

Automated Dispensing Cabinets (ADC): Omnicell®

Site Applicability

Acute care units at St. Paul's Hospital (SPH), Mount Saint Joseph Hospital (MSJ), Holy Family Hospital (HFH), and Tertiary Mental Health - Alder, Parkview units

Skill Level:

- Registered Nurse (RN)
- Registered Psychiatric Nurse (RPN)
- Licensed Practical Nurse (LPN)
- RN provisional (including agency nurses)
- RN in a postgraduate specialty program
- Employed Student Nurse/Undergraduate Student Nurse
- Respiratory Therapists
- Physician (Anesthesiology, Emergency, Radiology)
- Nuclear Medicine Technologist
- Radiology Technologist who have completed the ADC (Omnicell) education and training

*See [Users and Levels of Access](#) for each role's access type

Quick Links

Quick Links – General	Quick Links - How To
<ul style="list-style-type: none"> • ADC User Responsibilities • ADC Responsibilities of Patient Care Managers (PCM) / Delegate • Authorized Access Policy and Procedure • Troubleshooting and Downtime Procedures • Maintenance and Cleaning Recommendations • Appendix A: Fingerprint Enrollment QUICK reference • Appendix B: Removing and Returning a Code 	<ul style="list-style-type: none"> • Adding a Temporary Nurse • Adding a New Patient • Accessing Medication through the ADC (Omnicell®) • Accessing Narcotic and Controlled Medications through the ADC (Omnicell®) • Removing a Virtual Kit • Narcotic & Controlled Medications - Guided Cycle Counts • Resolution of Narcotic Discrepancies

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<ul style="list-style-type: none"> Blue Kit and Expired Kit Medications (SPH: ICU, CICU; MSJ: HAU ONLY) • Appendix C: Priming/removing Subcutaneous Butterfly Volume • Appendix D: Sample Narcotic and Controlled Drug Incident Report • Appendix E: Sample Omnicell Cleaning Log 	<ul style="list-style-type: none"> • Documentation of Narcotic and Controlled Medication Wastage • Ordering, receiving and returning Narcotic and Controlled Medications • Restocking the Fridge • ADC Contact
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Need To Know:

- The Automated Dispensing Cabinet (ADC aka Omnicell®) dispenses medications, including wardstock medications, some patient specific medications such as refrigerated IVs, and narcotics and controlled medications.
- In clinical areas where ADCs are designated as '**Profiled**', medications are to be retrieved under the patient's Active Medication Orders tab in the Local list. Exception: Patient specific medication stored in the fridge are to be retrieved under the Stocked Medication tab.
- In clinical areas where ADCs are designated as '**Non-Profiled**' (e.g. Emergency Department, PACU, OR), all medications will be removed under the Stocked Medication screen as orders will not be reviewed and entered into a patient profile within the ADC by a pharmacist.
- At MSJ, the on-site pharmacy is open 0700-1900h on weekdays and 1000-1800h on weekends. Therefore, there is a dedicated ADC – referred to as the "night cabinet" which is solely for dispensing medication when MSJ pharmacy is closed.
- There are generic patients that are programmed into ADCs, some local, and some global, that have been approved for specific uses. For example, in the trauma room when a patient is not yet registered, or for a suspected opioid overdose for a visitor. In areas where these generic patients are available, there is education to their appropriate use. These generic patients are not to be used to remove medications for registered patients.
- **Pharmacist Verification Required (PVR) Medication (During Pharmacy hours):** These medications are available only after the order has been verified by a pharmacist. Medications designated as PVR are not usually required STAT. If an order requires expediting, complete a 'Medication Request' in Cerner or contact pharmacy as there may be a reason why the order has not yet been processed.
- **PVR (After Pharmacy hours):** The medication override function must be used. If the override function is used (e.g. a pharmacist has not yet verified the order), the nurse must take the appropriate steps to ensure pharmaceutical and therapeutic suitability (e.g. indication, dosage, route, allergies, medication interactions, therapeutic duplications, contraindications). Some medications are 24 hour PVR and no override function is available.
- User activity in the ADC is tracked, and reports for some transactions, including use of generic and fictive patients, are generated and shared with unit leadership for review for appropriate use.
- The system will automatically delete user access with inactivity of 6 months or longer. An [Omnicell](#)

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[User ID Request Form](#) will be required to be completed and approved by the unit Patient Care Manager, Clinical Nurse Leader, or Nurse Educator, and sent to pharmacy.

- ADCs are used to store medications only. Keys, equipment, supplies, and non-medications (e.g. throat lozenges) will not be stored in an ADC.
- For issues concerning ADC, please contact your local pharmacy personnel:
 - For SPH and MSJ: Call the ADC Omnicell Technician at 604.806.2344 local 69082 (or local 62173 if no reply).
 - For HFH Rehab and TMH units at Parkview and Alder: Call the HFH Pharmacy Dispensary at 604.322.2640 local 22640.

ADC User Responsibilities

ADC Users:

- Access medication only for the use of patients under their care
- Remove medication under the name of the patient who will receive the medication
- Only remove medication which they will administer

Exceptions:

- Nurses may remove medication for patients in procedural areas for physician administration
- Nurses and instructors may remove narcotics and controlled substances for undergraduate student nurses and employed student nurses
- In an emergency e.g. the removal of the code blue kit
- Remove medication for one patient at a time
- Remove only the required amount of medication for each administration time
- Verify correct amount of narcotic and controlled medications by manual count prior to removal
- Seek out an authorized User to visually witness any wastage of narcotics or controlled medications
- Return all unused, whole narcotic and controlled medication in original packaging to the ADC External Return Bin. All other clean and unused medications in their original packaging can be returned to the Pharmacy Return Bin. **Exception:** medications taken into an isolation area
- **Resolve all discrepancies and reconcile partial doses as they occur and before the end of shift**
 - If a discrepancy cannot be resolved, seek assistance from a Clinical Nurse Leader (CNL), Nurse Educator (NE) or Charge Nurse. If unable to resolve, contact your local [ADC Contact](#) and complete a Narcotic and Controlled Drug Incident Report.

