



Provincial Health Services Authority

THERAPEUTIC AUTOMATIC SUBSTITUTION POLICY III-210

Summary of Changes

	NEW	Previous
BC Cancer	New policy	

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1. Introduction

1.1. Purpose

Therapeutic interchange of some medications is necessary to maintain safe and efficient hospital formulary and inventory control, particularly in response to medication shortages. The purpose of this policy is to provide a foundation for safe, consistent and efficient communication of therapeutic interchanges in order to comply with Accreditation Canada Medication Management Standards.

1.2. Scope

This policy applies to BC Cancer physicians, pharmacists and nurses involved in the delivery of systemic therapy at BC Cancer Regional Cancer Centres.

2. Policy

In order to comply with Accreditation Canada Medication Management Standards for safe, consistent and efficient communication of therapeutic interchanges:

- Therapeutic alternatives will be assessed for medications that can be automatically substituted.
- Pre-printed orders allowing automatic substitutions will be developed for medications deemed to therapeutically interchangeable

3. Responsibilities and Compliance

3.1. Responsibilities

Leaders of the Provincial Systemic Therapy Program, Pharmacy Provincial Professional Practice Council and Nursing Provincial Professional Practice Committee are responsible to identify, initiate the development of and approve therapeutic interchange of medications and corresponding pre-printed orders (PPOs) of automatic substitution.

Leaders of the Provincial Systemic Therapy Program, Pharmacy Professional Practice Council and Nursing Professional Practice Committee identify the need to develop therapeutic interchange of medications.

Provincial Pharmacy, in collaboration with Tumour Groups and other groups as appropriate, develop briefing notes on therapeutic interchange of medications.

Leaders of the Provincial Systemic Therapy Program, Pharmacy Professional Practice Council and Nursing Professional Practice Committee approve the therapeutic interchange of medications and identify any need for automatic substitution PPOs.

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Provincial Pharmacy, in collaboration with Tumour Groups and other groups as appropriate, develop automatic substitution PPOs of medications.

An order for a medication approved for therapeutic interchange will be automatically substituted by the Pharmacist by filling in the relevant automatic substitution PPO.

For patient specific medications dispensed from the pharmacy, the Pharmacist will fill the appropriate substituted medication.

For wardstock items, the Nurse will select the appropriate substituted medication based on the completed automatic substitution PPO. The Nurse will modify the MAR and administer the appropriate medication to the patient.

3.2. Compliance

All physicians, pharmacists and nurses involved in the delivery of systemic therapy are responsible to understand and comply with the provision of this policy.

4. References

Health Standards Organization. Accreditation. HSO 3001:2019 (E) Medication Management. Ver. 14. June 2019. Ottawa, Ontario, Canada.

5. Appendices

[Appendix 1: Approved automatic substitution](#)

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Appendix 1: Approved automatic substitution

Written Order	Approved substitutions
ranitidine 50 mg IV 30 minutes prior to PACLitaxel	cimetidine 400 mg PO, 45 to 90 minutes prior to PACLitaxel OR famotidine 20 mg IV 30 minutes prior to PACLitaxel OR famotidine 20 mg PO 30 to 60 minutes prior to PACLitaxel
famotidine 20 mg IV 30 minutes prior to PACLitaxel	famotidine 40 mg PO 30 to 60 minutes prior to PACLitaxel OR ranitidine 300 mg PO 45 minutes prior to PACLitaxel (if patient arrives for chemo appointment and has not taken ranitidine PO) OR cimetidine 400 mg PO 45 to 90 minutes prior to PACLitaxel

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