

## 201 PHARMACY SERVICES

The following requirements must be met:(3-17-22)

01.Pharmacy Service. That each SNF has a written agreement with a pharmacist licensed by the state of Idaho to direct, supervise, and be responsible for pharmacy service in the facility and for coordinating services when more than one (1) supplier of medications is utilized by the facility.(3-17-22)

a.Medications are administered to residents of the SNF only on the order of a person authorized by law in Idaho to prescribe medications. This order is recorded on the resident?s medical record, dated and signed by the ordering physician, dentist or nurse practitioner.(3-17-22)

b.All telephone and verbal orders are taken by licensed nurses, pharmacists and physicians only, and recorded on the resident?s clinical record, dated and signed by the person taking the order. Telephone and verbal orders are countersigned by the ordering physician, dentist or nurse practitioner within seven (7) days.(3-17-22)

c.No person other than licensed nursing personnel and physicians administer medications. This does not include execution of duties of inhalation therapists as ordered by the attending physician.(3-17-22)

f.All medications are labeled with the original prescription legend including the name and address of the pharmacy, resident?s name, physician?s name, prescription number, original date and refill date, dosage unit, number of dosage units, and instructions for use and drug name. (Exception: See Unit Dose System.)(3-17-22)

g.No alteration or replacement of original prescription legend is allowed.(3-17-22)

h.Prescription renewal or refill is made only under physician?s, dentist?s, or nurse practitioner?s authorization.(3-17-22)

i.Drugs dispensed meet the standards established by the United States Pharmacopeia, the National Formulary, New Drugs, the Idaho Board of Pharmacy, and the U.S. Food and Drug Administration.(3-17-22)

j.All medications in the facility are maintained in a locked cabinet with the key for the lock carried only by licensed nursing personnel and/or the pharmacist.(3-17-22)

k.Poisons and toxic chemicals are stored in separate locked areas apart from medications. (3-17-22)

03.Record of Medications.(3-17-22)

a.An accurate and complete record of all medication given, both prescription and nonprescription, is recorded in the resident?s chart. The record includes the time given, the medication given, date, dosage, method of administration, and the name and professional designation (R.N., L.P.N.) of the person preparing and administering the medication. The first and last name initials may be used if identified fully elsewhere in the medical record.(3-17-22)

c.Reasons for administration of a PRN medication and the resident?s response to the medication are documented in the nurse?s notes.(3-17-22)

Section 202 Page 31

04.Unit Dose Pharmacy. That a unit dose pharmacy system may be provided in a SNF as the drug distribution system under the following rules and regulations.(3-17-22)

a.All residents of the facility are served by the unit dose system.(3-17-22)

b.All medications distributed to the residents are under the unit dose system, if they are prepared and available in unit dose.(3-17-22)

c.The unit dose system is on a signed, written agreement basis between the facility and the pharmacist. If the facility employs a pharmacist to operate its own in-house pharmacy, a signed, written agreement is not necessary.(3-17-22)

d.All medications are packaged by individual unit dose, and labeled with drug (proprietary and/or generic) name, unit of dose, and lot identification number or date packaged, and such other rules that may be promulgated by the Board of Pharmacy. The pharmacist maintains a log identifying the drug lot number by date packaged.(3-17-22)

e.The pharmacist (or the facility) provides suitable drug-distribution cabinets that can be locked, or in lieu of a locked cabinet, medications are stored in a room that can be locked. Safe, orderly transport of the drug distribution cabinets are assured by the pharmacist.(3-17-22)

f.A direct copy of all medication orders from the resident?s chart are supplied to the pharmacist in a timely manner so that they can maintain each individual resident?s medication profile in the pharmacy from which they fill each resident?s twenty-four (24) hour medication orders.(3-17-22)

g. The pharmacist is responsible to see that each individual resident's medication drawer is filled from the drug distribution cabinet each twenty-four (24) hours from the resident's medication profile; records individual doses not administered from returned sets of drawers; indicates the reason the medication was not administered; and records medications supplied for the next twenty-four (24) hour period. (3-17-22)

h. Designated nursing staff check each resident's medication drawer contents against their medication profile prior to distribution to the resident. (3-17-22)

i. The unit dose system is an alternate to packaging and labeling requirements and does not preclude the facility from meeting all other requirements of Section 201. (3-17-22)

05. Customized Medication Packaging. That the packaging of medications commonly referred to as "blister paks," "punch cards" and "bingo cards" may be utilized by the facility provided that measures of accountability, safety and sanitation are employed. Customized packaging is not to be interpreted to mean a unit dose system. All other requirements of Section 201 applies except for alternate packaging systems. (3-17-22)