- If unable to reconcile unexplained loss, indicate this as the resolution reason on the cabinet, seek help from unit leadership, and complete a Narcotic and Controlled Drug Incident Report.
- The Narcotic and Controlled Drug Incident Report must be completed and returned to pharmacy via pneumatic tube, inter-office mail, or faxed within **24 hours**.
- If a dose cannot be reconciled prior to end of shift, inform the CNL/Charge Nurse.
- Ensure all medications are stored securely
- Always press 'Exit' button after tasks are completed and prior to leaving the ADC
- Perform weekly cycle counts as directed
- All users will maintain the security of their ADC username and password and will not reveal it to others.

ADC Responsibilities of Patient Care Manager (PCM) / Delegate

- Ensure cycle counts are done by two authorized users with unrestricted access. A schedule for cycle counts needs to be implemented and monitored in each clinical practice area. Cycle counts must be done at minimum once per week.
- Adheres to the [Drug Diversion of Controlled Substances Policy](#), [Drug Diversion of Controlled Substances Protocol](#) and Liaises with Pharmacy and Nursing Professional Practice on diversion audits as appropriate.

Authorized Access Policy

ADC access will be granted to those staff who:

- Have medication administration within the employee's professional scope of practice.
- Have medication administration as a delegated function from a named physician to the named employee and the employee has a current certificate of competency as applicable for their discipline.
- Have completed the ADC Education and Training.

Users and Levels of Access

Role	Access Type
<ul style="list-style-type: none"> RN, RPN, LPN, Nursing Instructor, Physician RN in a Postgraduate Specialty Program (e.g. RN as a student in a critical care program) 	Full
<ul style="list-style-type: none"> Employed Student Nurse, Undergraduate Nursing Student Employed LPN providing care as a continuing student (i.e. RN program) 	Limited -No access to narcotic and controlled medications; access limited to ward stock Limited -Clinician must self-regulate to the scope of undergraduate nursing student access
<ul style="list-style-type: none"> Respiratory Therapist 	Limited -No access to narcotic and controlled medications; access limited to a subset of ward stock per their scope of practice
<ul style="list-style-type: none"> Nuclear Medicine Technologist, Radiologist Technologist 	Limited -No access to narcotic and controlled medications; access limited to a subset of ward stock approved for Delegated Medical Act (DMA); self-regulated access to those medications for which they hold current certification.

Procedure

Obtaining Access to the ADC

- An [Automated Dispensing Cabinet \(Omniceil®\) User I.D. Request Form](#) must be completed and sent to pharmacy in order to gain access to ADCs
- Authorization from the user's supervisor i.e. PCM, CNL, or NE is required
- NE/CNL or delegate (i.e. super user) will enroll the user's fingerprints for biometric access. See [Appendix A](#) 'Fingerprint enrollment: Quick Reference' once the ID request has been processed
- At initial sign-in, ADC display will prompt user to enter password. User passwords expire after 90 days

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Adding a Temporary Nurse

- The Temporary Nurse Function may be used to provide temporary access for staff who have completed ADC education and training, e.g. casual staff, staff returning from a leave or vacation
- An attempt should be made to contact pharmacy to reset a password before providing temporary access
- This temporary access will be limited to 1 day. The Temporary Nurse Function allows for full access to the cabinet, including narcotic and controlled medications
- This function can **never** be granted to students

Steps	Notes
1. Log on to the cabinet using your ID and password or your fingerprint	Temp Nurse accounts should only be created for staff nurses that are experiencing difficulties with login and cannot reach pharmacy for assistance. Always check if pharmacy is available to assist prior to granting temporary access.
2. Select Main Menu	
3. Select User Menus	
4. Select Add Temp Nurse	Only add nurses. Never create temporary accounts for students or other health care providers (i.e. RT, physician).
5. Enter user's first and last name and select the Temp Nurse user type (this user type allows access to narcotics)	*Note: the Temp LPN selection should not be used as it does not reflect scope of LPN and restricts access to narcotic medications.
6. User can adjust days until expiration. Default is 4 days.	The Temp Nurse account is linked to its creator.
7. Select Add Temp Nurse to complete this transaction and a receipt with the temporary ID will print out.	When the temp user logs in they will receive a prompt to create a password.

Adding a New Patient

Steps	Notes
1. Log on to the ADC using your ID and password or fingerprint. Search for your patient under the local and global lists .	Local List- list of patients in your specific care area Global List- list of all patients in the hospital or facility

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2. If you do not see your patient select Add New Patient .	A patient should only be added if they do not appear under the local and global lists
3. Enter patient's first and last name, MRN and Patient ID (if known) <ul style="list-style-type: none"> If Patient ID (Visit number) is unknown, user can enter a single digit to complete the required field If patient's name is unknown, enter "Unknown" for last name and "Patient" for first name 	Patient ID- refers to their 13-digit encounter number. New patient profiles are reconciled manually each morning with official profiles through pharmacy. Providing more details about the patient helps to ensure accurate reconciliation.
4. Select Add New Patient . You will now see the Patient Care screen for the new patient. The profile will now be searchable on the Local and Global list .	

