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)

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

of counterfeit medications and active recalls for medications and the associated active pharmaceutical ingredients.

Medications brought into the hospital by the patient or their family or prescribed within the hospital for self-administration are known to the patient's physician and noted in the patient's medical record.

The hospital implements a process for patient self-administration of medications, administration of medications by a family, and the management, use, and documentation of medication or medication samples.

Measurable Elements of MMU.06.01

1. Ⓓ The hospital defines, in writing, when medications brought into the hospital by patients or their families or brought into the hospital as samples can be administered.
2. Ⓓ If self-administration of medications is allowed, the hospital follows the written processes that guide the safe and accurate self-administration of medications or the administration of medications by a family member. The processes address training, supervision, and documentation.
3. The hospital educates patients and families involved in self-administration and documents in the patient's medical record about the following:
   - Medication name, type, and reason for use
   - How to administer the medication, including process, time, frequency, route, and dose
   - Anticipated actions and potential side effects of the medication administered
   - Monitoring the effects of the medication
   - Proper storage of the medication
4. The hospital determines that the patient or the family member who administers the medication is competent at medication administration before allowing them to administer medications.

Monitoring

Standard MMU.07.00

The hospital monitors and responds to actual or potential adverse drug events and adverse drug reactions.

Intent of MMU.07.00

The purposes of monitoring are to evaluate the medication's effect on the patient's symptoms or illness, as well as blood count, renal function, liver function, and other medication-related physical and biological effects with medications; to evaluate the patient for adverse effects; and to respond to the noted effects accordingly. Definitions of *adverse drug events* and *adverse drug reactions* are referenced in the JCI policy for sentinel events and as follows:

> *Adverse drug event:* an injury resulting from a medical intervention related to a medication, including harm from an adverse drug reaction or a medication error.
>
> *Adverse drug reaction:* a response to a medicinal product that is noxious and unintended and that occurs at doses normally used in humans for the prophylaxis, diagnosis, or treatment of disease or for the restoration, correction, or modification of physiological or psychological function.

Patients, their physicians, nurses, and other health care practitioners work together to monitor patients on medications. Based on monitoring, the dosage or type of medication can be adjusted when needed. It is appropriate to closely monitor the patient's response to the first dose(s) of a medication new to the patient. Such monitoring is intended to identify the anticipated therapeutic response as well as allergic responses, unanticipated drug-drug interactions, or a change in the patient's equilibrium raising the risk of falls, among others.