THE QUARTERLY CONNECTION

Quarterly Report from Pharma-Care, Inc., Health Care Consultation Specialists Third Quarter 2016

Phone: (732) 574-9015 136 Central Ave., Clark, New Jersey 07066 Fax: (732) 499-6778

Tylenol: No Longer A One Size Fits All Med

Recent changes in labeling and updates to FDA guidelines for the use of acetaminophen has lead to a great deal of confusion for long term health care facilities. Add to that the conflicting cautionary labeling by the provider pharmacies , and the potential to be out of compliance becomes significant.

Fact: FDA guidelines continue to list 4000 mg within 24 hours as the maximum recommended dose.

There are over 600 products which contain acetaminophen and acetaminophen overdose has recently become the number one cause of acute liver failure in the US. Studies show that this is due to the poor understanding of the consumer regarding the ingredients in OTC products, and the severity of side effects.

Therefore Labeling for both OTC and prescription products must now carry very specific warnings regarding the potential for adverse events , including hepatotoxicity.

A boxed warning has been added to OTC products. It states,

" This product contains acetaminophen, severe liver damage may occur if more than 4000 mg are consumed in 24 hours, is taken with other products that contain acetaminophen, or with 3 or more alcoholic beverages every day."

However, if your provider prints three grams as the maximum dose and this has been accepted by the facility, you must ensure that the products prescribed cannot potentially provide more than your agreed upon maximum. Due to the multiple sources of acetaminophen prescribed for our residents, having a standard PRN dosing schedule for everyone no longer works. Good practice dictates an individualized approach to prescribing acetaminophen.

No matter how the faculty decides to address this issue, it is clear that as with any other medication, dosing of acetaminophen will need to be individualized to each resident's specific needs.

Some options to consider:

- If a resident is receiving a routine acetaminophen order with acceptable pain control, discontinue the PRN order for pain, or decrease the frequency so that the totals cannot exceed your maximum.
- If the resident has an order for Percocet, consider oxycodone, or decrease the frequency of the PRN Acetaminophen for pain
- Consider a facility policy that states that on any day that PRN acetaminophen is used for a temperature, the PRN pain order will not be used.
- If the faculty feels strongly about a PRN order as a standard on every chart, start with an order for every 8 or even every 12 hours then assess the resident's needs and adjust accordingly.
- Ask your pharmacy consultant to help you find the best policy that works for your residents.

Paying Attention to Medication Reconciliation

"Monthly recaps" refers to reviewing the medication administration record (MAR) and treatment administration record (TAR) for the next month against physician's orders in order to ensure accuracy and completeness. Some important points to remember:

- Physician orders need to be reviewed on a monthly basis for accuracy, compliance with state and federal requirements, and need to accurately reflect the physician and facility directed care.
- Any orders written which do not appear pre-printed on the new POS/MAR/TAR need to be reviewed for completeness and accuracy, AND be handwritten on both the POS and the MAR/TAR by a licensed nurse.
- Documents needed to perform recaps include: the current month and upcoming month's Physician Order Sheet (POS), the Medication Administration Record (MAR), the Treatment Administration Records (TAR). Also, the Enteral Records and the Facility Specific Forms.
- Check all telephone orders for the month starting with the most recent and work backwards. Write all missing orders on the new POS, MAR, and TAR as appropriate. Check and correct resident name, diagnosis, room number, physician name, allergies, diet, and all other orders.
- Check POS of the current month and compare to the previous month's POS. Reconcile any missing orders.
- Check the updated, new POS against the new MAR and TAR. Write any missing orders.
- Check the updated new month's MAR and TAR against the current month's MAR and TAR. Reconcile any missing orders.
- If medication is ordered on specific days, block out the days it is NOT to be given in order to avoid med errors. (For example, if Lasix is ordered every other day, block out the correct boxes onthe MAR. Or, if Fosamax is given weekly, the dates should be plotted correctly for the nurses to administer. Plot the "stop date" on the MAR if it is a timed order.
- Rewrite all orders that have been changed. DO NOT cross out the

Continued on reverse

Continued from page 1

original order. Rather, discontinue and REWRITE the change as a new order. DO NOT cross out changed dosage or time. Again, discontinue and REWRITE as a new order.

- The nurse performing the recap should sign and date the updated POS that was concisely reviewed. Any orders taken after the review date will need to be added to both the current and upcoming month's MARs/TARs.
- On the last day of the month, remove the triplicate and send to the pharmacy. Place the original and copy #2 on the chart for the physician to review and sign. Send copy #2 to the pharmacy AFTER it is signed by the physician.

Minimize Medication Errors

In order to minimize medication errors, each medication entered on the MAR must match exactly what is given to the resident.

Example: If an order states to administer Amlodipine 10mg, one tablet by mouth daily, the nurse may NOT substitute two, 5mg tablets without a new order from the physician.

Example: An order is not written properly if it does not include the quantity to administer.

Example: Wrong - "Vitamin D 4000 IU by mouth daily" is written wrong because it is missing the strength per tablet and the number to give.

Correct - "Vitamin D 1000IU tablet, give four tablets by mouth daily" .

Orders must be entered accurately and precisely, including:

- **Name of medication**
- **Strength of each dose**
- **Quantity to administer**
- **Route**
- **Frequency**
- **Any cautionary information from manufacturer**

Medications delivered by the pharmacy or stock meds should be compared to the actual order to ensure accuracy. If any discrepancy is noted, contact the physician and write a clarification order.

Long-Term Care Leaders Coalition Conference

Making Wise Choices in Long -Term Care

October 6, 8 - 4:30

Crowne Plaza, Monroe Twp

$110 by Aug. 15 $125 after Aug 16

For: physicians, medical directors, nurses, administrators, social workers, pharmacists, case managers, dietitians, and others involved in long-term care.

NJLTCLC.org Phone: (732) 574-9434, ext

EPIC Corner

Electronic Pharmacist Information Consultant
(Medication reviews within 48 business hours)

EPIC Phone: 732-943-3573

EPIC Fax: 732-574-3469 or 3926

EPIC continues to provide your facility with information to ensure your residents are receiving optimal pharmaceutical care. When allergies are posted on the physician order sheet, EPIC alerts your facility to the possibility of a cross-reactivity. Your facility should note the response of the physician in these instances.

EPIC alerts your facility to potential medication interactions. This may be as simple as separating tetracycline from iron - or - as complex as interactions which may increase the QT interval. This information is extremely important when optimizing pharmaceutical care.

If your facility is not receiving EPIC reviews within 48 hours of sending, do not wait until the Pharma-Care consultant visits your facility to report this. Please alert EPIC at 732-943-3573 in order to resolve the problem in a timely manner. This may be as simple as a change in your facility's fax number or a change in an email address.

EPIC incoming fax lines are always open. If your facility is receiving a busy signal at each attempt to fax, alert EPIC.

We welcome Bergen County Health Care Center, The Palace Rehabilitation & Care Center, and Somerset Woods Rehabilitation and Nursing Center to EPIC's growing list of clients!

Welcome to Our Newest Clients

Ann's Abbey
Arbor Terrace of Middletown
Arbor Terrace of Shrewsbury
Assisted Living. Inc.
Bayview Cottage
Blooming Care
Dennis Creek
Henson Home
Jersey City Summit Dialysis Center
Post House Treatment Center
Somerset Woods Rehab & Nursing
Stars Adult Medical Day Care Center