Accessing Medication through the ADC (Omniceil®)

Steps	Notes
1. Access the patient's medication administration record (MAR)	The MAR is the only source of truth for medication orders and medication documentation. The MAR must be reviewed when removing medications from the ADC.
2. Log into ADC using your user ID and password or fingerprint and select patient name from the Local or Global Lists Enter the first few letters of the patient's surname to locate the correct patient	<ul style="list-style-type: none"> Patient must be admitted onto the unit in order for their name to appear on the ADC If a patient is not on the Local List, check the Global List. If not found, add the patient into the system with Add New Patient. Verify MRN or Patient ID (13-digit encounter number)
3. Select Remove Meds to access medications. Select desired medications from Active Med Orders List and specify dose to be removed. Review and select Remove Now . *If it is a new order that has not been verified, remove the medication from the stocked med list. For patient specific fridge meds go to Stocked Meds . Select the first option at the top of the list Pt-Specific Medication Fridge-1EA .	<ul style="list-style-type: none"> Active Med Orders - list of orders entered by pharmacy that are stocked in the ADC. Note this is not a full profile of all the medications for the patient. Inactive Med Orders - list of orders discontinued and/or with future start date Stocked Med List - meds stocked in the ADC (i.e. ward stock and narcotics and controlled medications)

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<p>4. To remove medication(s), follow the flashing light(s). Open illuminated drawer and withdraw from the light bin. Only remove the amount of medication specified.</p> <p>If a medication is no longer needed select Skip Item to cancel the transaction.</p> <p>Parenteral and bulk oral liquid medications must be scanned for a label with a barcode to print from the ADC.</p>	<ul style="list-style-type: none"> • Skip Item- generates 'null transaction', a transaction that began but did not finish. Null transactions are tracked by Pharmacy. • A barcode is needed for scanning during closed loop medication administration.
<p>5. After removing a medication, close the bin and drawer. If removing multiple medications, the next cabinet drawer will light up. Continue removing medications until all transactions are complete.</p>	<ul style="list-style-type: none"> • Unauthorized access of bins is tracked by pharmacy
<p>6. Once all medications have been removed, select EXIT to log out.</p>	<ul style="list-style-type: none"> • User MUST press EXIT to avoid unauthorized use of personal account

Removing a Virtual Kit

A virtual kit is not an actual physical kit, but a selection of medications that, when selected on screen will become available for removal from the cabinet at one time. Kits are associated with certain common procedures or emergencies.

Steps	Notes
1. Log into ADC (Omnicell®) using your User ID and Password or Fingerprint.	
2. Select patient from Local or Global List or if kit is to be used for multi-patient or to restock a cart, select multi-patient from the list.	
3. Select Remove Kits	
4. Select name of Kit to be removed from list then Remove Now	Actual kits will vary by area/cabinet
5. Follow the guiding lights to locate and remove the required medications	Add or subtract the required amount of medication required by adjusting the "+" or "-"
6. Close drawers/doors when done and touch EXIT to log out	Users MUST EXIT to avoid unauthorized use of personal account

Accessing Narcotic and Controlled Medications through the ADC (Omniceil®)

Narcotic and controlled medications require count verification prior to any removal from the ADC. If the actual count is not the same as the amount indicated by the ADC, the user is required to correct the count and proceed with removal for administration. A discrepancy receipt is printed at the dispensing cabinet and the user must resolve the discrepancy. Once the discrepancy is resolved, the discrepancy receipt must be placed in the confidential shredding bin.

Note: A correction of the count does NOT resolve the discrepancy. (see [Resolution of Narcotic Discrepancies](#))

Steps	Notes
1. Log into ADC using your user ID and password or fingerprint and select patient name from the Local or Global Lists Enter the first few letters of the patient's surname to locate the correct patient	<ul style="list-style-type: none"> Patient must be admitted onto the unit in order for their name to appear on the ADC If a patient is not on the Local List, check the Global List. If not found, add the patient into the system with Add New Patient. Verify MRN or Patient ID (13-digit encounter number)
2. Select Remove Meds to access medications. Select desired medications from Active Med Orders List and specify dose to be removed. Review and select Remove Now . *If it is a new order that has not been verified, remove the medication from the stocked med list.	<ul style="list-style-type: none"> Active Med Orders - list of orders entered by pharmacy that are stocked in the ADC. Note this is not a full profile of all the medications for the patient. Stocked Med List - meds stocked in the ADC (i.e. ward stock and narcotics and controlled medications)
3. Acknowledge and address any alerts (e.g. High Alert Medication, Independent Double Check)	
4. To remove medication(s), follow the flashing light(s). Open illuminated drawer <u>or</u> ADC fridge.	
5. Verify count prior to removing medication	<ul style="list-style-type: none"> Parenteral and bulk oral liquid medications must be scanned for a barcode to print from the ADC. Skip Item – Generates 'null transaction', a transaction that began but did not finish. Null transactions are tracked by Pharmacy.
6. Witness to enter credentials (if either a narcotic or controlled medication is removed from the ADC <u>or</u> a waste is required during removal)	<ul style="list-style-type: none"> A witness is required prior to removal of any narcotic or controlled medications from the ADC fridge.

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7. After removing a medication , close the bin and drawer. If removing multiple medications, the next cabinet drawer will light up. Continue removing medications until all transactions are complete.	<ul style="list-style-type: none"> Unauthorized access of bins is tracked by pharmacy
8. Once all medications have been removed, select EXIT to log out.	<ul style="list-style-type: none"> User MUST press EXIT to avoid unauthorized use of personal account

Narcotic & Controlled Medications – Weekly Guided Cycle Counts

A guided cycle count must be performed at least once weekly for all narcotic and controlled medications in each ADC for all patient care areas. Two users are required for guided cycle counts.

