication with the patient’s physician or health care practitioner (if different from the physician or health care practitioner) and/or staff involved with the patient’s care, treatment, and services according to hospital policy.
4. Medications are administered as prescribed on a timely basis, and each dose is recorded in the patient’s medical record.
5. As appropriate, prior to administering a new medication, the patient or family is informed about any potential clinically significant adverse drug reactions or other concerns regarding administration of a new medication and have an opportunity to ask questions. This education is documented in the patient’s medical record.
6. Before administering a radioactive pharmaceutical for diagnostic purposes, staff verify that the dose to be administered is within 20% of the prescribed dose, or, if the dose is prescribed as a range, staff verify that the dose to be administered is within the prescribed range. (*See also* MMU.03.00, ME 3)

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### **Standard MMU.06.01**

Policies and procedures govern medications brought into the hospital by the patient or family, medication prescribed for patient self-administration, and medication samples.

#### **Intent of MMU.06.01**

Medications that are not dispensed from the hospital pharmacy, such as medications brought in by the patient or family or medication samples, require special processes for labeling, storage, and control of use. The hospital has a process for determining the identity, safety, and any other relative contraindications to use patient-supplied or sample medications. The hospital must be aware of current regional trends related to the prevalence