SHANDS JACKSONVILLE DEPARTMENT OF PHARMACY UNIVERSITY OF FLORIDA COLLEGE OF PHARMACY

SERVICES ... HOURS OF OPERATION ... TELEPHONE NUMBERS

MISSION

The mission of the Department of Pharmacy is:

- To provide safe, effective and appropriate medication therapy
- To advocate, initiate and facilitate changes that improve patient care

• To educate patients, students and healthcare providers

ADMINISTRATIVE OFFICES

Thanh Hogan, Pharm.D. Director of Pharmacy

Office is located in the basement of the Clinical Center. Monday – Friday, 8:00 am – 5:00 pm; 244-4157.

AMBULATORY SERVICES

Karen Malcolm, Pharm.D. Manager, Ambulatory Care (244-4273)

<u>Ambulatory Pharmacy</u> (244-5773) Restricted to financially qualified SHANDS Jacksonville patients and located on the first floor of the Ambulatory Care Center.

Monday – Friday, 8:30 am – 5:00 pm (last prescription taken at 4:00 pm). Prescriptions must be written on SHANDS Jacksonville prescription blanks by authorized prescribers. SHANDS Jacksonville formulary and drug use policies strictly enforced.

<u>Asthma Clinic</u> (306-4572 beeper) provides a team approach to managing poorly controlled asthma patients. The team consists of a pulmonologist, respiratory therapist, and a pharmacist. Patients may be referred to the clinic from their primary physician by completing a standard referral form. For questions, contact the Asthma beeper. Dave Cury, M.D., Medical Director, 244-3071. Karen Malcolm, Pharm. D., Administrative Director.

<u>Anticoagulation (Warfarin Therapy)</u> - Pharmacists are available to assist with monitoring warfarin therapy. This service is available at the PCP level in CHC, Commonwealth and Internal Medicine Clinics.

OUTPATIENT PRESCRIPTIONS

In addition to the routine information required on prescriptions, the prescriber must also indicate their unique ID number (computer number). Controlled substances (except Schedule II) can be refilled up to 5 times in a 6 month period. Schedule II controlled substances may NOT be refilled.

WRITING OUTPATIENT PRESCRIPTIONS

Only write for one controlled drug <u>per</u> prescription blank. No other medications may be written on this prescription.

A written prescription for drugs MUST be legibly printed or typed AND must contain:

- 1. Name of the prescribing practitioner
- 2. Name and strength of the drug
- 3. Quantity of the drug prescribed in <u>**both**</u> textual and numerical formats
- 4. Directions for use of the drug
- 5. Dated with the month written out in textual letters
- 6. Signed by the prescribing practitioner on they day when issued

TIPS FOR REDUCING MEDICATION ERRORS

- 1. Write legibly in <u>black</u> ink.
- 2. Do not abbreviate drug names.
- 3. Prescriptions should include a brief notation of purpose unless deemed inappropriate (e.g., for nausea, for blood pressure, etc.).
- 4. Always use a leading zero before a number less than 1 (e.g., 0.5mg) and <u>never</u> use a terminal zero (e.g., 5.0mg).
- 5. Include allergy information on each order sheet.
- 6. Pediatric orders should include weight and mg/kg.
- 7. Notify the nursing staff of new orders to assure prompt implementation

ADVERSE DRUG REACTION REPORTING

An *Adverse Drug Reaction* (ADR) is defined as any undesirable or unexpected event to a drug (used at normal human doses for prophylaxis, diagnosis, or therapy) that requires discontinuing a drug, modifying a dose, prolonging hospitalization, or providing supportive treatment. All suspected ADRs should be documented via IDInc., reported to a pharmacist, or communicated via the ADR Hotline at 244-4185 <u>and</u> the reaction documented in the medical record.

IV THERAPY/ONCOLOGY SERVICES

Joel G. Parnes, Pharm.D., M.H.A. Manager, Central Operations (244-2260)

INPATIENT SERVICES

Pamela B. Schauben, M.S., R.Ph. Manager, Inpatient Care (244-3256)

Inpatient pharmacy practitioners are located throughout the patient care areas providing routine and consultative pharmaceutical care. Pharmacists can be readily located on the nursing units or via beeper (beeper numbers are posted on the nursing units).