Exceptions:

- Clinical areas where there is one narcotic/controlled medication unit per bin (i.e. G.I clinic, cardiac catheterization lab, and radiology)

Steps	Notes
1. Log into ADC (Omnicell®) using your User ID and Password or Fingerprint and select Main Menu	<ul style="list-style-type: none"> Two authorized users with unrestricted access must be present for cycle count
2. Select Inventory Menus	
3. Select Cycle Count	<ul style="list-style-type: none"> Cycle counts must be completed at least once a week
4. Ensure option for All Bins and bins under Control Level 2 for narcotics and controlled medications are selected. Select Count Now	
5. Follow the flashing light to appropriate drawer	
6. Witness will be prompted to enter User ID and either enter a password or scan a fingerprint. Open up lighted bin	
7. With bin open, perform manual count. Enter correct amount and touch OK . Close bin.	<ul style="list-style-type: none"> Two users with unrestricted access must verify each medication count Discrepancies - if there is a discrepancy a discrepancy receipt will print out of the ADC and will require resolution when count is complete

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8. Continue process until all bins have been counted. Resolve any discrepancies as soon as possible and before the end of the shift.	
9. Close drawer and touch EXIT to log out	<ul style="list-style-type: none"> Users MUST EXIT to avoid unauthorized use of personal account
10. Both nurses must initial the Cycle Count schedule template posted on the ADC	<ul style="list-style-type: none"> A Cycle Count must be completed for each ADC in the clinical area once a week

Resolution of Narcotic Discrepancies

Requirements

- Automated discrepancy reports print off unit printers 30-60 minutes prior to the unit's usual shift change times. These reports show all unresolved narcotic discrepancies. A dose reconciliation report also prints at this time and identifies all partial doses that need to be wasted at the ADC prior to end of shift.
- For unresolved discrepancies, enter "*Cannot resolve*". This option is **ONLY** chosen when all other attempts to resolve the discrepancy have failed.
- Dose Reconciliation Reports capture partial narcotic and controlled medication doses that have not yet been reconciled. These reports are automatically printed off unit printers 30-60 minutes prior to usual shift change times. Unreconciled doses carry over on the report for 7 days.
- If a dose cannot be reconciled prior to end of shift, inform the CNL/Charge Nurse.

Oral liquid narcotics

- A discrepancy of greater than 10% for oral narcotic liquids requires a Narcotic and Controlled Drug Incident Report form to be completed
- The gradations on the oral liquid narcotic containers are not precise, and are only an estimate of the remaining volume. Do not count correct liquid narcotics prior to the end of bottle. Count corrections of oral liquid narcotics at any other time will not be accurate corrections.
- Count corrections must be done at the end of each bottle when the quantity on hand does not match the quantity on the ADC.

Procedure for Resolving Discrepancies

Steps	Notes
1. To resolve a discrepancy identify on the discrepancy receipt the medication involved and the last user(s) who accessed the bin. Speak with the last user(s) and identify the reason for the discrepancy. Together, check the medication bin to verify that the count is indeed correct and then provide the reason on the cabinet (see following steps).	
2. Log into ADC (Omnicell®) using your user ID and password or fingerprint. Go to Main Menu .	
3. Select Resolve Discrep .	<ul style="list-style-type: none"> If multiple discrepancies are on the cabinet, use the Next Discrep button to view next discrepancy until you find the summary of the one that you would like to resolve
4. Select Cycle Count .	
5. Follow the guiding light to the specific bin and drawer.	
6. Have witness enter their user ID and password or scan fingerprint.	
7. Confirm amount of medication in bin.	<ul style="list-style-type: none"> Witness must visualize the wasting count
8. Close bin and drawer.	
9. Enter the resolution reason or select List of Resolve Reasons button and choose appropriate reason	Common Reasons for Discrepancy <ol style="list-style-type: none"> Performing narcotic count verification after removal of the medication rather than before. Closing the narcotic drawer without removing medication. (Note: If a medication is not required before the ADC transaction is completed, press Skip Item). Rushing through a task and removing more or less medication than needed. Count correcting oral liquid narcotics. Count correction for liquids should ONLY occur at the end of bottle.

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10. Select Resolve Discrepancy . Details of discrepancy will display	
11. Enter witness information	<ul style="list-style-type: none"> Best practice to have individuals involved with the discrepancy present for resolution.
12. Continue to resolve discrepancies until all have been resolved	<ul style="list-style-type: none"> Notice that the system displays a message that there are no more discrepancies. Receipt will print out.
13. Select EXIT to log out	<ul style="list-style-type: none"> Users MUST EXIT to avoid unauthorized use of personal account.

Documentation of Narcotic and Controlled Medication Wastage

Documentation of waste is required for narcotic and controlled medications when partial doses are given or a patient declines or is unable to receive opened medication. All medication wastage must be disposed of in a safe and secure manner that meets federal, provincial and regional legislation and standards, which can be found in the [Waste: Pharmaceutical Waste Disposal guideline](#).

Wasting Medication at Time of Removal

Steps	Notes
1. Log into ADC (Omnicell®) cabinet using your user ID and password or fingerprint	Two users must be present to waste narcotics
2. Select patient from Local or Global list.	If patient's profile cannot be located on either the Local or Global List , patient can be added on the patient care screen (See adding temp patient)
3. Select medication from Active Medication Orders or Stocked Meds	
4. Enter dose information and select Remove Now .	
5. Open drawer and appropriate bin and count the number of medications. Enter the count PRIOR to removing amount needed. Then select OK and keep the bin and drawer open	
6. While drawer and medication bin is still open, select Waste Partial Dose . Review intended dose and waste amount information. Select OK	

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7. Have witness enter their user ID and password or scan fingerprint.	Witness must visualize the wasting process
8. Close bin and drawer	
9. Select Exit to log out	Users must EXIT to avoid unauthorized use of personal account

Wasting Medication After Removal

If a witness is not available at the time of medication removal from the ADC, the nurse must return to the ADC after administration of the narcotic or controlled medication in order to waste the remainder of the medication. The item to be wasted must be selected and the waste amount and reason must be entered. A witness is required to perform this function.

