MUSKOKA ALGONOUIN HEALTHCARE	Policy:	PATIENT'S OWN MEDICATION
	Number:	
Approved by: Pharmacy and Therapeutics Committee	Manual:	Pharmacy
Signature:	Section:	
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PURPOSE: This document is intended to outline the appropriate use of a patient's own medication in hospital, as well as to assist in the safe management of all medications brought into the hospital by patients.

Definitions

<u>"Prescribing Professionals"</u> (PP) include Physicians, Nurse Practitioners, Dentists, Chiropodists, Midwives and Dietitians prescribing in their scope of practice. Medical students can write orders but they must be signed by the Physician prior to implementation.

<u>"Patient's own medication"</u> includes prescription medications, over-the-counter (OTC) medications, sample medications, investigational/study medications and alternative products including herbals, vitamins and supplements that will be supplied by the patient.

Policy

- A. If a medication will not be supplied by the hospital pharmacy (e.g. medication is not on hospital formulary) a patient's own medication may be used during their stay in hospital. A patient's own medication may be administered if **all** of the following conditions apply:
 - 1. The medication has been ordered by a PP in accordance to hospital policies and procedures.
 - 2. The PP or pharmacist has indicated on orders in the chart that the patient's own medication may be used.
 - 3. The pharmacist or delegate has determined that the patient's own mediation is suitable for use in hospital.
 - i. The pharmacist or delegate can make a reasonable and prudent determination of the identity of the medication on the basis of unique distinguishing features of the dosage form.
 - ii. The pharmacist or delegate can make a reasonable determination that the integrity of the active ingredient of the patient's own medication has not been compromised (e.g. a medication with special storage instructions has been properly stored, medication is not past its expiry date)
- B. A pharmacist or delegate will be available to determine if a patient's own medications is suitable for hospital use during regular weekday pharmacy hours. In the event that a patient's own medication needs to be initiated outside of regular weekday pharmacy hours (e.g. weekends, statutory holidays), a nurse is to determine that the patient's own medication is suitable for use in hospital until a pharmacist or delegate is available.

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- C. A pharmacist or delegate must determine that the patient's own medication is suitable for use in hospital each time a new supply (e.g. a refilled medication) is brought into the hospital to be used.
- D. When the pharmacist or delegate has determined that a patient's own medication is suitable for use in hospital, the following procedure will occur:
 - 1. The pharmacist or delegate must document in the patient's medical record that the patient's own medication has been identified and deemed suitable for use in hospital.
 - 2. The pharmacist or delegate will highlight, initial and date the patient's own medication label.
 - 3. The hospital's standard policies and procedures for medication profile entry and medication administration record entry must be followed.
 - 4. The patient's own medication will be stored in medication carts or medication refrigerators as appropriate.
 - 5. The patient's own medication will be administered in accordance to hospital policies and procedures.
- E. If the pharmacist or delegate has determined that a patient's own medication is **not** suitable for use in hospital, the pharmacist or delegate will communicate this decision to the PP and nurse as well as document this decision in the patient's medical record.
- F. Patients will be encouraged to have a family member remove any of their own medications that are not going to be used in the hospital.
- G. If the patient's medication cannot be sent home during the hospital stay, they will be placed in a security bag, sealed and sent to pharmacy for storage until the patient is discharged.
 - H. Patient's own medications not returned to the patient within two months of discharge will be destroyed by the pharmacy service in accordance to hospital policy and legal requirements.

Adapted from:

College of Pharmacists of British Columbia Guidelines for the Use of Patients' Own Medicinal Products in Hospitals. 2009

Canadian Society of Hospital Pharmacist Guidelines 2008

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