

Use of Patient's Own Medications

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Policy/Purpose

When the criteria (outlined below) are met, patient's own medications can be used during their inpatient stay.

Scope

CDHB Staff involved in Medication and Fluid management and
Approved persons

Definitions

Patient's medications which are dispensed by a pharmacist in the community. This includes the use of blister packs and dosset boxes which are dispensed by a pharmacist.

Note: All dosset boxes must be checked by a hospital pharmacist as they are not sealed and could potentially have changed.

Associated documents

Patient Self Medication Policy – Fluid and Medication Management Manual

Controlled and Recorded Drugs – Definitions, Storage and Registers – Fluid and Medication Management Manual

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Printed copies may not reflect the most recent updates.**

Criteria

- Patient and/or significant others must verbally agree to the use of the medications
- The use of patients own medication must be annotated as 'patients own' on the prescription in the Medication Chart.
- Original packaging in which the medication has been dispensed is clean and intact, ie. This may include dosset boxes.
- The medication must be clearly labelled with:
 - Name of patient
 - Name of drug
 - Strength of drug
 - Dose
 - Directions
 - Date of dispensing
 - Pharmacy dispensed from
- Medication is checked for:
ONE medication per container
Exception: dosset boxes and blister packs
Expiry date if present (eg. inhalers, insulins, creams)
- Blister packs and dosset boxes can only be used if all the medications in the pack/box remain the same as currently prescribed. If there are any changes they cannot be used as this requires individual medications to be identified.
- A pharmacist is to check the patient's medications before use to ensure that they meet the criteria for use and that there is sufficient supply for the inpatient stay.
- Out of Pharmacy hours, a Nurse can check the medications against the agreed criteria. If the Nurse is unsure about using any medications, this decision should be left to the Pharmacist during normal hours.

Please Note:

If unsure about any of the above, do not use patient's own medicines – use ward stock or hospital-dispensed items.

Store the patient's own medications which are being used during their inpatient stay out of sight eg in the bedside drawer

Patients own Controlled or Recorded Drugs that are not being used in the facility should be counted, sealed in a bag, signed by the two staff who counted the medication, with a date of count and stored in the cupboard until discharge. (refer to the Controlled and Recorded Drug policy).

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Discharge requirements

Return the following to the patient:

- Any of the patient's own medications which the patient is prescribed on discharge. If there are insufficient quantities, a script should be provided.
- Where appropriate any non-prescription items the patient has purchased.

Return the following to Pharmacy, NOT to the patient (discuss with the patient):

- Any patient's own medications which are not prescribed on discharge.
- Any inappropriately large quantities of medicines e.g. when the patient should be on daily pick up of medications due to self harm risk
- Medications with an expired use by date.
- Medications with illegible or missing label.
- Medications belonging to deceased patients

Measurement or evaluation

Incident management system

Weekly Controlled and Recorded Drug checks

Policy Owner	Pharmacy Services Manager
Policy Authoriser	Chief Medical Officer & Executive Director of Nursing
Date of Authorisation	15 December 2015

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