Exception:

- **Emergency Department:** Where ADC waste documentation cannot occur (i.e. Code Orange), Nurses must document waste on paper. See [Code Orange: Medication Waste Log Sheet](#).

Steps	Notes
1. Log into ADC (Omnicell®) cabinet using your user ID and password or fingerprint	Two users must be present to waste narcotics
2. A prompt will appear “You have partial dose issues that require waste documentation.” Select OK .	
3. Select Partial Dose List and select the name of the patient for whom you would like to document waste	
4. Select Waste Meds . Select Meds Requiring Waste <u>or</u> All Meds	Meds Requiring Waste - displays all partial doses of a medication that require waste documentation. All Meds – displays all medications in the cabinet. This will need to be selected if a full dose of a medication requires waste documentation
5. Select medication that you want to waste.	Administration and waste amounts should be auto-populated. Adjust as needed to reflect actual dose administered.
6. Input reason for waste or select reason from List of Reasons or free text	Users can input a reason (free text) or select from existing list.

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7. Have second nurse to witness. Have them enter their ID and password or scan fingerprint	Witness must visualize the wasting process
8. Select Record Waste Now	Waste will not be recorded unless Record Waste Now is selected.
9. Select Exit to log out	Users must EXIT to avoid unauthorized use of personal account.

Wasting Full Dose Medication or Medication Initiated in Another Area

Steps	Notes
1. Log into ADC (Omnicell®) cabinet using your user ID and password or fingerprint.	Two users must be present to waste narcotics
2. Select patient from Local or Global list	If patient's information cannot be located on either the Local or Global List , patient can be added on the patient care screen. (See adding temp patient)
3. Select Waste Meds. Meds Requiring Waste tab displays. If medication is not on the list then select All Meds button to the right.	Stocked Meds- will show all meds that have been removed under this patient's profile.
4. Select medication that you want to waste. (The administration and waste amounts should be auto-populated. Adjust as needed to reflect actual dose administered). If the medication is not there select Miscellaneous .	Some medications may not be available on the ADC cabinet and the Miscellaneous function must be used.
5. Input reason for waste or select reason from List of Reasons	Users can input a reason (free text) or select from existing list.
6. Have second nurse to witness. Have them enter their ID and password or scan fingerprint.	Witness must visualize the wasting process
7. Select Record Waste Now	Waste will not be recorded unless Record Waste Now is selected.
8. Select Exit to log out	Users must EXIT to avoid unauthorized use of personal account.

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Wasting Miscellaneous (Found) Narcotics and Controlled Medications

Steps	Notes
1. Log into ADC (Omnicell®) cabinet using your user ID and password or fingerprint.	Two users must be present to waste narcotics
2. Select Add New Patient . Enter first name: Found on Enter last name: Counter	Any opened narcotics and controlled medications that are found unattended need to be wasted appropriately. If unable to identify the patient for whom the medication was intended enter the waste under a new patient named "Found on Counter"
3. Select Found on Counter patient under the local list.	
4. Select Waste Meds . You will be taken to the Stocked Meds screen.	
5. Select appropriate medication	
6. Enter administration amount and waste amount	
7. Enter a reason for the waste " Damaged, Found on Counter "	
8. Select OK . Witness will be prompted to enter ID and password or scan fingerprint	
9. Select Record Waste Now	
10. Select Exit to log out	Users must EXIT to avoid unauthorized use of personal account

Ordering, receiving and returning Narcotic and Controlled Medications
Receiving narcotics and controlled medications

- Pharmacy staff maintains stock levels of all items contained in the ADC and restocks on a regular basis. At the time of restock, pharmacy personnel will perform an inventory count of those items being restocked.
- Pharmacy staff members will restock ADCs should an additional supply of an existing narcotic or controlled medication be needed on the unit before or after routine pharmacy deliveries.
- The pharmacy staff member refills the ADC by performing an inventory count of those items being

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refilled, and comparing the actual physical inventory with the report. If a user requires medications while the pharmacy technician is restocking an ADC, the pharmacy technician will yield to the user's request.

- If a discrepancy is found when refilling a narcotic and the previous user was a nurse, the pharmacy staff member will give the discrepancy report to nursing staff to resolve. If the previous user was a pharmacy staff member, the pharmacy staff member will determine the cause of discrepancy and resolve it.

Returning Narcotics to Pharmacy

- Only unused, clean, whole medications in their original packaging may be returned to pharmacy by the ADC's external return bin (ERB).
- All medications taken out of a patient isolation area must be wasted.

Steps	Notes
1. Log into ADC (Omnicell®) cabinet using your User ID and Password or Fingerprint	
2. Select Patient from Local or Global List	If patient's information cannot be located on either the Local or Global List , patient can be added on the patient care screen.
3. Select Return Meds	
4. Select medication to be returned. All recent removals from ADC will be displayed under Meds Eligible for Return tab.	
5. Verify the quantity to be returned. Select OK .	Note: the unit of measurement of the medication (e.g. 1 vial , 5 mg)
6. Select Return Meds Now and the External Return bin will release. Open the bin and return medication.	Medications that are narcotics or controlled substances, including refrigerated medications, must always be returned to the ERB. Refrigerated medications that are not narcotics or controlled substances must be returned to the medication fridge.
7. Enter reason for return or select reason from existing list.	
8. Select Exit to log out	Users must EXIT to avoid unauthorized use of personal account

Restocking the Fridge

If medications requiring refrigeration are delivered by a porter, an ADC user will need to stock the refrigerator with the delivered medications.

