Sample Medication Plan

**For \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Health Department**

**Every Local Health Department should have in place a medication plan, in accordance with** [KRS 212.275](http://www.lrc.ky.gov/Statutes/statute.aspx?id=8597)

The \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Health Department will only prescribe medications that are listed in the [Core Clinical Services Guide](https://chfs.ky.gov/agencies/dph/dpqi/hcab/Pages/ccs-guide.aspx) (**CCSG)** and any additional in-house medications specific to \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Health Department listed in this medication plan. The generic equivalent of these medications may be prescribed when available. Prescriptions for these medications will be written by a MD, PA, or APRN, per collaborative practice agreement.

Prescriptions may be obtained in writing or per telephone order. (**Review Policy for Telephone/Verbal Orders; Forms and Teaching Sheet in the CCSG**).

The Nurse Administrator will be responsible for purchasing all medications.

Medications will be stored in a secure cabinet/room. They will be stored within the appropriate temperature range as recommended by the manufacturer. Refrigerators storing medications will have temperatures monitored daily.

A monthly inventory will be done on all medications in the Health Department. Stock will be rotated so that medications will not expire before use. In the event the inventory does not balance, the Director of Nursing will be notified and an incident report will be completed.

Emergency resuscitative drugs, supplies, and equipment appropriate to services will be available. Emergency drugs will be checked monthly (**Review CCSG Emergency Protocol**) and recorded on the inventory list kept with the supplies.

Medications that are listed in the CCSG will be dispensed and or administered by RN’s, APRN’s, PA’s, or physicians.

Medications must be packaged, labeled and recorded according to Pharmacy Law. Pharmacy labeling is an FDA requirement (therefore regulations will not be found in Kentucky Law documents). The requirements for proper labeling of medications to be dispensed include:

* Patient’s name
* Date
* Name of provider prescribing medication
* Name of medication being dispensed
* Specific instructions to patient for proper usage (example: take 1 tablet every 12 hours)
* Quantity of pills/medication being dispensed
* Name and telephone number of the facility

Before administration/dispensing of medications, patients will be assessed for contraindications, allergies and side effects.

Patients will be educated per appropriate use of dispensed medication and assessed for understanding and compliance.

Prescribed and over-the-counter medications that are not listed in the CCSG may be administered by RNs in the school setting.

These prescribed medications must be sent to the school in the original labeled container and the label shall include: name and address of the pharmacy, name of the patient, name of the prescribing practitioner, date the prescription was dispensed, expiration date of the medication, name of the medication, dosage and strength of medication, route of administration and frequency of medication.

Care will be taken to assure medications are administered per right route, right dose, right medication, right time and right patient.

Medication errors will be reported to the Director of Nursing as soon as the error is discovered. Appropriate action will be taken to assess patient for side effects related to this error. Medical referral will be made when necessary. An incident report will be completed.

Medications may be delivered by unlicensed personnel after being properly dispensed by appropriate personnel. These clients must first be assessed and educated about the proper use of the medication by licensed staff. DOT medications for treatment of tuberculosis may be delivered in this manner. See TB section of the CCSG for DOT guidelines.

Medications for the treatment of a patient with tuberculosis may be prescribed by a private practitioner who is neither contracted nor on staff provided it follows CDC recommendations.

Medications such as those prescribed for treatment of tuberculosis must have dosage calculated for age and weight. The dosage change will be calculated by the prescribing practitioner.

The \_\_\_\_\_\_\_\_\_\_\_\_\_Health Department will administer prophylactic medication, vaccine, or immune globulin, provided it is conformed to CDC recommendations, on prescription of a practitioner who is neither staff nor under contract to contacts of the some or all of the following diseases: (at the discernment of individual LHDs).

All medication given must be documented in the patient’s medical record. Medication that is refused or omitted must be documented also.

In the event that a patient cannot swallow a tablet or capsule, the prescribing practitioner or our board pharmacist will be consulted before crushing or giving any medications with food.

Medications or devices prescribed for the purpose of causing an abortion (as defined in [KRS 311.720(1)](http://www.lrc.ky.gov/Statutes/statute.aspx?id=46069)) will **not** be dispensed.

Our board pharmacist may be consulted at any time there is a question concerning medication information for patient education, such as drug interactions.

This Medication Plan has been reviewed and approved by:

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_

Pharmacist Date

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_

Medical Director Date

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_

LHD Director Date

In accordance with KRS 212.275, in the event that a local health department consults with a pharmacist licensed pursuant to KRS 315.030, document the consultation below (include name of pharmacist consulted and dates consultation occurred)

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