

## Medication & Fluid Prescribing: Administration & Legislation Requirements

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### Policy/Purpose

To ensure all Medico-legal requirements pertaining to the prescribing of medications and fluids are upheld.

Also please refer to the Roles and Responsibilities Policy Vol 12

### Scope

Health Practitioners with prescribing rights, Designated Prescribers e.g. Dentists/All CDHB staff and approved persons involved in any part of the medication/fluid management process i.e. preparation, administration, checking

### Associated documents

- [Adverse Reactions Identification And Documentation Policy](#) CDHB Fluid and Medication Management
- [Roles and Responsibilities Policy](#) CDHB Fluid and Medication Management Manual
- [Pink Book](#)  
Blue Book <http://bluebook.streamliners.co.nz>
- RMO Handbook

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- [Controlled and Recorded Drug policy](#) CDHB Fluid and Medication Management Manual
- Drug and Fluid Prescription Charts

## Inpatient Prescriber Responsibilities

### Prior to prescribing

The prescriber must write the patients name and DOB and NHI or use a patient label on every page of each new drug chart irrespective of how many pages are in use. In addition the patient's adverse reaction status must also be added to each page.

Each charting must be:

- Written in English
- Legible
- Drug/Fluid written in CAPITALS
- Written using the approved generic drug name, form, route and dose
- Have the date of commencement
- Have directions/frequency and circle times (Please note: circling times alone is not sufficient)
- Times outside usual drug rounds and changes made to administration times should be discussed with a Registered Nurse/Midwife, Patient and Pharmacist.
- When a dose outside recommended guidelines is knowingly prescribed, the prescriber's awareness should be indicated by underlining and initialling the dose.
- Each drug chart is to be numbered, eg. 1 of 2, or 2 of 2, etc.
- Signed by the prescriber and accompanied by the prescriber's legible name printed in CAPITALS (Please Note: Trainee Interns must have all prescribing countersigned by a registered medical practitioner)

### Prescribing Requirements to Aid Prescription Clarity

Place a space between a number and its units	10 mg	NOT	10mg
Always write whole numbers without a decimal point and zero	2 mg	NOT	2.0 mg
Always place a zero before a number less than one	0.5 mg	NOT	.5 mg
Always write the word "unit(s)" in full – do not abbreviate to U or u	unit(s)	NOT	U or u
Do not abbreviate micrograms	micrograms	NOT	Ug or mcg
Once a day	Daily	NOT	od or d or i/D

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### **Modifying Inpatient Prescriptions**

Charting should NOT be modified, the original charting should be cancelled and the drug regimen re charted completely to avoid misinterpretation or error.

### **Outpatient Prescriber Responsibilities**

Please Note: An outpatient/discharge prescription is legal for six months from the date of writing. However, it will only be subsidised if first presented to a pharmacy within three months of the date on it.

The following information must be documented on the prescription form:

- Prescribers Name in Capitals.
- Prescribers Registration Number.
- Address of the prescriber (i.e. hospital address)
- Patient's Name and NHI
- Patient's Address including Street number and suburb (no PO Box numbers).
- Date of Birth if the patient is under 13 years.
- Patient weight if a child or if dose is based on weight
- Drug Name (generic) dose and directions including maximums.
- Total quantity to be dispensed.
- Doctor's signature.
- Date

### **Safe Keeping of Prescription Pads**

Outpatient Prescription Pads should not be left unattended in areas that can be accessed by unauthorised persons. It is recommended that these pads be kept in the Controlled Drug Cupboard.

### **Other staff responsibilities**

- The staff/approved persons preparing/checking/administering the medication/fluid must ensure they can read the prescription clearly.
- Do not administer medication/fluids where the prescription or prescriber's name is illegible.
- Refer to the prescriber if possible, or another appropriate prescriber for clarification and re prescribing as required.

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## Measurement or evaluation

Incident management system

Canterbury and West Coast IV Link Clinical Practice Observations Programme

Pharmacy audits

## References

- Medicines Act 1981
- Misuse of Drugs Act, 1975 and its Amendments, 1981
- Misuse of Drugs Regulations, 1977 and Amendments
- Health Act 1956
- Health Practitioners Competence Assurance Act 2003

<b>Policy Owner</b>	Pharmacy Services Manager
<b>Policy Authoriser</b>	Chief Medical Officer & Executive Director of Nursing
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