Steps	Notes
1. Log into ADC (Omnice [®]) cabinet using your User ID and Password or Fingerprint.	
2. Select Main Menu	
3. Select Inventory Menus	
4. Select Supplemental Restock	
5. Select Pt SPECIFIC MEDICATION-FRIDGE 1 EA	
6. Enter quantity to restock and select OK	
7. Select Restock Meds Now	
8. Flexlock will unlock. Open fridge and place medication(s) in fridge	
9. Close fridge and select EXIT to log out	Users must EXIT to avoid unauthorized use of personal account

Troubleshooting and Downtime Procedures

Report all ADC (Omnice[®]) problems to the CNL/delegate. For technical support, staff should contact the [ADC contact](#).

Issue	Notes and Actions
Power Failure	During a power failure the ADCs (Omnice [®]) are connected to emergency outlets to ensure power will be available to operate them. If a system failure or complete power outage occurs, patient care areas are to contact pharmacy for further direction.
Code Orange	In the event of a Code Orange (e.g. Disaster, Mass casualties), patient care areas are to contact pharmacy for further direction.
Communication Error	If there is a temporary lapse in communication between the OmniCenter and ADCs, all transactions are stored and the necessary information is exchanged when communications are re-established. If the OmniCenter fails or is taken off-line, the ADCs are not impacted since every ADC can store and queue all data until the OmniCenter is on-line again.

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	During a system downtime new patients will not appear in the ADCs until the Pharmacy system becomes available. Please follow the procedure for adding new patients to ADC (Omnicell®).
Blank screen	<ol style="list-style-type: none"> 1. Check power switch - it should be green 2. Check power plug at wall (all cabinets are connected to emergency power outlets)
Screen freezes	Turn off power switch, wait a few seconds, turn back on
Printer not printing Label or receipt	<ol style="list-style-type: none"> 1. Check if paper is out 2. If paper jammed, remove and reinsert 3. Under Admin Menus, click on test printer
Cannot see medication on list	<ol style="list-style-type: none"> 1. Check alternate name(s) - items are listed by generic name 2. Medication might not be stocked in ADC. Contact Pharmacy to determine how best to acquire medication 3. Medication might be stocked in ADC fridge 4. Medication might be coming from Pharmacy, including in Automated Unit Dose strips 5. Check Cerner to see if order has been verified by Pharmacy 6. Refresh ADC display by logging off and back on
Cannot see patient on Local list	<ol style="list-style-type: none"> 1. Patient may not be registered yet 2. Patient may have been discharged – discharged patients will remain on the global list for 4 hours after discharge 3. Patient may not be registered on the correct unit - check the Global List 4. If unable to find the patient, create a temporary patient
Drawer is jammed	If medication packaging is stuck, attempt to release it. If unable to, call Pharmacy for technical support. Never force anything open.

Maintenance and Cleaning

Requirements

- Cleaning of ADCs is required to maintain normal operations. Spills and plastic from medication packaging can contribute to drawer jams. Nursing and Pharmacy share in the responsibility of keeping the ADC clean.

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- ADCs must be cleaned when a spill occurs. ADC bins should be checked for spills during the **weekly** cycle count or when restocking occurs.
- Each user is required to know how to reload the receipt paper and labels for the ADC. Instructions on how to change the paper and labels can be found under the lid of the ADC printer when the lid is lifted or opened.

Barcode Scanner and Labels

- Parenteral and bulk liquid oral medications must be scanned for a barcode to print from the ADC
- If the barcode on the medication is missing or incomplete, complete a 'Med Request' in Cerner, or contact pharmacy
- It is the responsibility of the clinician to replace the label when the roll of label runs out. The process to replenish ADC labels can be found when the lid of the ADC interface is lifted or opened. You can also contact the NE, CNL, or [ADC contact](#) for more support.
- Cleaning and Disinfection Recommendations (See [Appendix E](#))

Related Documents and Resources:

1. [Pharmacy – Automated Dispensing Cabinets \(ADC\) SPH/MSJ](#)
2. [B-00-12-10122](#) – Narcotics and Controlled Drugs: Keys, Access to Storage
3. [B-00-12-10121](#) - Narcotics and Controlled Drugs: Counting and Auditing
4. [B-00-12-10123](#) - Narcotics and Controlled Drugs: Wastage
5. [B-00-12-10125](#) - Narcotics and Controlled Drugs: Ordering, Receiving and Returning
6. [B-00-12-10124](#) - Narcotics and Controlled Drugs: Documentation

References

1. Vancouver Coastal Health (2010) Omnicell Dispensing Cabinet; Richmond site.
2. Vancouver Coastal Health (2009) Clinical Practice Document: Omnicell Dispensing Cabinets; Vancouver Acute.
3. Providence Health Care (2008) Pharmacy Department Automated Dispensing Machines (ADM) Policies and Procedures
4. Omnicell Nurse Preceptor Program (NPP) Training Script for Profiled Environments Omnicell Color Touch 19.0. (PN: 63-4115 Rev A)

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Definitions

“Diversion” as in the [Drug Diversion of Controlled Substances Policy](#) diversion is intentionally and without proper authorization, using or taking possession of a drug, drug substitution, and other drug theft from organization supplies, patients, residents, clients, or through the use of prescription, ordering or dispensing system.

“Instructor” is an RN/RPN/LPN who is employed by an educational institution.

“Student” include those enrolled in basic RN, RPN, or LPN programs; RNs, RPNs, and LPNs completing requirements for post-basic and/or postgraduate programs; RNs, RPNs, and LPNs engaged in professional development or training whose request has been approved by the Nursing Student Placement Office.

