SECTION XVIII: QUALITY ASSURANCE
CHAPTER 18.1: CONTINUOUS QUALITY IMPROVEMENT

POLICY: As part of the hospital's continuous quality improvement program the quality and appropriateness of patient care services provided by the pharmacy are monitored and evaluated, and identified problems are resolved.

PROCEDURE:
1. The Pharmacy Supervisor or designee shall establish and implement an ongoing, planned, and systematic monitoring and evaluation process to document the pharmacy's continuous quality improvement activities. The program will be reviewed at least annually and revisions made as necessary. The objective of this program is to improve patient care.

2. The scope of the CQI process includes major clinical and operational functions with attention to high volume, high risk, or problem prone aspects of patient care.

   A. Monitoring activities will include those major clinical activities that most affect the quality of patient care.
   B. Written criteria (indicators) for each major activity will be developed to identify optimal standards of care.
   C. Data pertaining to the indicators will be collected and comparison of the data with the pre-established criteria will be conducted at regular intervals.
   D. For all criteria that do not perform up to standard an action plan will be implemented and performance improvement monitored.

3. A quarterly report is sent to the Pharmacy Manager showing indicator performance and action plans for criteria that do not perform up to standard.

4. An evaluation of the departmental I.O.P. plan is sent to the Pharmacy Manager including an assessment of performance and recommendations for improvement annually.
SECTION XIX
PYXIS MEDICATION SYSTEM
CHAPTER XIX:  PYXIS MEDICATION SYSTEM

SECTION 19.1:  Reserved for future use
CHAPTER XIX:          PYXIS MEDICATION SYSTEM
SECTION 19.2:           PROCEDURE FOR USING LEXI-COMP

(Authorized Alternate Method for Meeting the Safety Standards for Medication Administration)

The station is equipped with two Lexi-Comp applications – the Lexi-Comp Information database and Lexi-Comp Medication Information tool.

From the main menu, tap the small red icon (Pyxis symbol) located on the upper left side of the screen. A drop-down box will show up.

Inside the drop-down box, you will see the word, “Lexi-Comp”. Tap on this word.

On the bottom of the main screen, the words “med list” will appear. Tap on the word “med list”. Wait a few seconds and then all the medications included in the nursing drug database will appear in alphabetical order on the left side of the screen.

In order to find information about the medication you are seeking, either scroll down using the scroll bar on the right side of the screen or type in the first 3 or 4 letters of the medication name and the system will automatically advance to the name of the med closest to what you typed in. Once you find the correct medication name, tap on it. This will automatically advance you to the medication along with its contents.

Once you have entered the system and identified the medication you want, the main categories are listed on the left side of the screen. You can scroll down for additional categories on the main screen. After you find the category you are looking for, just tap on it and the information you need will show up on the right side of the screen. You can also scroll down on the right side of the screen for additional categories.

Example: If you are looking for information about dosing for the elderly, just tap on “Dosing-Elderly” on the left side of the screen and, within seconds, this will appear on the right side of the screen containing clinical information.

In order to comply with The Joint Commission safety standards for administration of medications, several categories in the "Drug Information Database for Nursing" must be selected and reviewed prior to
writing any new medication orders for patients when the Pharmacy is closed (the Hospital's authorized alternate method for patient medication safety checks). This standard also applies for patients who are newly admitted and who will require medications prior to the standard pharmacist review.

The categories in the "Drug Information Database for Nursing" which physicians must review are:

1. Dosing-Adults
2. Dosing-Elderly (if 65 years of age or older)
3. Drug interactions- increased effect/toxicity
4. Drug interactions- decreased effect
5. Warnings/precautions
6. Contraindications
7. Dosing-Renal impairment
8. Dietary Considerations
9. Dosing-Hepatic impairment
10. Special Geriatric Considerations
11. Ethanol/Nutrition/Herb Interactions

Each new medication must be checked using this methodology.

A Progress Note must be written, indicating that the Lexi-Comp software was utilized for the patient medication safety check (authorized alternate method) for each new medication ordered.

To print off any clinical information off the Lexi-Comp screen, hit the key on the top right side of the keyboard that says, “Prt sc” (which stands for print screen). If you want more information printed than what is on the screen, you will have to scroll down and hit the “Prt sc” again. The paper that it prints to is thermal paper so if you want to keep the information you have printed for an extended period of time, then it is recommended that you photocopy it as the thermal paper fades with time.
CHAPTER XIX: PYXIS MEDICATION SYSTEM
SECTION 19.3: PERFORMANCE PROCEDURES WITH PYXIS INTERFACE

Policy: Orders entered into the Performance System will interface with the Pyxis System and be processed in the most effective manner to ensure accuracy of administration of medications to patients.

Procedure:

1. All medications entered into the Performance System for patients will have a pharmacist review for safety of administration of the medications for each patient. Safety checks include:
   a. Therapeutic duplication
   b. Appropriateness of drug, dose, frequency, and route of administration
   c. Medication allergies or sensitivities
   d. Real or potential significant drug-drug, drug-food, drug-lab, and drug-disease interactions
   e. Contraindications to use
   f. Organizational criteria for use
   g. Other relevant criteria for use

2. In the event a Pharmacist is not on duty to perform this safety check then the physician on call who is ordering a new medication will perform this safety check using the Lexi-Comp Nursing Drug Data Base which is updated quarterly and located on each Pyxis MedStation. (see Section 19, Chapter 19.2) A licensed Pharmacist will review each new order on the next working day for the above items (a through i) as they enter the orders into Performance. Anything found to be a problem would be reported to the physician in charge of the patient or physician on call immediately.

