

Crosstown Clinic: Using Ward Stock Injectable Opioid Agonist Treatment (iOAT)

Site Applicability

Crosstown Clinic

Practice Level

Basic: RN/RPN/LPN

Need to Know

- The provision nurse provides Diacetylmorphine and HYDROMorphine syringes to clients with an active prescription, for self-administration. In situations where a client arrives at the clinic for injectable opioid agonist therapy (iOAT) and they do not have a patient-specific syringe prepared by pharmacy, a ward stock syringe (Diacetylmorphine or HYDROMorphine) must be prepared and administered.
- If a client's iOAT syringe is damaged and/or contaminated and there is no client-specific dose available, a replacement ward stock syringe must be prepared. The provision nurse is required to prepare, pre-waste and store the ward stock syringes according to the procedure outlined below and the [Medication Pre-Waste Protocol](#).
- Ward stock syringes must remain in the secured medication fridge at all times. Nurses are responsible for documenting all transactions of narcotic and controlled substances on the narcotic record and the Opiate Assisted Therapy (OAT) database which includes verification of the Clinic Drug Inventory counts and pharmacy packing slips. All syringes that arrive at the clinic need to be checked against the Clinic Drug Inventory Count Record by two nurses and both nurses need to sign that what they've put into the medication fridge matches the report. Any discrepancies need to be immediately brought up with Crosstown Clinic Coordinator and Pharmacy.

Procedures

Client (with an active prescription) arrives in the clinic after 96 hours and meets pre-assessment criteria:

A client-specific syringe is available:

1. Confirm that there is an active prescriber's order.
2. Use client-specific syringe and follow the client's [Missed Days Protocol](#) orders.

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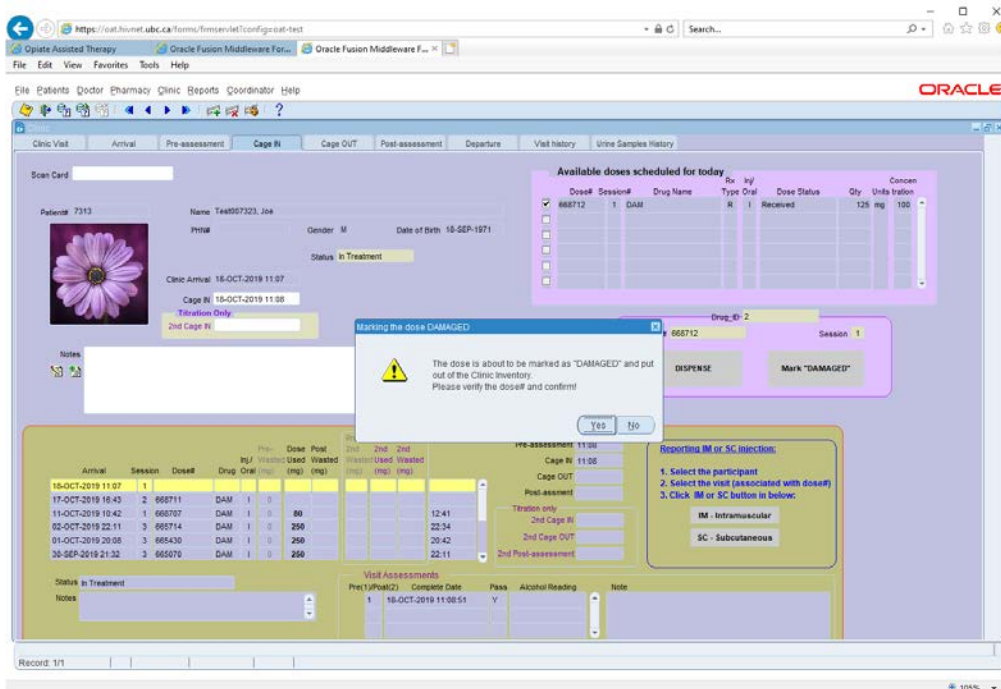
A client specific syringe is NOT available:

1. Confirm that there is an active prescriber's order.
2. The client's prescription will appear in the OAT database along with a selection of ward stock doses.
3. If client is on missed days, confirm that client has a prescriber's order that specifies to follow the missed days protocol. Refer to the client's [Missed Days Protocol](#) orders or prescriber's orders to determine the client's dose.
4. Select a syringe that has the same or more than the intended dose and check the expiry date to ensure still safe to use. Pre-waste the extra amount with a witness noting same on the narcotic record as per the [medication pre-waste protocol](#).
5. If there are no syringes that are the same or more than the intended dose, select two (2) syringes with doses that will add up to the intended dose or greater. Check the expiry date on both syringes to ensure still safe to use.
6. After the syringes are chosen and deemed safe to use, scan the first syringe into the OAT database.
7. When scanning the second syringe into the OAT database, enter the pre-waste amount of the syringe that needs to be pre-wasted into the box labelled, "*Amount Wasted before Dispensing (mL)*" in OAT database. The amount of both syringes should add up to the intended dose. Ensure same pre-wasted amount is witnessed and documented on the narcotic record.
8. Perform medication checks as per BC College of Nurses and Midwives (BCCNM) and Providence Health Care (PHC) standards.
9. Connect one of the ward stock syringes to the port of the fluid dispensing connector and connect an empty syringe to the second port of the connector.
10. Ensure that the empty syringe can hold the full volume of the intended dose.
11. Transfer the contents of the ward stock syringe into the empty syringe.
12. Remove the ward stock syringe and connect the pre-wasted second ward stock syringe to the port to transfer the remaining contents.
13. Perform medication checks (including an independent double check) as per BC College of Nurses and Midwives (BCCNM) and Providence Health Care (PHC) standards and ensure that the correct dose is in the syringe.
14. Provide syringe to the client for self-administration.
15. If client cannot self-administer medication, nursing to provide intramuscular injection, and document on Electronic Medical Record (EMR).

Damaged syringe requiring replacement:

1. Mark the syringe as damaged by striking through barcode and writing damaged on syringe. When the client enters the injection room select "Damaged" box on the OAT database Cage-in screen to access other session syringe or ward stock. ***This syringe must not be used and needs to be returned to pharmacy, along with any unused syringes.***

- a. At the end of the shift, this syringe will be scanned into OAT and included in the inventory list printout. This syringe, along with all other unused syringes, will be locked in the medication fridge overnight.
- b. In the morning, these syringes will be scanned by nursing to create a pharmacy packing slip for transfer back to pharmacy. This process will be done by two nurses who will sign the pharmacy packing slip. A pharmacy staff member will pick up the syringes and packing slip at which time a pharmacy staff member and a Crosstown nurse will both sign the pharmacy packing slip that what is documented has been returned to pharmacy.
- c. Any discrepancies will need to be investigated and a narcotic incident report completed for unresolved discrepancies.



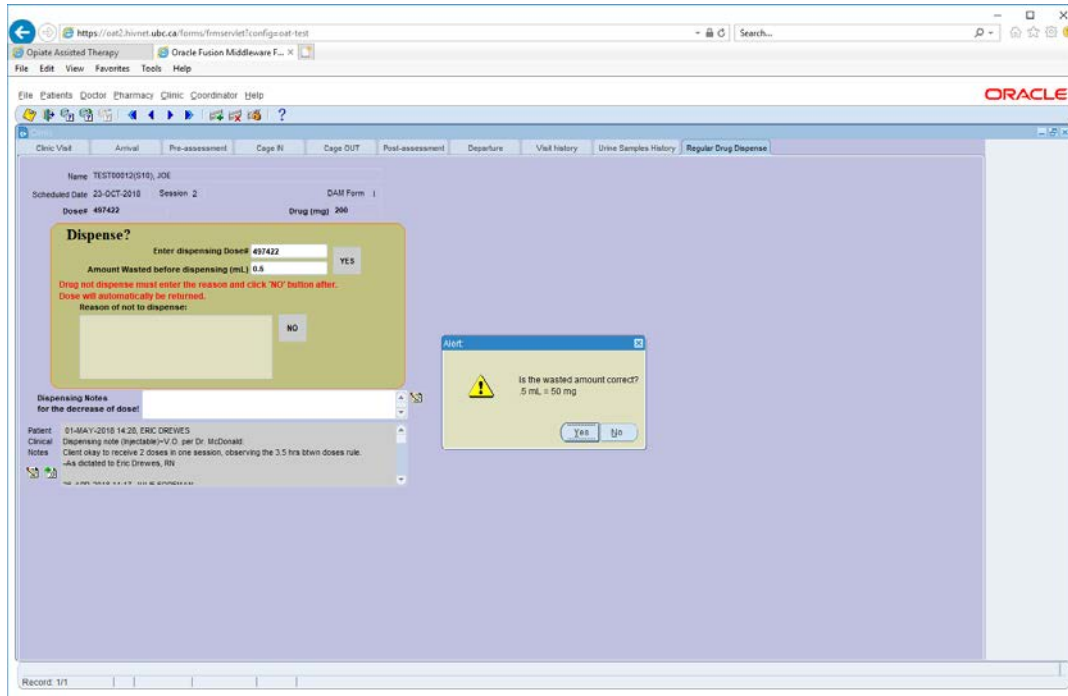
The screenshot shows the Oracle Fusion Middleware OAT interface. The main window displays a patient's profile with fields for Name, Gender, Date of Birth, and Status. A table of 'Available doses scheduled for today' is visible, showing doses for 10/10/2019. A pop-up window titled 'Marking the dose DAMAGED' is displayed, asking for confirmation to mark a dose as damaged. The window contains a warning icon and text: 'The dose is about to be marked as "DAMAGED" and put out of the Clinic Inventory. Please verify the dose# and confirm!'. Below the pop-up, there are buttons for 'Yes' and 'No'. The main window also includes a table of 'Visit Assessments' with columns for Date, Time, and Status.