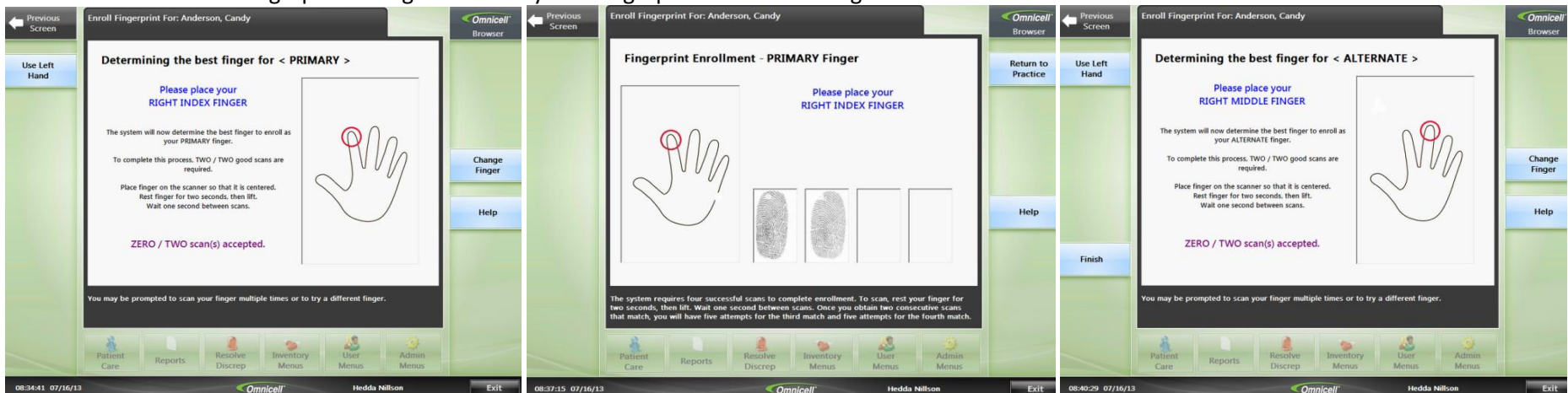
Appendix A: Fingerprint Enrollment QUICK reference (available at all ADC cabinets)



This guide is for fingerprint registrars (e.g. Nurse Educators, Clinical Nurse Leaders) to enroll users' fingerprints. In order to enroll you must be set up as a Registrar with enrollment privileges. See your Pharmacy System Administrator to verify this if unsure.

How to Enroll

1. [Fingerprint registrar] Log onto the cabinet.
2. Select **Main Menu**.
3. Select **User Menu**.
4. Select **Add User Fingerprint**.
5. Have the user to be enrolled log on with their **User ID and password** (user may be prompted to change password if it has expired).
6. Enrollment instructions will appear on screen. Select **Next**.
7. **Default primary finger** to be scanned is **Right Index Finger** (may choose to use left hand by selecting Left Hand and any finger by selecting Change Finger).
8. Have user place chosen finger firmly on sensor to scan (two successful practice scans will take you to enrollment screen).
9. Have user scan fingerprint 4 times. Once successful a confirmation screen will appear. Select **Next**.
10. User will be prompted to enroll an alternate finger.
11. Repeat steps 7 to 9. Once alternate finger successfully scanned select **Finish** (must select Finish to save enrollment).
12. Log out by selecting **Exit**.
13. Have user scan fingerprint to log in and verify that fingerprint is now working.



Steps 7 and 8

Step 9

Step 10

Appendix B: Removing and Returning a Code Blue Kit and Expired Kit Medications (SPH: ICU & CICU, MSJ: HAU ONLY)**Removing the Code Blue Kit**

- 1) Log onto the cabinet
- 2) Select ***codeblue*** on the **Local List** (Under **Patient Care** tab)
- 3) Select **Remove Meds**
- 4) Select **Code Blue Kit** (Under **Active Med Orders**- default will be "1 KIT" to remove)
- 5) Select **OK** then **Remove Now**
- 6) Follow guiding light and on screen instructions to remove the kit.
- 7) Ensure you log out after removing the kit

Returning the Code Blue Kit

- 1) Log onto the cabinet
- 2) Select ***codeblue*** on the **Local List** (Under **Patient Care** tab)
- 3) Select **Return Meds**
- 4) Select **Code Blue Kit** (Under **Meds Eligible for Return**- default will be "1 KIT" to return)
- 5) Select **OK** then **Return Now**
- 6) Follow guiding light and on screen instructions to return the kit
- 7) Ensure you log out after returning

Restocking Medication in the Code Blue Kit (Post Code Blue)

- 1) Log onto the cabinet
- 2) Select appropriate patient (for whom the medication was used) from the **Local List** or **Global List** (Under **Patient Care** tab)
- 3) Select **Remove Meds**
- 4) Select **Stocked Meds**
- 5) Select specific medication needed for restock from list
- 6) Enter the amount that was given during the code under **intended dose**.

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- 7) Enter the **physician** that authorized the use of the medication during the code and then select **OK**
- 8) Provide countback and then select **Remove Now**
- 9) Follow guiding light to remove medication from the appropriate bin
 - a. Record wastage of medication not administered: during removal select **Waste Partial Dose** before closing the bin. Verify intended dose and waste amount and select **OK**. A witness will be required
- 10) Remove medication and place the restock medication into the kit and then return the entire kit once restocked
- 11) Ensure you log out after returning the kit

Returning Expired Medications from the Code Blue Kit

- 1) Log onto the cabinet
- 2) Select ***codeblue*** on the **Local List** (Under **Patient Care** tab)
- 3) Select **Return Meds**
- 4) Select **Stocked Meds**
- 5) Select specific expired medication to be returned from stocked med list and enter quantity then select **OK**
- 6) Select **Return Now**
- 7) Enter reason for return as “expired”. May be selected from **List of Reasons** or typed in
- 8) Following guiding light to place medications in external return bin
- 9) Ensure you log out after returning medications

Restocking Expired Medications from the Code Blue Kit

- 1) Log onto the cabinet
- 2) Select ***codeblue*** on the **Local List** (Under **Patient Care** tab)
- 3) Select **Remove Meds**
- 4) Select **Stocked Meds**
- 5) Select specific medication needed for restock from list and enter quantity then **OK**
- 6) For physician name free text restock **“expired medication”**

- 7) Select **Remove Now**
- 8) Following guiding light to remove medications from the appropriate bin
- 9) Place medication in kit and then return the entire kit once restocked
- 10) Ensure you log out after returning the kit

Appendix C: Priming/Removing Subcutaneous Butterfly Volume

[B-00-12-10060](#): Subcutaneous Butterfly Catheter Insertion Maintenance and Medication Administration

Situation:

Ordered dose: HYDROmorphone 2 mg Subcut Q4H: extra 0.41 mL required for priming at initiation.

