FLOYD MEDICAL CENTER **POLICY AND PROCEDURE MANUAL PATIENT CARE SERVICES**



TITLE: High Alert Medications	Policy No.: PCS-06-010
Purpose: To establish safeguards for medications that are considered "High Alert" for patient safety.	Developed Date: 8/05 Review Date: 11/08, 5/09, 12/10, 2/18 Revised Date: 4/07. 2/10, 2/12, 11/13, 2/15, 4/15, 5/15, 11/15, 2/16, 2/19
Policy: Floyd will manage administration of "High Alert" medications according to established standards of practice as outlined within this document to ensure safety of administration.	Review Responsibility: Director of Pharmacy; Pharmacy and Therapeutics Committee; Executive VP Chief of Patient Services/CNO; Nursing Leadership; Executive Staff
Reference Standards: MM.01.01.03	

Omnicell cabinet.

Procedure:	
ACTIONS	KEY POINTS
 A list of "High Alert" medications will be identified by the organization and reviewed annually by the Pharmacy and Therapeutics Committee for additions and/or deletions. 	This list will be composed of medications determined to be high risk or problem prone at Floyd.
 The list of "High Alert" medications will be posted on GreenLink (Floyd's Intranet Site) and available to all employees. 	 GreenLink > Clinical Tools > Medication Resources > Floyd Resources > High Alert Medications.
 Alerts are built into the Pharmacy Computer system to flag upon order entry and verification of any "High Alert" medication order. 	3. This will alert the Pharmacy staff that a "High Alert" medication is being used.
 Alerts will also be included to print on the MAR for each "High Alert" medication. 	This will alert the Clinical staff that a "High Alert" medication is being used.
Alerts will be included to print on the labels for each "High Alert" medication.	 This will alert Pharmacy and Clinical staff that a "High Alert" medication is being used.
6. Alerts will be included to flag on the Omnicell screen on any of these medications that are stored in the	6. This will alert Nursing staff that a High Alert medication has been selected.

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ACTIONS	KEY POINTS
7. High Alert medications stored as unit stock not in their own specific bins in Omnicell will be stored in "high alert" bins. (i.e. refrigerated items)	
8. High Alert medications stored in the Pharmacy will be stored in "high alert" bins, segregated, or have a high alert sticker denoting their high alert status.	
 High Alert medications that are IV infusions will be built in the Hospira Smart Pump system with "Hard Stop" limits. 	
 10. The nurse will take time out to double check with another nurse to independently verify and document drug, dosage, and route before each administration of the following medications: Argatroban Chemotherapeutic Medications Heparin Intrathecal Medications Insulin Medications 	10. This will ensure that the nurse is placed on high alert in responsiveness for taking the time to verify medications with another nurse to ensure safety in administration. Documentation of this double check will be noted on the MAR.

HIGH-ALERT MEDICATIONS

All Chemotherapeutic Agents

All Epidural and Intrathecal Agents

Aggrastat

Andexxa

Argatroban injection

Atracurium

Corvert

Coumadin

Eliquis

Epinephrine injection

Eptifibatide injection

Esmolol injection

Etomidate injection

Fentanyl Injection (For Epidural, PCA)

Heparin injection

Hydromorphone (For Epidural, PCA)

Hypertonic Sodium Chloride Injection (> 0.9%)

Insulin injection

Ketamine

Lovenox

Morphine injection (For Epidural, PCA, or Moderate Sedation)

Meperidine injection (For PCA or Moderate Sedation)

Norepinephrine injection

Phenylephrine injection

Potassium Chloride injection (concentrated vials)

Potassium Phosphate injection (concentrated vials)

Pradaxa

Praxbind

Savaysa

Succinylcholine

Vecuronium

Xarelto