3. Entering orders into Performance requires the following:
   a. Selecting the medication with the proper med code:
      1. Select from the STOCKED LIST first unless the medication is not listed on the stocked list and is
currently stored in the pharmacy. If so, then use the ALL DRUGS LIST.
2. Select the code with the U/D designation.
3. If you do not have a U/D designation, select the code with the PP designation.
4. If both the U/D and PP designations are not available, select the only code that is there or the one with the B designation.
b. If the medication is not listed at all in Performance, the Pharmacy Supervisor or designee must enter it in. If the Pharmacy Supervisor or designee is not available, then the pharmacist can enter it under “Patients Own Med” with the name of the med in the remarks area until the medication can be entered into Performance. They will have to notify the designated nursing unit that this medication will not show up on the MedStation until the next business day. Nursing will transcribe it on the MAR and leave a note so other shifts are aware. The Pharmacist can still do the safety check using the Micromedex, Healthcare Series software.
c. If a medication is listed in Performance and the nursing staff call to say that the order does not show up at the MedStation or that “UNKNOWN” shows up at the MedStation, the first thing to look at would be the patient profile (under system setup) at the console. If the med is not listed, it must be entered into the Pyxis System by the Pharmacy Supervisor or designee.
4. Any late day orders that pharmacists enter for a patient and the medication has not yet been loaded at the MedStation, will require the pharmacist to print a label and the quantity of meds to be filled and delivered to the MedStation and placed in a patient specific drawer. On the next business day, the medications will be loaded by the pharmacy technician.
5. Monitoring Inventory at MedStations
   a. Inventory levels for medications at the MedStation should be established based on patient utilization and adjusted as orders change. This should be evaluated for each new order to limit stock-outs on the unit. This is done as follows:
      1. Sign in at the console and select “inventory”, then select the unit, select the medication name, click on “edit pocket”, change the numbers in either the “max” or “min” to reflect the change. Save the information.
   b. If you are unsure how to establish the “min” or “max” level then you can check the console for this number. This is done by: signing into the
console, select reports, click on inventory, select all orders by meds, select the MedStation and medication you want to edit. Preview/print this out. A list of names along with the quantity can be viewed so that you can add up your daily utilization.

1. If you want to print the entire inventory for a MedStation, log onto the console, select reports, run reports, select inventory reports, select hospital wide med summary, select the MedStation you want, all medications and all classes. Then print it out.

6. Selecting the correct frequency: This must be done each time for each new order so that the meds at the MedStation can be removed “by time”.
   1. Select the patient name in performance to enter a new order.
   2. When you get to the “frequency” section, type in time(s) you want i.e. 88 and then HIT the F4 key on the keyboard. A list of frequencies will show up. Find the one you want, i.e. 88, select and hit enter. Always use times when entering frequencies, i.e. never BID, TID, QID, etc.
   3. Finish entering the order.
   4. Hit F9 to complete.
CHAPTER XIX: PYXIS MEDICATION SYSTEM
SECTION: 19.4  Reserved for future use
At WFH, Pharmacy staff will use the console and the Pyxis MedStation 4000 for dispensing medications to each nursing unit. This system provides a safe and efficient process for dispensing and facilitates the pharmacist review of physician’s order prior to administration of medication to patients.

PROCEDURE:

A. Signing onto the System

1. The first time you log into the system, you will sign on with your assigned state I.D. number (payroll number) and hit the “enter” key. Do not use the “tab” key, as it will not change your screen.

2. A message will appear stating; “your Bio ID is not on record”. Would you like to register?” Choose “Yes”.

3. Instructions will appear and after reading them, click on the “scan” button on the screen. You will be prompted to enter your ID (state #) and password (which will be “new” until you change it).

4. The screen will prompt you to “place” your finger and when to “remove” your finger. It will take four scans.

5. Your index finger is recommended for use during the “scanning” phase. If for some reason your finger doesn’t scan successfully it can be for the following reasons:
   a. Not covering the entire scanner lens with your index finger.
   b. Fingers are too cold—rub together to warm them.
   c. Apply too much or too little pressure on the scanner.
d. Having a bandage on your finger.

6. Once you are scanned successfully you will then be prompted to change “your password”. Enter in a password, which must be at least five characters long. Your password will only be used in a situation when the Bio ID fails to function.

7. The next time you log into the system you will enter your ID (state ID#) and then place your finger on the scanner.

B Main Menu
1. Pharmacy Technicians, Pharmacists and nursing staff will have access to additional screens, which includes the patients and their profiles. This will allow them to review any orders or patient clinical information, which crossed the interface from Performance into Pyxis.

C. Refill of Medications at the MedStation
1. Batch reports are printed daily at the console in the pharmacy.

2. Obtain a copy of the refill-pick list prior to refilling so you know what each unit needs. A print out contains the medication name and brand name. Select the medications needed for each unit.

3. After the medications are processed in the pharmacy, they can be refilled in the MedStation on the designated unit.

4. Once you arrive at the designated MedStation, from the main menu, select the “refill” icon and tap on it. On the bottom of the screen are two radio buttons that allow you to select medication for refill by:
   a. all medication
   b. medication at or below minimal
   Hit “scan barcode” and scan the barcode on the medication.

5. The drawer will pop open and the screen will tell you which drawer number and pocket number you are to count or scan to. The screen also provides you
with a beginning count and asks you if this is correct. Touch either “yes” or “no”. Count the medications and enter the correct number.

6. After establishing a beginning count, the refill quantity will appear on the screen. Adjust quantity if what is on the barcode does not match the actual count.

7. Following this, you will be asked to enter the EARLIEST EXPIRATION DATE. This will keep track of all your out dated medications for you. Enter correct date each time. Close the drawer as prompted on the screen.

8. When refilling medication make sure you do not OVERFILL these drawers as they will cause drawer failures. Single Cubie drawers on average can hold up to thirty tablets but it depends on their size. Do not push them in a drawer to fit. You can easily reselect a bigger drawer or use two different drawers.

9. Do make sure that you check the medication you are refilling with the MedStation screen. Compare the name of the medication you are refilling with the MedStation screen and with the refill list you used in the pharmacy.

D. Loading Medication at the MedStation (Back-Up Procedure Without Barcodes)
1. Obtain your loading list from the console prior to and leaving the pharmacy so that you know which medications need to be added at the MedStation.

2. The loading icon is used for loading NEW medications at this MedStation. Tap on the “Load” icon.

3. Tap on “Assign and Load” on the bottom of the screen. A list of all the medications on the hospital formulary will appear.
   a. Select the medication you are loading by scrolling down or
   b. Select the medication you are loading by typing the first letter of the name of the medication and you will automatically be advanced to that letter.
   c. Both of these can be selected by brand/generic name. Tap on radio button on bottom of the screen and make sure it is green.
   d. In the event the list contains two medications with the same name, select the medication to load
with med ID code that corresponds to the code on your “not loaded” bulletin.

4. After selecting the medication, tap on it and the next screen will tell you which drawers are empty
   a. You can select a matrix drawer, half height pockets, carousel etc. The drawer number and pocket number will be documented on the screen. Select the correct size drawer and pocket according to the number and size of the medication you are adding.
   b. The controls will be placed in carousel drawer.
   c. Most patient specific items will go into previously assigned patient drawers, which will be Matrix drawers.

5. After selecting the drawer; the next screen will require you to enter the following:
   a. maximum number
   b. minimum number
   c. current number
   d. Click on “outdate tracking” so that the expiration dates can be tracked electronically.
   e. Click on standard tracking also

6. When completed, click on “Load” and drawer will open. Click on “Accept” for the quantity you are entering. Enter the earliest expiration date and tap on “Accept”. Close drawer as prompted after this.