Specialized areas of pharmacy services include:

- <u>Neonatal Intensive Care Unit Satellite</u> (244-4702) located on the 6th floor of the Clinical Center; Monday through Friday, 7:00 am – 3:00 pm.
- 2. <u>Critical Care Satellite</u> (244-4740) located on the 8th floor in the Clinical Center. Services patients on upper floors evenings and weekend. Patients on lower floors and Pavilion are serviced by the Central Pharmacy on evenings and weekends; 244-6386.
- 3. <u>During the night shift</u>, the pharmacist at the Clinical Center can be reached at 244-6386.
- 4. <u>Central Pharmacy</u> (244-6386) located in the basement of the Clinical Center.
- 5. <u>Oncology Satellite</u> (244-1552) located on the 4th floor of the Pavilion; Monday through Friday, 7:30 am 4:00 pm.

STANDARD MEDICATION ADMINISTRATION TIMES

The scheduling of inpatient medications are standardized unless otherwise indicated by the prescriber. (P&T Policy Rx-11-016)

AUTOMATIC EXPIRATION POLICIES

- 1. **Parenteral Nutrition** orders must be written daily. Adult and pediatric orders should be written by 11:00 am to ensure same day administration. For additional information on parenteral nutrition ordering or monitoring contact the nutrition pharmacist (306-4673) or refer to the Nutrition Handbook published on the Infonet.
- 2. **Orders** are automatically cancelled when a patient undergoes surgery or is transferred from one level of care to another. It is required that new orders <u>must</u> be written. "Resume prior orders" or similar orders are NOT permitted.
- 3. **Ziprasidone** (Geodon®) Intramuscular administration automatically stopped after three (3) days.

CLINICAL RESEARCH SERVICE

June M. McAdams, Pharm.D.,CCRC (244-3228) Elaine Poon, Pharm.D. (244-6398)

Coordination and assistance in the management of Phase II, III and IV clinical drug research.

PHYSICIAN ORDERS (MEC Policy MS-05-005)

All patients admitted to SHANDS Jacksonville must have admitting orders written by a Medical Staff member (Practitioner) or Resident.* A Practitioner, Resident, Certified Registered Nurse Anesthetist (CRNA), Advanced Registered Nurse Practitioner (ARNP), or a Physician Assistant (PA) may order for medications, treatments, diagnostic procedures, and tests. The supervising physician must countersign PA orders within three (3) days. ARNPs may independently order physical therapy, occupational therapy, diagnostic tests, and medications (excluding controlled substances). ARNP orders do not require countersignature. Orders must be legibly written on the physician's order sheet and conform to the approved use of abbreviations, dated, signed, and contain the individual's title and computer number.**

Telephone orders from prescribers are discouraged. Verbal orders are only given to and received during emergent situations or during sterile procedures where ungloving is impractical. These orders shall be recorded at the time it is given on the physician order form indicating, at minimum, the date and time received, name of the patient, name of the prescriber and computer number, how the order was given (i.e., telephone or verbally), and read back to the prescriber to verify the accuracy of the transcription. The order shall be countersigned and dated and timed within 48 hours with the exception of the Transitional Care Unit.

*Resident orders must comply with departmental supervision protocols. **Computer number is a unique identifying number issued to members of the Medical Staff and residents upon appointment.

DRUG INFORMATION SERVICE

Bernadette Belgado, Pharm.D. Manager, Therapeutic Policy (244-6399)

Drug Formulary - A strict hospital-wide formulary system is approved and maintained by the Executive Committee of the medical staff through the Pharmacy and Therapeutics Committee. Only drugs on the formulary are stocked by the pharmacy. Medication orders should be limited to formulary items. Non-formulary medications can be dispensed by the pharmacist only after consultation with the prescriber and may result in delay of therapy. Non-formulary/DO NOT stock medications will not be obtained for use in the hospital because formulary alternatives and/or therapeutic substitutions are available. Formulary status of drugs can be obtained from the Infonet, the patient care computer system or from any pharmacist. Practitioners are notified of new formulary items and criteria for the use of medications through the DRUG UPDATE, the Pharmacy and Therapeutics Committee newsletter.

In accordance with Medical Staff Policy, **drug names are not to be abbreviated** when prescribing/ordering to minimize potential for medication errors.