

# THE QUARTERLY CONNECTION

Quarterly Report from Pharma-Care, Inc. / Creative Care Consulting

Third Quarter 2018

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## Preventing Episodes of Drug Diversion

On June 12, the NJ Department of Health conducted its fourth annual conference on drug diversion in healthcare settings. The program was designed to assist participants with policy development, medication tampering, identification, and resources to manage a suspected drug diversion in a healthcare facility.



The following issues for facilities were discussed:

- Change codes or passwords on med room doors, narcotic lock boxes, Omnicel, or other automated dispensing systems *quarterly*.
- Also change codes and passwords when there is a change in employees, termination, leave, or other change in roles.
- Maintain a checklist of people with access and review this checklist *quarterly*.
- Delayed wasting is a common means for drug diversion. Tighten up and expedite wasting and destruction policies.
- Maintain security and log "222" forms.
- Be cautious of excessive telephone orders.

The overall takeaway message of the conference was that facilities can help prevent drug diversion through frequent auditing and tightened policies.

## Reminders & Updates from Pharmacy

**Diabetes** - Guidelines for A1C goals in Type 2 diabetes treatment is not one-size-fits-all. For those over 65 who have had diabetes for years or have many chronic complications, it is acceptable to aim for a 7.5% - 8% goal since the risk of hypoglycemia often outweighs microvascular benefits.

**C Dif** - Because of the high incidents of recurrence, new guidelines from Infectious Disease Society of America (IDSA) suggest treating an initial episode of C dif with Vancomycin QID for 10 days instead of Metronidazole with an extended taper for recurrences. Metronidazole may still be suggested for mild cases. Fecal transplants are becoming more common for patients with three or more episodes. Probiotics can be tried in combination with usual treatment or to prevent a recurrence. And limiting antibiotic use.

**Pain** - Fentanyl patches are only for chronic pain and for patients who have been on opioids at certain doses and

## State Survey Trends/Focus

Our review of last quarter state surveys identified the following areas of concern:

### Unnecessary Medications (F758)

- o 14 day PRN rule
- o No rationale present when PRN medication use extended
- o No rationale or not enough information to support lack of psych dosage adjustments
- o Inappropriate usage of appetite stimulation medications

### Pharmacy consultant regulations not being answered appropriately or in a timely basis

### Unit inspections/Med Pass (F759/F761)

- o Checking med carts immediately upon entering building
- o Expired multi-dose vials
- o Meds not being offered with food/meals
- o Signing out of narcotics from count down sheet at inappropriate time

### Infection control (F860)

- o Not washing hands appropriately
- o Keeping inhalers/eye drops in pocket
- o Bruit and thrill not checked
- o Cleaning bed side tables post dressing change

### Dietary/Kitchen

- o Trays should arrive at a table about the same time
- o Nurse not present in dining room
- o Checking to see resident consumed meals
- o Kitchen inspection upon entering building

### Care Planning/Assessments (F684)

- o Individual side rail assessments
- o Follow-up with advance directives

durations. Contact the prescriber if you see fentanyl patches prescribed for acute pain- back pain, post-op, broken bone, etc. Always confirm opioid tolerance. Check the patient's profile, your Rx drug monitoring program, or with the prescriber. And be sure to document! Also, review proper patch application and disposal.

**Aspirin** - Aspirin doses above 81mg/day are not more effective for cardiovascular prevention and may increase bleeding risk. Enteric-coated aspirin does not reduce bleeding risk mainly due to aspirin's systemic effects. Enteric-coated or buffered aspirin may limit dyspepsia. Also, there is no proof that plain aspirin prevents more CV events.

From "Pharmacist's Letter", Vol. 34, No. 4



**Pharma-Care, Inc.**  
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Creative Care Consulting, LLC

## What does an epileptic seizure feel like?



Pharma-Care, Inc. employees got a taste of the experience via virtual-reality equipment at the company's most recent staff meeting.

## EPIC Corner

ELECTRONIC PHARMACIST INFORMATION CONSULTANT  
(MEDICATION REVIEWS WITHIN 48 BUSINESS HOURS)

**EPIC Phone: 732-943-3573**

**EPIC Fax: 732-574-3469 or 3926**

**Email: [epic@pharmacareinc.com](mailto:epic@pharmacareinc.com)**

Last April a brand-new system was implemented in the EPIC department. As with many new programs, there were some initial hiccups. At one point the entire EPIC system malfunctioned, but thanks to a dedicated staff, the team was still able to process your requests and send them to you. And fortunately, the Pharma-Care computer team corrected those problems so that EPIC is fully functional. Thank you to our dedicated clients for your patience and understanding during that transition period.

On another note, we are aware that Antibiotic Stewardship is a hot button topic for the state survey teams and that survey teams will be looking at your Antibiotic Stewardship programs in-depth starting November 2018.

EPIC has been a full participant in several facilities' antibiotic stewardship programs. For more information about how we can help your Antibiotic Stewardship program, send an email or contact Rick E. Corritore, EPIC Administrator directly at 732-943-3573.

## Troubleshooting Emails Received Through the Virtru System

### How do I print documents received in Secure Reader?

Documents displayed in Secure Reader are only a partially decrypted preview of the original document and therefore do not behave properly when printed straight from the browser. To successfully print a document using Virtru, first download it via the "Download" button in the top-right corner of the document preview. Once downloaded, just open the file with the appropriate application and print from there!

### I can't open a Virtru-encrypted email

Most issues can be resolved by making a few small changes to your browser settings.

Chrome, Firefox, or Safari users: Make sure you are not using "Private browsing" and that cookies are enabled. To enable cookies, go to:

Chrome:

<https://support.google.com/accounts/answer/61416?hl=en>

Firefox: <https://support.mozilla.org/en-US/kb/enable-and-disable-cookies-website-preferences>

Safari: [https://support.apple.com/kb/PH21411?locale=en\\_US](https://support.apple.com/kb/PH21411?locale=en_US)

Internet Explorer users: You may have a few more settings that can get in the way. The settings we recommend are:

Internet Options > Privacy > Advanced: Accept cookies from both first-and-third-party sites

Internet Options > Security > Set to "Medium-High" or lower.

Compatibility View settings > Ensure Virtru is not on this list and the box next to "Use Microsoft compatibility lists" is unchecked.

Internet Options > Security > Trusted Sites > Sites > Add [https://\\*.virtru.com](https://*.virtru.com)

### I'm getting an error message, "Contact Your IT Administrator" when trying to access Secure Reader

Most likely, your corporate firewall is blocking access to your message. Contact your IT administrator for help. While this error may be triggered by a firewall, it can also be caused by your settings in Internet Explorer. (See settings above.)

### Who can I contact for assistance?

Email: [support@virtru.com](mailto:support@virtru.com)

NJ Long-Term Care Leaders Coalition, 20th Annual Conference

**20<sup>th</sup> ANNIVERSARY 2018**

**MAKING NOISE ABOUT THE QUIET DRUG PROBLEM IN LONG-TERM CARE**

**Tuesday, October 16, 2018 - 8:00 am - 4:30 pm**

**Holiday Inn, East Windsor**

**\$150 (until 8/31/18) \$175 (after)**

**732-574-9434, x 105 [www.NJLTCLC.org](http://www.NJLTCLC.org)**



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