E. Inventory
1. Medications at each MedStation can be inventoried by:
   a. all medications
   b. by medication name
   c. medication class
   d. by drawer

2. If you select to inventory the entire MedStation, you are given a warning box, which states: Inventory by drawer may take several minutes (No chance exit/cancel). Are you sure yes/no?
   a. If you select “yes”, and you start the inventory, you can still hit cancel and abort.
b. If you select by medication name, you can tap on those medication you want to inventory only. The screen will turn blue. Tap on “inventory selection” next. The following screen will give you the “beginning count”. If you disagree with the beginning count just type in the correct number and hit “Accept”.

F. Unload Menu
1. To unload any medications tap on the “unload menu” on the main screen. On the next screen, tap on “unload” you will be at a screen that says: “this function will require you to unload all medications from these selected pockets. These medications are not to be used for patient care”. Select OK.
Then another message may show up stating: “These meds contain orders, Do you still want to unload?”

2. You can then unload by specific medication name. Tap on one medication name and it will turn blue. Select “unload selection”. The quantity to be removed will appear. You can change this amount if it is incorrect. The screen will tell you which drawer and pocket number the medication is in. Select “accept” and drawer opens. Remove the medication as prompted. However, any medications removed this way where the inventory does not match what is in the drawer will automatically be resolved by the system but also create a discrepancy. This will impact any reports for “discrepancies”.

3. The most accurate way to remove medications out of the pyxis medstation when you are not unloading is to “outdate” the quantity you want to remove.

G. Reports Menu
1. You can print any reports listed under reports menu you need. Most of these an also be printed at the console in the pharmacy, including what medications were removed from the medstation in the absence of a pharmacist, or on off hours.

H. User Menu
1. Under user menu, you can change your password if you want and select options in the “user preference menu”.

2. Select the “user preference menu”;
a. Select “list preferences” which also allows you to set each MedStation by your preference. You can select medication list by generic name or brand name, refill lists by all medications or those at a below minimum and inventory list by drawer, medication or class.

H. Console Considerations
1. You can pend your medication at the console and it will be ready to load at the MedStation when you arrive.

2. Sign onto the console. Select the Inventory on top of the screen. Select the unit, then hit select and it will bring up all the meds on that unit. The select, “assign new medication” and the hospital formulary will appear. Select the medication you want by either brand or generic name. Then highlight the med and hit select. After this you must select a drawer you want to put it in such as a matrix, cubie etc. Identify the drawer and pocket. Hit select and enter max, min and quantity you’re putting in. Click on “Outdate tracking” and “Standard tracking” and then hit save.

When you get to the designated MedStation, select” load” icon and the medication you pended should show up.

Select them and assign accordingly.

I. Moving medications from drawer to drawer, cubie to cubie, or to a different pocket in same drawer

1. First you have to “unload” the medication from the drawer/cubie it is currently in. Refer to the “unload section F”.
2. After this, select the “assign and load” icon to load the medication in a new drawer/cubie. Identify which drawer/cubie you want to put them in and follow the steps for “load a new medication” under section D.

J. Switching entire Matrix Drawers:
1. Select the “unload menu” on the main menu.
2. Tap onto the “unload icon” and when the screen displays a message, select “OK”.
3. Tap on “select by drawer” at bottom of the screen.
4. Touch on the drawer you want to switch with.
5. Select the “unload all meds” icon.
6. When the drawers are open, remove the plastic container with the meds in them and put them into the newly assigned drawer. Take out the plastic container in this new drawer first.
7. Following this, all the medications loaded into the newly assigned drawer must be entered with the maximum number, minimum number and current number you are loading. You will also be asked for the expiration dates so enter the earliest date listed on the medication packets.
8. Upon completing this, you can run a report to verify or you can go into inventory and select one of the meds you unloaded and reloaded to ensure that the correct drawer opens up.

K. Calibrating the MedStations
1. Once the technicians signs in, from the main menu they must select the “system menu”. Then select “system configuration” on the next screen.
2. Touch the “Calibrate Screen” icon on the bottom of the screen.
3. You will be prompted to follow some steps; ensure that the cursor will follow your finger. If it does, then you can exit the program.

L. Outdated Medications
1. Every time a pharmacy technicians signs onto a MedStation, they should check the “outdated icon”. If medication is outdated or projected to be outdated soon they should remove it from the drawer.
2. Once the medication is removed, you will enter the earliest expiration date of the medications that remain in the drawer.
3. If no medications are found in the drawer, then you will need to check the inventory list to see if it needs to be refilled.
PHARMACY POLICY AND PROCEDURE MANUAL

SECTION XIX:  PYXIS MEDICATION SYSTEM

CHAPTER: 19.6  PYXIS AND PHARMACY TECHNICIAN

WORKFLOW

POLICY:  With the inception of the Pyxis Automated Medication System, Medstation 4000, it is the goal of the pharmacy staff to have the information flow from the reports obtained at the console into the everyday work flow of their respective duties.

Procedure:

1. A pharmacy technician for assigned units on a daily basis will see if any “Ordered Meds Not Loaded” bulletins need to be filled/addressed immediately, i.e. medications that need to be loaded for the 8:00am med pass that morning.
   a. Any of these notices can be printed out by signing in, go into run reports, select “system reports”, scroll down to XQ reports and click on it. Then select the unit, date etc to be printed out.
   b. You can also print out the items listed by clicking on the “Print screen” on the keyboard.
   c. If any drawers are listed as failure, maintenance required etc, then this should be brought to the attention of the appropriate pharmacy technician to view when they go to the unit, as long as it does not require immediate attention. This should then be brought to the attention of the pyxis support technician to decide whether a pyxis field technician should be sent out.

2. Daily batch reports will be in the printer and should be removed by this technician, separated and sorted by building/ward.
   a. Daily batch reports include: daily refill list for non-controlled medication, and a bed list report for the pharmacists. This bed report list should be left on the pharmacists respective desks. The other batch lists should be used by this technician for filling the medication in correspondence with the ParX handheld list. The batch list may not include every medication below minimum, however the ParX will since it is in real time. See Chapter 19.10.
b. Once a pharmacy technician fills each ward, the filled bin with the ward will then be checked for accuracy by the respective pharmacist. The pharmacy technician assigned to the building will deliver the meds to the unit, which will serve as another check.