2. Select the next available syringe to provide to the client:
 - a. If there are remaining client-specific doses that are ordered, those must be used before ward stock syringes can be accessed, as long as doses are 3 hours apart (as per pre-printed orders (PPO). Syringe used will show in OAT database with time stamp, i.e. S2 syringe used in S1.
 - b. If there are no more client-specific doses, the Cage-in screen will display the client's prescription along with a selection of ward stock doses to choose from.
3. If client is on missed days, confirm that client has a prescriber's order that specifies to follow the missed days protocol. Refer to the client's Missed Days Protocol orders or prescriber's orders to determine the client's dose.
4. Select a syringe that has the same or more than the intended dose and check the expiry date to ensure still safe to use. Pre-waste the extra amount with a witness noting same on the narcotic

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record as per the [Medication Pre-Waste Protocol](#).

5. After the dose is chosen, enter the pre-waste amount into the box labelled, "*Amount Wasted before Dispensing (mL)*" in OAT database. Ensure same pre-wasted amount is witnessed and documented on the narcotic record.



6. Perform medication checks as per BCCNM and PHC standards.
7. Provide syringe to the client for self-administration.
8. If client cannot self-administer medication, nursing to provide intramuscular injection, and document on EMR.

Contaminated/incorrectly pre-wasted syringe requiring replacement:

1. After the syringe has been scanned, go to the "OAT Adjustment screen" under the "Clinic tab"
2. Search for the corresponding Client# and Dose# and change the status to "Destroyed" from the pulldown menu and save the transaction.
3. Go back to the Cage-in screen under OAT and select another client-specific dose for the session.
4. If there are no more client-specific doses, OAT database will display the client's prescription along with a selection of ward stock doses to choose from under the Cage-In screen.
5. If client is on missed days, confirm that client has a prescriber's order that specifies to follow the missed days protocol. Refer to the client's Missed Days Protocol orders or prescriber's orders to determine the client's dose.
6. Select a syringe that has the same or more than the intended dose and check the expiry date to ensure safe to use. Pre-waste the extra amount with a witness noting same on the narcotic record

as per [Medication Pre-Waste Protocol](#).

7. After the dose is chosen, enter the pre-waste amount into the box labelled, "*Amount Wasted before Dispensing (mL)*" in OAT database. Ensure same pre-wasted amount is witnessed and documented on the narcotic record.
8. Perform medication checks as per BCCNM and PHC standards
9. Provide syringe to the client for self-administration.
10. If client cannot self-administer medication, nursing to provide intramuscular injection, and document on EMR.

Storage

- Crosstown nurses are responsible for monitoring medication fridge temperatures and/or responding to temperature alarms or power failures as per the [Medication Fridge Downtime Standard Operating Procedure](#).
- The ward stock syringes must remain in the secured medication fridge at all times, to ensure medication stability:
 - Fridge temperature must remain between 2°C and 8°C
 - Document the temperature twice a day on the *daily temperature log* when the fridge contains syringes
 - Retain the *daily temperature log* for 3 years, which will be filed in cabinet next to the fridge.

Documentation

- Task prescriber group in the Electronic Medical Record (EMR) to re-start client's syringe production any time a client receives a dose after 96 hours or if a ward stock syringe is used (ward stock or client specific dose).
- Use of ward stock syringe must be documented in EMR and in the OAT database

Related Documents

[B-00-13-10210](#) - Crosstown Clinic: Client Flow and Assessments

[B-00-16-10033](#) - Crosstown Clinic: Medication Fridge Downtime

[B-00-13-10203](#) - Crosstown Clinic: Medication Pre-Waste Protocol

[B-00-12-10121](#) - Narcotics and Controlled Substances: Counting and Auditing

Missed Days Pre-Printed Order: Form No. PHC-PH778 for Hydromorphone ([Appendix A](#))

Missed Days Pre-printed order: Form No. PHC-PH780 for DAM ([Appendix B](#))

Persons/Groups Consulted:


Nursing, Crosstown Clinic
 Practice Consultant – Scope of Practice
 Practice Consultant – Medication Management and Safety
 Patient Care Manager- Crosstown
 Nurse Educator- Professional Practice

Developed By:

Clinic Coordinator, Crosstown Clinic
 Nurse Educator, Urban Health Program

Initial Effective Date:	04-MAR-2021
Posted Date:	04-MAR-2021
Last Revised:	
Last Reviewed:	
Approved By:	PHC
	Professional Practice Standards Committee
Owners:	PHC
	Crosstown Clinic

Appendix A


IF YOU RECEIVED THIS FAX IN ERROR, PLEASE CALL 604-806-8886 IMMEDIATELY	
 PRESCRIBER'S ORDERS	
NO DRUG WILL BE DISPENSED OR ADMINISTERED WITHOUT A COMPLETED <u>CAUTION SHEET</u> ALLERGY/INTOLERANCE STATUS FORM (PHC-PH047)	
DATE AND TIME	<div style="text-align: center;"> CROSTOWN CLINIC: MISSED DAYS PROTOCOL FOR POST-INITIATION DOSE OF HIGH DOSE HYDROMORPHONE <small>(Items with check boxes must be selected to be ordered)</small> </div> <div style="text-align: right; font-size: small;">Page 1 of 2</div> <div style="border: 1px solid black; padding: 5px; margin: 10px auto; width: 80%; text-align: center;"> These orders are for use ONLY at Crosstown Clinic. </div> <p>These orders are applicable to patients who have completed the initial HYDROMorphone titration</p> <p>If a patient is absent less than or equal to 96 hours, continue with prescribed dose</p> <p>If a patient is absent for more than 10 days, notify prescriber of patient's absence and inquire about continuation of prescription</p> <p>If the patient is absent for more than 96 hours</p> <ul style="list-style-type: none"> Assess for signs and symptoms of opioid withdrawal Rapid urine drug testing PRN Breathalyzer PRN Check PharmaNet Nursing assess reason for absence (hospital, jail, detox or other) If in hospital, request MARs from last 3 days of admission If in jail or detox, call for medication details If patient has been receiving treatment in hospital, jail, or detox then call prescriber for order <p>Follow Missed Days Protocol on page 2 for 3 sessions until patient titrated back to prescribed dose of HYDROMorphone</p>
	<div style="display: flex; justify-content: space-between; font-size: small;"> Printed Name _____ Signature _____ College ID _____ Contact Number _____ </div>

Form No. PHC-PH778 (Oct 9-18)

ALL NEW ORDERS MUST BE FLAGGED
FAX COMPLETED ORDERS TO PHARMACY PLACE ORIGINAL IN PATIENT'S CHART

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Appendix B

IF YOU RECEIVED THIS FAX IN ERROR, PLEASE CALL 604-806-8886 IMMEDIATELY	
 PREScriBER'S ORDERs	
NO DRUG WILL BE DISPENSED OR ADMINISTERED WITHOUT A COMPLETED <u>CAUTION SHEET</u> ALLERGY/INTOLERANCE STATUS FORM (PHC-PH047)	
DATE AND TIME	<div style="text-align: center;"> CROSSTOWN CLINIC: MISSED DAYS ORDERs FOR POST-INITIATION DOSE OF DIACETYLMORPHINE <small>(Items with check boxes must be selected to be ordered)</small> </div> <div style="text-align: right; font-size: small;">Page 1 of 2</div> <div style="text-align: center; border: 1px solid black; padding: 5px; margin: 10px auto; width: 80%;"> These orders are for use ONLY at Crosstown Clinic. </div> <p style="text-align: center;">These orders are applicable to patients who have completed the initial diacetylmorphine titration</p> <p style="text-align: center;">If a patient is absent less than or equal to 96 hours, continue with prescribed dose</p> <p style="text-align: center;">If a patient is absent for more than 10 days, notify prescriber of patient's absence and inquire about continuation of prescription</p> <p style="text-align: center;">If the patient is absent for more than 96 hours:</p> <ul style="list-style-type: none"> Assess for signs and symptoms of opioid withdrawal Rapid urine drug testing PRN Breathalyzer PRN Check Pharmacolnet Nursing assess reason for absence (hospital, jail, detox or other) If in hospital, request MARs from last 3 days of admission If in jail or detox, call for medication details If patient has been receiving treatment in hospital, jail, or detox then call prescriber for order <p style="text-align: center;">Follow Missed Days Protocol on page 2 for 3 sessions until patient titrated back to prescribed dose of diacetylmorphine</p>
_____ <small>Printed Name</small>	_____ <small>Signature</small>
_____ <small>College ID</small>	_____ <small>Contact Number</small>

Form No. PHC-PH780 (Oct 9-18)

ALL NEW ORDERs MUST BE FLAGGED

FAX COMPLETED ORDERs TO PHARMACY PLACE ORIGINAL IN PATIENT'S CHART

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