When removing the medication from the ADC, the nurse will only be able to remove the ordered dose at one time. In the above example for HYDROmorphone 2 mg/mL, that would be equal to one full vial.

Action:

To remove extra medication required for priming volume, the nurse must request another full dose by re-selecting the medication and removing another dose.

The nurse will draw up what is required for priming volume and waste the unused portion with a witness. The reason for waste should be entered as **"Priming Volume"**.

Important:

Priming volume must be removed from ADC (OmniceII) in milligrams (mg)

Example: HYDROmorphone 2 mg/mL vial; Priming volume 0.41 mL = 0.82 mg

$$\text{Formula: } \frac{\text{Concentration Dose (mg)} \times \text{Prime Volume (mL)}}{\text{Concentration Volume (mL)}} = \text{Prime Dose (mg)}$$

Appendix E: Omnicell Cleaning Log



ADC (Omnicell®) Cleaning Log Sheet

Year: _____ Month: _____

Location: Keep this cleaning log in a plastic sleeve on or near the ADC. Keep the last 3 months' sheets in the sleeve and retain the remainder with the daily fridge temperatures logs. Discard after three years.
Refer to the items description on page 3*. Initial when complete.

Component	1 Biometric fingerprint reader	2 Keyboard	3 Touch screen	4 Front surface of drawers and buttons	5 Fridge handle and acrylic door handles	6 Barcode scanner handle	7 External return bin (ERB) handle	8 External and internal bin surfaces and inside of fridge	9 Exterior painted metal surfaces	10 Acrylic surfaces and glass roof
Cleaning Frequency	Minimum Daily	Minimum Daily	Minimum Daily	Minimum Daily	Minimum Daily	Minimum Daily	Minimum Daily	When spillage or visibly soiled	First Wednesday of the month or when soiled	First Wednesday of the month or when soiled
Responsibility	Pharmacy	Pharmacy	Pharmacy	Nursing or Ward Aide	Nursing or Ward Aide	Nursing or Ward Aide	Nursing or Ward Aide	Nursing/ Pharmacy	Assigned staff per manager	Assigned staff per manager
Date										
1										
2										
3										
4										
5										
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1. Biometric Fingerprint Reader	2. Keyboard	3. Touchscreen	4. Front surface of drawers / buttons
			
5. Fridge handles and acrylic door handles	6. Barcode scanner handle	7. External return bin (ERB) handle	8. External bin surface
			
8. Internal bin surface(s)	9. Exterior painted metal surfaces	10. Acrylic surfaces	10. Glass roof
			

Prior to logging into any automated dispensing cabinet, all staff shall perform hand hygiene.

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ADC (Omniceil®) Cleaning Log Sheet

Cleaning and Disinfection Recommendations

Follow two-step process using the **same** product.

Step 1: Clean with a new wipe(s) using friction (rub/scrub motion) to remove any foreign matter (e.g., dust, soil, food, feces, blood, sputum) and immediately follow with Step 2.

Step 2: Disinfect all surfaces using friction with another new wipe(s). To complete the disinfection process, maintain the product dwell time followed by air-drying.

ADC component	Cleaning	Disinfection
Biometric fingerprint reader, keyboard, touchscreen, barcode scanner, acrylic surfaces and glass roof	*70 % isopropyl alcohol	*70 % isopropyl alcohol
Front surface of drawers/buttons, fridge and acrylic door handles, external return bin, exterior painted metal surfaces, internal bin/lid surfaces, inside of bins and fridge	**Low level disinfectant	**Low level disinfectant

*PHC approved products for ADC Omnicell cleaning/disinfection containing 70 % isopropyl alcohol: Wipes Kim Tech Pure, Wipes Prosat Cellulose, Wipe alcohol large 70%, Wipe Swipe Ultra Regular 5X6, dwell time 3 minutes.

**PHC approved Low level disinfectants for ADC Omnicell use: Accel INTERvention wipes (active component: 0.5 % hydrogen peroxide), dwell time 1 minute.

References

1. Omnicell. 2020. Omnicell Equipment Cleaning Guidelines. 60-0251Rev-D. Retrieved from <https://www.omnicell.com/PDFs/Omnicell%20Equipment%20Cleaning%20Covid-19%203-17.pdf>.
2. Providence Health Care (PHC). Cleaning and Disinfection of Equipment/Devices/Surfaces – Infection Control. <http://shop.healthcarebc.ca/phc/PHCDSTs/B-00-16-13004.pdf>.
3. Providence Health Care (PHC). Master Equipment Cleaning List. Principles of Cleaning and Disinfecting Equipment <http://shop.healthcarebc.ca/phc/PHCDSTs/B-00-07-13076.pdf>.
4. Vancouver Coastal Health. Low level cleaning and disinfection. <http://ipac.vch.ca/Documents/Cleaning%20and%20Disinfection/Low%20Level%20Cleaning%20Disinfecting.pdf>.

Persons/Groups Consulted

Medication Safety Pharmacist, PHC

Coordinator, Distribution Pharmacy Services SPH/MSJ, PHC

Nurse Educators, Critical Care, Interventional Radiology, Emergency Departments

Pharmacy Technician, ADC System Administrator, PHC

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