3. Once the pharmacy technician is ready to leave the pharmacy, they should check the console one more time to make sure that no additional drawers/cubies have failed. Nurses on the units can not remove cubies that have failed or require replacements. If another unit in their area shows up as failed, they can print it out and take the bulletin with them. The pharmacy technician should prioritize filling the units that have “failed cubies/drawers” so that nurses can expedite the removal of required medication.

4. After the medications are filled at the units, the pharmacy technicians will return to the pharmacy and look for any bulletins either in the console printer or their respective building bins. Any new orders for medications that are not stocked on a unit will be printed out on a bulletin. This bulletin then will alert the technician that this medication is needed on one of their units.
   a. Throughout the workday, they will need to keep checking the console and their respective bins for other new orders that have not been loaded.

5. The “weekday narcotic report” will be printed daily and the “weekend narcotic report” is printed on Mondays. These forms will be reviewed daily by the pharmacy technician assigned to controls on a daily basis on Monday through Friday. If this person is off, another technician will be assigned to do this or will be done the next day by the drug control technician.
   a. Upon investigation of these reports, if additional reports are needed, then the pharmacy technician can run the discrepancy report for the particular medication, time and unit.
   b. After evaluating these reports, the forms will be reviewed by the pharmacy supervisor and signed off with his/her approval. Any discrepancies requiring reporting to drug control will be done by the pharmacy supervisor or his/her designee.

6. At 3:30 p.m., another patient bed list prints out for the second shift pharmacist.
WHITING FORENSIC HOSPITAL
PHARMACY POLICY AND PROCEDURE MANUAL

SECTION XIX:  PYXIS MEDICATION SYSTEM
CHAPTER: 19.8  MOVING A SINGLE UNIT TO ANOTHER UNIT WITH ALL THE SAME PATIENTS

Policy: When an entire unit is moving to another unit, two changes have to occur at the Workstation so that information can be forward to the new unit. All discrepancies on the unit that is moving must be resolved prior to initiating any of these changes.

Procedure:

A. Workstation Changes
1. Sign into the workstation and click on “system set up”.
2. Select “devices” and click on it.
3. Hi-lite the unit that is moving by clicking on the name and it will turn blue.
4. Select the “change name” on the lower left side of the screen. Make sure all discrepancies for this unit have already been resolved. Select “yes”.
5. Type in the new name of the unit and then close out.

B. Other changes at the workstation
1. Click onto “system set up” and select, “area”.
2. Hi-lite the unit on the left side and make sure it shows up on the box just to the right of it.
3. To add a unit, select the unit from the box on the right side of the screen and click on “add” in the middle of the screen. The name will then be added to the box on the far right side of the screen. If you think you’ll be using this unit again in the future, just keep the old unit in the box on the far-left. If you are not going to use it again, you can remove it by clicking on the “remove” icon in the middle of the screen.

Prior to the move, communicate the move with the IT Department to make sure all network drops are completed; and the movers to make sure the LAN printer is set up to print patient profiles from the medstation.

C. MedStation/Console changes on the day of the Move
1. Go to console, select system set-up, select devices you want to move, and then select out of service.
2. Disconnect the cables on the MedStations and the refrigerator.
   Shut off the UPS and place on top of the MedStation.
   Move all MedStations and refrigerator to new unit.
3. Connect everything together on the new unit.
Policy: A single-column auxiliary Pyxis CII Safe will be used in the pharmacy to store all controlled substances that will facilitate the management of controls from the wholesaler to the point of administration. Signing into the CII Safe will be by Bio-ID.

Procedure:

A. Setting up the Main Menu for Daily Usage
   1. Sign into the system using your bio-id and click on the "toolbar button" on top.
   2. On the next screen, on the left side, select these items in this order: (they should then appear on the Right side of the screen once you click on the blue arrow pointing to the right).
      a. Send (1)
      b. Return med. (2)
      c. Receive (3)
      d. Expire (4)
      e. Prescription (5)
      f. MedStation autorestock (6)
      g. Narc-Vault Access Inventory (7, only if you have this privilege)
   3. Click on "save".
   4. When you go back to the main menu and each time you sign in, all of these 6 or 7 functions will appear on top automatically. You can have a maximum of 8.

B. Entering controlled medication into the Pyxis Safe from an outside vendor
   1. Sign into the system and select number 3 (RECEIVE). On the next screen, you will get a screen that says: "Acquisition Record".
   2. Add a medication to the system by typing in the first few letters of the medication name. You can arrow down with the down key on the keyboard or click on the screen where the drop box is for med name. Be sure to select the correct strength concurrently.
a. If the medication has NEVER been used before, you must request that a pharmacist with formulary privileges enter it before you search for it, as you can not type in the name yourself. It will need to be put in the pyxis console (workstation) first and then it can be added to the CII Safe formulary.

3. Type in the correct quantity received into the safe in the box that says “Acq. Qty(+)”.

4. The vendor name should automatically default unless it is a new one. To add a new vendor, tap on the box that says, “add vendor”. Fill in the fields it asks for i.e. vendor name, address, phone number, etc.

5. The invoice # is located on the vendor invoice.

6. Then click on the “green plus button” on the right side of the screen and the medication name, received quantity, vendor and invoice number will appear under the “selected items” box. If you entered the incorrect medication, quantity or anything else just click on the red minus button and start over again.

7. Different controls can be added on the same screen. Once you have entered the medication you are adding and have hit the green plus button, then go to the top of the screen and enter another medication. This can be repeated several times. All items to be added will appear under the “selected items box” on the screen. Once you have entered all of them, click on “save”.

8. After you have saved this information, the next screen to appear will ask you to scan the medication, the compartment number (which is the drawer number (1, 2, 3, or 4), the position number (which is the number located on the BIN in the safe), and the transaction quantity number will then show up on the screen. The door opens to place the medication in the correct bin; the screen will ask for the expiration date, type in date and hit accept. Then it will go to the next screen adding the received and current quantity together. Close the door and finish this process with all the medications you are entering. A print out will occur listing all the medication you entered, date, quantity etc. This sheet should be stored in the correct pharmacy binder.

C. Sending Controls to a nursing unit or other location

1. Sign into the system and select (SEND). Then you will be at the screen that says, “Send Meds Details Screen”.

2. Tap on the drop down box to select the correct unit. Tap on the unit so it is hi-lighted.

3. Under the medication name, type in the first few letters of the medication you want.
4. Tap on “send quantity” and type in the box the number of this specific medication you want to send to this unit. Click on the green plus button and the medication name, quantity, location will appear under the “send meds box”. If this is the only controlled substance, then hit “save”. If you need to send additional controlled substances, then repeat the above process and end it with clicking on “save”.

