

# THE QUARTERLY CONNECTION

Quarterly Report from Pharma-Care, Inc., Health Care Consultation Specialists

First Quarter 2011

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## Crushing Questions

Several of our facilities have been expressing some confusion due to statements from their provider pharmacies that Aricept tablets should not be crushed.

Some of the confusion can be attributed to the new 23 mg tablet which, according to manufacturer instructions, cannot be crushed *due to reduced bioavailability*.

On the other hand, crushing the 5 mg and 10 mg tablets does not affect bioavailability, but crushing is not recommended *due to bad taste*.

While we investigate this matter further with the manufacturer, please continue to follow the instructions from your provider pharmacy.

Four (4) CEUs pending for:  
Administrators, Nurses, Medical Directors,  
Dietitians

**Healthcare U.**  
Continuing Education 101

8:00 a.m. - 4:30 p.m.

Breakfast & lunch included  
Crowne Plaza, Monroe Twp  
(Exit 8A NJ Tpk)

No fee for PCI clients

- *Achieving Glycemic Targets in LTC with Basal/Bolus Insulin Therapy*
- *Avoiding Survey Citations: Pharmaceutical Services & the State Operations Manual*
- *Dietary Influence on Various Disease States*
- *Addressing Cognitive Aging: Current & Future Approaches to Maintaining Intellectual Vitality*

Contact: Maureen Ziegler, 732-574-9434, ext. 105  
Email: Mziegler@optcommunications.com



## Twice A Week or Twice a Month?

The terms "biweekly" and "bimonthly" are likely to cause confusion. "Biweekly" is sometimes used to mean once every two (2) weeks while "bimonthly" usually means once every two (2) months.

However, according to online and print dictionaries, "biweekly" is also used to mean twice-a-week or semi-weekly, and "bimonthly" can also indicate twice a month.

So, when ordering medications and transcribing orders, these words should be avoided. Instead, use and write out terms such as "twice a week", "every other week", "every two (2) weeks", "every other month", or "alternate months".

*Adapted from NurseAdvise-ERR, November 2010*

## Customer Service Reminder

If the Department of Health enters your facility for inspection, please remember to **call the Pharma-Care, Inc. office first:**

**732-574-9015**

and speak to the receptionist.

Your consultant pharmacist might not be working that day or might otherwise be unavailable.

By calling the office, you can be assured that your information will be directed to the appropriate person in order to ensure a quick response.



**P**lease note that your consultant pharmacist is required to attend regular PCI staff meetings. This year there will be no meetings in February, April, May, July, or November. Please try to avoid scheduling your Pharmacy and Therapeutic meetings on the following days in 2011:

January 10

August 9

October 3

March 8

September 13



**Pharma-Care, Inc.**

Health Care Consultation Specialists  
www.pharmacareinc.com

## Diabetes Care and Infection Control

In August, The NJDHSS released a letter emphasizing the need to adhere to the standards of practice to prevent patient-to-patient transmission of blood borne pathogens when using glucose meters and supplies. The following recommendations were based on those published by the CDC:

- Prepare medications such as insulin in a centralized medication area; multiple dose insulin vials should be assigned to individual patients whenever possible and labeled appropriately.
- Never share insulin pens among patients even if needles are changed between patients; they are designed for single-patient use only. Insulin pens must be labeled with the name of the patient and other required identifying information. The pen should be labeled on the part containing the needle and insulin reservoir, not the cap.
- Never store together insulin pens or dedicated insulin vials from multiple patients. The outer surfaces of the pens or vials may be contaminated and lead to cross contamination among patients. Place each patient's supplies in a labeled individual plastic bag or container.
- Never reuse needles, syringes, or lancets.
- Restrict use of fingerstick capillary blood sampling devices to individual patients.
- Consider selecting single-use lancets that permanently retract upon puncture.
- Dispose of used fingerstick devices and lancets at the point of use in an approved sharps container.
- Assign glucose meters to individual patients whenever possible. If glucose meters are shared among patients, the devices must be cleaned and disinfected between each patient use. Do not place potentially contaminated glucose meters on medication carts or surfaces where medications for injection are prepared. Use an appropriate EPA-

registered product to immediately clean and disinfect any surface upon which a potentially contaminated glucose meter has been placed.

- Maintain patient-dedicated glucose meters within individual patient rooms, if possible.
- Keep carts and any trays used to deliver medications or supplies to individual patients outside patient rooms.
- Do not carry supplies and medications in pockets. Because of possible inadvertent contamination, unused supplies and medications taken to a patient's bedside during fingerstick monitoring or insulin administration should not be used for another patient.
- Wear gloves during fingerstick blood glucose monitoring, administration of insulin, and any other procedure involving potential exposure to blood or body fluids.
- Change gloves between patient contacts and after every procedure that involves potential exposure to blood or body fluids, including fingerstick blood sampling.
- Perform hand hygiene with soap and water or alcohol hand sanitizer immediately after removing gloves and before touching medical supplies used on other patients.
- Decontaminate environmental surfaces and equipment such as glucose meters regularly and any time contamination with blood or body fluids occurs or is suspected. **To emphasize, every effort should be made to assign glucose meters to individual patients.** If glucose meters must be shared among patients, the devices must be cleaned and disinfected **between each patient use.** The manufacturer's instructions should always be consulted as **cleaning guidelines for multi-patient use vary among manufacturers and models.** Always use an appropriate EPA-registered product or dilute bleach solution of 1:10 to 1:100 concentration. If the manufacturer does not have specific requirements, CDC guidelines for environmental care in healthcare facilities can be found at : [http://cdc.gov/ncidod/dhqp/pdf/guidelines/Enviro\\_guide\\_03.pdf](http://cdc.gov/ncidod/dhqp/pdf/guidelines/Enviro_guide_03.pdf).

## EPIC Use Continues Growth

With your help, the EPIC department continues to grow, averaging over 3,000 reviews per month. The EPIC review benefits the resident by supplying information about the proper timing, administration and potential adverse effects of medications. Armed with this knowledge, the caregiver can make any changes that may be indicated, helping to ensure pharmaceutical care is optimized.

We are happy to announce the additions of Ed Curtin, RPh, CCP and Lisa Kilburg, RPh, CCP. They join the department on a part-time basis.

Please remember if you have any questions about EPIC, contact us at **732-943-3573**.



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