5. Once you have saved the above information, the door will pop open and you will be directed to the correct compartment and position. Remove the amount as stated on the screen. Check the medication name, strength and quantity in your hand with the computer screen to ensure accuracy. Follow this for removing all the medications listed. At the end, select “cancel” to exit this screen.

6. A report will print out of the medication removed. Save the print out in the correct pharmacy notebook.

7. Go to reports, review reports, select send meds. Put a check in the box of the user, a check in the box of the unit, and a check in the box for the med. Click save. Initial report and pharmacist must initial file in notebook.

8. If you have selected the wrong medication, after you have removed it, then you must use the return function to add it back to the inventory and re-send the correct medication. A barcode label will print out for scanning at the pyxis units.

9. If this is a new med to load, a Control Substance Disposition Sheet must accompany it for downtime purposes. The POUS is to be marked with a DT and filed appropriately.

D. Returning medication to the Pyxis Safe from a nursing unit

1. Sign onto the system and select (RETURN). Next the “Return Detail Screen” will appear.

2. Select the unit that it came from by typing on the drop down box. Select the medication name by typing in the first few letters of the medication name. You can arrow down until you locate the correct one.

3. Type in the quantity you are returning and hit the green plus button. More than one medication can be returned at once. Then it will show up in the button box called, “selected items”. Hit the “save” button and the door will pop open. Once you have returned it, hit “cancel” to exit out of the system.

E. Signing out of the Pyxis Safe

1. Every time you have completed your transaction in the Pyxis Safe, be sure to logout by clicking on the "Logout" key at
the top of the screen. This will ensure that no one else can process any transactions under your BioID.

F. Expired medications that have to be wasted from either the Pyxis Safe or from a nursing unit
   If wasting from a nursing unit, you must first “Return” it to stock, and then you can waste it by selecting “Expire, Waste, Recall” screen.
1. Sign into the system and tap on number 4 (EXPIRE). The following screen will be called, “Expire, Waste, Recall” screen.
2. Under the medication name, find the name of the medication that has to be wasted.
3. Then tap on the “Exp./waste/Recall Qty (-):” and type in the amount of this specific medication you are wasting.
4. Under the “reason” section, type in the reason it is being wasted i.e. damaged, out of date etc.
5. Click on the green plus button and the medication name exp./waste quantity and reason for wasting will appear in the “selected meds for exp./waste/recall box.
6. Wasting any controlled substances requires a witness so you either pend it and waste later or waste now with a witness.
   a. If no witness is around to witness your waste, Click on the box that says, “place in the pending destruction bin” so that a check mark appears and it will be highlighted in blue. Hit save and exit
   b. If you have a witness skip step (a) above and click on the “save” button. This will bring out the witness transaction screen. The witness will either type in ID and password or use the BioID. Then click on “OK”.
      The “confirm vault quantity screen then appears and the door pops open. The witness will count the medication and enter the amount in the “ending Qty Available Field”. Click on the “OK” button. If the number is incorrect, you have one more chance to recount and fix it. Press “cancel” to exit the system.
   c. When you procure a witness for destruction in letter a, sign into the system and click on the “administrative icon” on top of the main screen. Click on “meds pending destruction”. Find the correct med. and it will be hi-lighted in blue, type in qty destroyed and follow the rest of the steps mentioned in letter (b) for a witness. We do this for our pharmaceuticals return vendor EXP.
   d. All print outs from the above transactions must be saved in the appropriate pharmacy binder.

G. Filling of Prescriptions for LOA, TV, discharge etc
1. Obtain the label for the patient with a status change from the label printer.
2. Click on (RX) and then you will be at a screen called “Prescription”.
3. Type in the medication name with first few letters, type in quantity, Rx number, patient’s first and last name, MD last name and first name. If you don’t know the MD’s first name, you can type in Dr.
4. Click on the green plus button and the medication name will appear under the “prescribed Meds” box. This can be done for more than 1 medication at a time.
5. Be sure that you have clicked on the “none” box so that an expiration date can be attached to each label. No check mark should appear in this box for it to print out.
6. For a signature page to print, make sure the “print on save” has a check mark in it. This is the sheet the nurses can sign on the unit. Press save. Then the confirm vault QTY screen appears and you must count the med., enter the amount in the ending qty available field and press “OK”.
7. Make a copy of the signature sheet by pressing view, click on the patient name, uncheck “print label” and then hit reprint. Put this sheet in the bag with the control medication. This is for the nurse to sign when she dispenses this medication to the patient. The second copy is for the patient or guardian to sign.
8. If the patient returns from LOA/TV etc. with the control medication, and if not opened, then you have to “Return” it to inventory by: choosing the correct med, correct location, uncheck “return from pyxis” box, fill in correct quantity, hit the green plus button, hit save and then add the quantity to the already existing inventory.

H. Monthly Inventory as required or needed
1. A pharmacist and a pharmacy technician will monthly count the controls in the Pyxis Safe and in the designated refrigerator. This can be done more often if needed.
2. To perform an inventory on only one medication, select the “increase inventory” screen at the top of the main menu. Then select “Narc Vault Access/Inventory”. On the next screen, select “meds” under the select inventory type. Select the medication name under the “Med Details”, highlight it and you will then be prompted to which compartment and bin it is located in.
3. To perform the monthly inventory of all the meds, select “increase inventory” off the top, select “Narc Vault Access/Inventory” and at the next screen, select “compartment” under the inventory type.
4. Only one compartment can be counted at a time. After you finish counting each compartment, you must go back to step...
number 3 and enter in another compartment. All five compartments must be counted monthly.

5. Each time you count a medication, a screen asking for the expiration date will appear; if it is correct, select accept; if it is not correct, put in the correct date.

6. While performing the inventory now or at any time you are entering “ending quantity amounts”, if you for whatever reason you type in a number that does not match the quantity currently in the safe, you will get a message that says, “wrong vault Qty”. You will be given a second chance to re-count before a “discrepancy” occurs.

7. A print out of this inventory will be obtained and signed by the two people counting. A report for CII controlled substances will print out separately from CIII to CIV controlled substances. A copy will be retained in the correct pharmacy binder.

I. Discrepancies – resolving them
1. After you sign in, select the “administrative button”; select “Resolve Discrepancy Menu” off the drop down box. The next screen to appear will be the “Resolve Discrepancy” screen. Select “view” at the bottom of the screen; a list of discrepancies will show up.

2. At the next screen, select the medication that you want to resolve, hi-light it and click “ok”. Then type in the new quantity under “New Qty”. Then proceed to the section that states, “reason section” and type in why you had a discrepancy. You can only type in 50 characters here. Then select “ok”.

3. The following screen then appears which states, “Confirm, Vault Qty”. The compartment opens, count the meds and enter the number you counted in the “Ending Qty Available”. Press “ok”, “print on screen”, “save” and then “cancel”.

4. Take the print out and retain a copy for your records. If the discrepancy causes the count to be either under or over, you must notify your Pharmacy Supervisor/designee immediately. Additional instructions will be given to you at this time. This will require a witness.

5. A daily report prints out at midnight detailing all the activities that transpired through the CII safe. A second report is printed by the control drug pharmacy technician called the Pyxis vs. CII safe compare report which details if a particular medication was withdrawn from the safe but not delivered to the intended unit.

J. Discrepancies – reviewing resolved ones
1. Sign into the system and under the “administrative button”; select “Review Resolved Discrepancies Menu”. The “Review Discrepancy Resolution” screen will appear.
2. At this screen, select the dates you want to review in the “From” section to the “To” section. Then select the users individually or select “all” of them. Select the medication under the “Med Box” and press “Preview”, “Print” and then “Cancel”.

K. Auto-restocking of meds
1. Sign in; select the “Decrease Inventory/Medstation Auto Restock” menu.
2. For zone, select all; for “Meds Below Par/Max”, select “At Min or Below”
3. Select “view restock suggestions” button
4. Under the restock details, a list of meds will appear which will include the maximum, minimum, current amount, suggested amount and actual amount. These numbers are recommendations only.
5. The quantity will be highlighted in blue. At this point, adjust the quantities to correspond to the way the medications are packaged (i.e. methadone comes in sleeves of #25, clonazepam comes in sleeves of #10, etc)
6. Select save
7. Delivery signature sheets will print along with a barcode label for each medication that will be removed from the CII Safe to be delivered to the appropriate unit medstation.
8. At this point, medications will be removed from the CII Safe one by one according to what is on the restock list. An ending quantity is entered for each medication as the medications are removed.
9. The control drug technician then places each medication on the work surface adjacent to the CII Safe as they are removed from the CII Safe. The control drug technician also prints out the “Send Report” to compare to the delivery signature sheets for verification.
10. Once all medications are removed, the technician then places the correct medication in small plastic bags, attaches the corresponding barcode to the outside of the small bag, and then places all the medications needed per unit in a large plastic bag with the corresponding delivery signature sheet. This is done for each patient care unit.
11. The large plastic bags are then placed in the corresponding bin labeled with the patient care building on it. This awaits checking by the appropriate pharmacist and technician, together.
12. Besides the control drug technician initials on the “Send Report”
the checking pharmacist and delivery technician will place their initials. Three different licenses will have their initials placed on the send report sheet. If two technicians are not available, two pharmacists and one technician are fine. The end result is 3 licenses, 1 person removing the medication, the pharmacist checking the medication for accuracy and 1 person delivering the medication. An exception will occur on nights, weekends and holidays when only 1 pharmacist and 1 pharmacy technician or only 1 pharmacist are on duty.

13. Once all are checked, the delivery technician then takes the large plastic bags and places them in their suitcase/delivery tote for delivery to their patient care units.

14. The delivery signature sheets are returned by the delivery technician to the control drug technician for safe keeping in the vault file cabinet.

15. The “Send Report” is filed daily in a binder kept in the vault.

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SECTION XIX: PYXIS MEDICATION SYSTEM
CHAPTER: 19.10 PYXIS PARX

Policy: Medications from the “PICK STATION” and other areas in the pharmacy will be selected and checked using the Pyxis ParX (Pyxis Automated Replenishment System). This system uses barcode scanning technology which includes a hand held PDT (portable data terminal) with a small portable label printer.

Procedure:
1. Remove PDT from the cradle and touch screen to begin. When the PDT is not in use, it needs to be returned to the cradle for recharging. The printer needs to be plugged in to be charged.

2. After removing the PDT from the cradle, tap screen, scan user ID user barcode, scan printer barcode being used, and then choose one of the following: PICK, CHECK, MAINTENANCE OR OTHER.

A. Refilling meds using the PDT
   1. select Pick from the PDT – hit submit
   2. select the type of Pick items you want from the following:
      a. loaded items
      b. pending items
      c. loaded and pending
      d. stock out
      e. critical low-stock out
      f. on demand
      Then hit submit

3. Select what station(s) you are refilling or check off all stations being refilled
   a. highlight station(s) refilling and hit submit
   b. select either “All” areas or “Some” areas.

   i. All areas- check off ALL PICK AREAS, hit submit
   2. Some areas- check off areas picking from and hit submit
   c. select pick order
1. select by pick area if refilling by area and then hit submit
2. select by station if refilling by station and hit submit

4. The refill list will appear on the PDT
   a. scan barcode of the item appearing on the PDT to be refilled
   b. select the quantity refilling and submit
   c. follow this process until all meds are refilled
   d. if skipping an item just hit next

5. When filling a specific medication from the PDT, select the correct
   bin, remove the bin from the shelf and scan it with the PDT.
   Select quantity refilling, then hit submit. Once this is done, a label will print out on the
   portable printer, which is to be placed on the baggie. The meds are put in this baggie with
   the barcode label on the outside of the baggie. This label will contain the name and
   strength of the medication, the quantity being delivered, the unit it is being delivered to,
   the drawer where the medication will be placed into, and the pyxis code of the
   medication.

6. If you have scanned the incorrect medication or strength, the PDT will beep
   several times and display a message saying “Error! Invalid med scanned”.

7. Upon completion of the picking process, select log off and put the PDT back in its cradle.

B. Checking the “Picked meds”
   1. A pharmacist prior to leaving the pharmacy will
      check all the medications picked by the pharmacy
      technician for accuracy.

C. Delivering meds to the MedStations
   1. At the MedStation, sign on.
   2. Select refill and on the bottom of the screen, select “scan bar code”.
   3. Scan the baggie and the correct drawer will
open. If it is a matrix drawer, scan the number listed in the drawer to ensure filling the correct bin. If it is a cubie, it will automatically pop open.

4. Sign out when completed.

D. Printing Shelf Labels
1. From the PDT. Select other
2. select "print a shelf label"
3. enter the pyxis medication ID and hit submit
4. retrieve label off printer

E. Reports
1. Reports are available at the NT procar and can be selected by user, station or all.
2. At the NT procar switchbox, change the procar to #2 for reports (#1 is for the workstation).
3. Then go into the "Hoststatus/Action" section of top of the screen, highlight the PDT: PARx and click on it. A window will open on the left side of the screen.
4. Click on the "print report" box in the box and on the next screen you can print reports out by user, station, medication, or med class.
5. Be sure to enter the dates you want these reports for.
6. When finished, remember to turn the procar back to number 1 so that you can use the workstation as needed.
CHAPTER: 20.1 METHADONE FOR MAINTENANCE: ORDERING, RECEIVING, STORAGE, DISTRIBUTION AND ADMINISTRATION

POLICY: Methadone is ordered and received into pharmacy inventory from the vendor following all required state and federal regulations. A clear paper trail of the ordering and receipt of methadone is maintained.

PROCEDURE:
1. Based on current use, a pharmacy technician or pharmacist will order methadone as needed.
2. The controlled drug pharmacy technician completes the appropriate DEA ordering form 222, has the pharmacy supervisor check it for accuracy and sign it and then forwards it to the prime vendor via the driver.
3. Upon receipt from the prime vendor the methadone is signed in along with other controlled substances.
4. The methadone, with the original invoice and invoice copy are forwarded to the control drug pharmacy technician.
5. The pharmacist checks in the methadone as with other CII-CIV drugs.
6. The controlled drug pharmacy technician completes the DEA form and files the carbon copy of the DEA order form 222.
7. The methadone is added to the inventory in the CII safe through the receive procedure by the designated controlled drug technician. Between the pharmacy inventory and the inventory on the units approximately 7 days of inventory is available to cover disasters until arrangements can be made to replenish the inventory. The Pyxis CII safe is able to store methadone to cover such disasters.
8. Methadone is distributed to patient units pursuant to an order written by a physician and reviewed and processed by a pharmacist. Pharmacy technicians will then stock the Pyxis MedStation.
9. Methadone is administered to patients by nurses following Nursing Policy and Procedure for medication administration via the Pyxis MedStation and using the Nursing Kardex.
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SECTION XX: METHADONE
CHAPTER: 20.2 METHADONE FOR PAIN: ORDERING, RECEIVING, STORAGE, DISTRIBUTION AND ADMINISTRATION.

POLICY: Methadone for Pain is ordered from a vendor using the Hospital DEA Form 222 following all State and federal regulations. A clear paper trail of ordering and receipt is maintained.

PROCEDURE: The procedure outlined Section XXI above is followed with the exceptions below:

1. In line 2 in the above procedure, Methadone for pain is ordered using the appropriate DEA form 222.

2. Methadone for Pain is received under a different inventory in the Pyxis CII safe and stored separately in the CII safe from the Methadone for maintenance.

3. In the Pyxis MedStation on the patient units, Methadone for Pain is stored separately from Methadone maintenance and is not interchangeable.


SECTION XX: METHADONE
CHAPTER 20.3 CHANGES IN METHADONE BRAND, FORMULATION, OR MANUFACTURER

POLICY: Methadone is manufactured and marketed by various manufacturers and in different formulations. In the event that the methadone currently being used is not available, the pharmacy will procure methadone from another source.

PROCEDURE:
1. Whenever there is the need to make this change, the WFH Medical Director and all prescribers will be notified in order to observe possible changes in patient response.

2. A list of WFH prescribers of methadone and Suboxone will be provided by the Medical Director and will be kept current with the Pharmacy Supervisor.
SECTION XXI

DISTRIBUTION LIST
SECTION XXI: DISTRIBUTION of MANUAL
CHAPTER 21.1: PHARMACY POLICIES AND PROCEDURES MANUAL DISTRIBUTION

POLICY: The Pharmacy Services Unit Policy and Procedure Manual is distributed to the various administrative and patient care areas at WFH via the shared drive.

PROCEDURE: 1. Click on my computer
2. Click on shared drive
3. Click on folder “Manuals”
4. Click on Pharmacy folder
5. Go to Table of Contents for listings
6. Click on the appropriate folder to get to the necessary section and chapter
7. The manual is “read-only”; however, sections may be printed
SECTION XXII: HOSPITAL DIVERSION PLAN
CHAPTER 22.1 MEDICATION DIVERSION

POLICY:
The diversion control plan demonstrates accountability and efficient use of personnel and other resources to achieve quality client care while reducing possibilities for diversion of controlled substances.

Nursing and pharmacy policies serve as a mechanism for preventing diversion related problems while allowing for continuous monitoring of clinical and administrative activities to reduce the risk of medication diversion.

At Whiting Forensic Hospital nursing staff will use the Pyxis Medstation System 4000 for administration of medications to patients. This system provides an automated patient profile. It also contains an enhanced Bio ID Security System that allows access only to authorized users.

PROCEDURE:

Controlled Drug Count Accuracy

Signing onto the System.
1. Initial sign on into the Pyxis system requires you to establish identifiers specific to you. These are your state ID number, your bio ID (scanning finger) and a password.
2. Log into the system with your ID (state ID#) and then place your finger on the scanner. A password will be required in a situation when the Bio ID fails to function. (See Nursing P & P 23.1)

Counting Controls
1. Every time you enter a drawer that contains a controlled substance, you will be prompted to count the amount of medication in the drawer and type in that specific number. This is a blind count, meaning you are unaware of what the previous count had been.
   a. If you enter the incorrect number, the screen will prompt you to “Please Recount”. After you enter the correct number, the drawer needs to be shut. If the number you enter doesn’t match what is in the computer, there will be a discrepancy. It will show up on the workstation in the pharmacy. The main screen will indicate that a
discrepancy has occurred after you exit out of the system. An icon will appear on the screen indicating you have a discrepancy. This icon is a picture of a pill with an X through it. This discrepancy must be resolved prior to the end of your shift.

b. In order to resolve the discrepancy, you need a witness. From the main menu, click on “Document discrepancy”. Select the medication with the discrepancy and your name attached to it. Click on the medication and have a “witness” sign in. Select the reason why this discrepancy occurred and it will turn blue. Click “Accept” and you will automatically get a printed receipt. If your discrepancy results in you being either “over or under” the number in the computer, you must do an incident report and contact your supervisor. The pharmacy personnel and Nursing Manager where the discrepancy occurred will investigate the incident. Discrepancies are reviewed every business day. All controlled drug discrepancies will follow this procedure.

2. Because you blind count the controls every time you enter a controlled substance drawer, a count every shift is not required. A weekly count will be done between 2nd and 3rd shift nurses. This will take place on every Wednesday evening by every unit.

Wasting Medications (Controlled Substances)

1. If you remove a controlled substance, from its secure package and the patient refuses to take it or you drop it on the floor etc., you must waste this controlled substance with a witness. The witness will be prompted to sign into the Pyxis system in order to accomplish the waste function. You are then prompted to accept the amount wasted on the Pyxis screen or change it if the dosage wasted is less than what is stated. Click the “accept” icon at this point. The controlled substance must be destroyed down the sink in the medication room or flushed down the toilet.

Printing

Your Medstation will print out discrepancies for you and will also print refill transactions for the pharmacy technicians. This allows you to have hard copies of any discrepancies you create or find during your shift.
Emergency Back Up Procedure

1. These procedures will be implemented only if instructed to do so by your Nursing Supervisor, Nursing Manager, Pharmacy Supervisor or Pharmacy Manager.

2. Emergencies that might occur requiring you to use the procedure include but are not limited to:
   a. network failure
   b. power failure
   c. device failure
   d. other

3. If instructed to use your back up procedure, follow these steps:
   a. Shut the Pyxis machine off (use black button on back of cart, which contains the computer). Push it down. The entire machine should be off. If this fails, unplug the cord attached to the wall.
   b. Remove both locks on left and right side with your key.
   c. Pull the back panel off and place on the side.
   d. Before you open your drawers, make sure you know which red release levers to push. Different drawers have different red releases. Always open the Cubie drawer before the power goes down or you may interrupt your UPS (Uninterrupted Power Source {battery back up}).
   e. **DANGER:** Do not open all drawers at once or the front of the cart will become uneven in weight. The Medstation weight will be off balance and could fall forward if you open all drawers at once.
   f. **Matrix drawers**-push the red release lever forward (located on right side), drawer will open.
   g. **Cubie drawer**-slide the red lever to the left and up. The drawer will open. Push the red button in the middle so all “cubie pockets” open at once. Do this before the power goes down 100% or you can’t open them.
   h. **Carousel drawer**- push the red lever to the right and concurrently push the gray handle forward then open the “cover” on the carousel.
   i. If the system stays down, you must remove your controlled substances and place them in the double locked narcotic box on your wall. The paper back up system (proof of use sheets) must be used for controls.
When the system is ready to go back up, snap back in place the two gray wires and clip them in, put back panel on, lock cart and turn machine on. To put the controlled substances back in your Medstation, you must do an inventory count with a witness. You will be prompted to type in the number of controls. For all entries, you will complete a discrepancy so your reason selected will be to bring up the system after a failure.

**PREPARATION AND ADMINISTRATION**

Only licensed personnel can be present in the medication area. Activities in the medication area are limited to restocking (by pharmacy staff), preparation, administration and dispensing of medication. Housekeeping staff are only allowed in the medication room when nurses are available to remain with them. Employees may not take bags or personal belongings into the medication area. Monthly reviews by unit leadership and Management of the Environment of Care representatives specifically monitors for the presence of personal belongings in the medication room.

Check each patient’s medication unit dose packet(s) against the patient’s medication Kardex for:
- correct medication
- correct dosage
- correct time of administration
- correct route of administration
- expiration date of order
- discontinuance of order

Immediately prior to administering medications, recheck the medication unit dose packet against the Medication Administration Record (MAR) for: correct medication, correct dosage, and correct time of administration. Medication can only be administered to the client by the nurse who prepares it.

Remove tablets/capsules from their packaging just prior to actual administration.

Before administering the first dose of methadone, confirm that the results of the urine drug screen support methadone administration. Dissolve methadone tablets just prior to administration. If a methadone spill occurs, wipe the area clean with a wet paper towel and discard the paper towels in the trash in the medication room. This trash will be tied in the receptacle bag it was discarded in, and given to the housekeeper for disposal. At no time should clients have access to these discarded paper towels.

Throughout the Hospital, when medication is administered, staff will identify the correct patient by using two forms of identification as follows:
1. patient’s photo ID; and
2. ID bracelet

In the event one of the above is not available for identification, an acceptable alternative is visual recognition or asking a staff member who is familiar with the patient to identify him/her.

Patients are to be present for medications with nothing in their hands. If there is more than one client waiting for medication, the next client in line should wait far enough away to ensure privacy of client information as well as decrease the likelihood of diversion. Ensure that the client has properly taken the medication before leaving the medication station by asking the client questions requiring a response or instructing the client to open his/her mouth to verify that the medication has been swallowed.

Distribution of Methadone to Units

Procedure:
1. Methadone is distributed to patient units pursuant to an order written by a physician and reviewed and processed by a pharmacist. Pharmacy Technicians will then stock the Pyxis Medstation.
2. When methadone is being stocked or restocked, the Control Drug Pharmacy Technician will take out the amount needed from the inventory in the CII safe. A Pharmacist reviews the amount and strength before the methadone is handed over to another Pharmacy Technician for transport to the unit. A form is attached which contains the medication name, strength, and the exact amount to be loaded/refilled into the Pyxis medstation.
3. The methadone is transported in bags within totes/suitcases to the units in all buildings.
4. The Pharmacy Technician signs into the Pyxis medstation, reads the sheet which contains the methadone, selects either load or refill (if required), enters the exact amount as stated on the sheet, counts the methadone again, and enters the amount as prompted.
5. After signing out of the Pyxis medstation, he/she will return the sheet to the Control Drug Pharmacy Technician.
6. On the next business day, a report is printed out automatically which lists all the loaded/refilled methadone for the previous 24 hours. The unit name, time, name of staff member loading/refilling, strength loaded/refilled, and the previous amount are all listed on the printout. This information is compared to the form the Pharmacy Technicians used to load/refill the Pyxis machines. Any discrepancies are immediately identified through the PYXIS system.

Moving Medstations in an Emergency

Procedure:
In the event a unit’s methadone becomes unusable, patients may have to be transferred to another area to obtain their methadone. In order to access the medstation at a different site, the area has to have an active data jack and electrical lines. If not, then the IT staff will need to be called in, along with an electrician, to ensure that the data jack is available and active. A Pharmacy Technician or the Nurse Manager/supervisor can perform moving the Pyxis medstation to another area/unit.

As a backup plan, patients on any unit can be temporarily transferred to another Pyxis medstation that contains methadone. These will be “visiting patients” and their entire profile can be accessed on the new unit. Nursing staff would need to admit the patient and enter the patient’s last name, first name, and MPI number.

*Procuring Methadone in a Disaster*

Procedure: The vendor will supply us with Methadone, or any other medication upon request, given 24 hours notice. If Methadone is needed prior to 24 hours, it is obtained through a reciprocal agreement shared with the Greater Bridgeport Community Mental Health Center. Refer to the Pharmacy or the ASD Methadone Disaster Plan for contact information.