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| <b>Department:</b>       | Pharmaceutical Care Department               |                         |                |
| <b>Document:</b>         | Multidisciplinary Policy And Procedure (MPP) |                         |                |
| <b>Title:</b>            | Patient's Own Medications                    |                         |                |
| <b>Applies To:</b>       | Pharmacists, Physicians & Nurses             |                         |                |
| <b>Preparation Date:</b> | December 15, 2024                            | <b>Index No:</b>        | MM-MPP-004     |
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## 1. PURPOSE:

- 1.1 To establish guidelines for identification and proper handling of medications brought into the hospital by admitted patients.
- 1.2 To provide patient safety, continuity of care, and accuracy in medication administration.

## 2. DEFINITONS:

- 2.1 Patient Own Medication: medication brought by the patient from home while they are hospitalized for these reasons:
  - 2.1.1 Prescribed drugs may not be in the hospital formulary.
  - 2.1.2 The hospital has no alternative therapeutics.
  - 2.1.3 The medication is out of stock from the hospital.
- 2.2 MRP: most responsible physician.

## 3. POLICY:

- 3.1 The Pharmacy Department has an effective and consistent according to the rules of MOH and CBAHI standards.
- 3.2 Any patient admitted to the hospital with his/her own medications, the medications should be checked for integrity and properly labelled if permitted for use, stored in the pharmacy, and re-dispensed to the same patient if so, ordered by the treating physician, by a qualified pharmacist.

## 4. PROCEDURE:

- 4.1 Brought from home medications by newly admitted patients: Home medications which are essential to the patient and not included in the hospital formulary (Non-Formulary Drug), or out of stock in the pharmacy will be handled as follows:
  - 4.1.1 The Charge Nurse must inform the MRP about the patient's own medications, collect and put the medications in a bag and send it to the pharmacy for verification.
  - 4.1.2 If the Physician recommends using these medications, the pharmacist shall check the medications integrity and make sure of its clearness, safety, expiry date and quantity.
  - 4.1.3 The pharmacist will fill out the Form for "Patient Own Medication" and store these medications in a separate drawer labelled with patient's name and file no., in patient's own medication cabinet present in the pharmacy.
  - 4.1.4 The medication shall be dispensed to the patient as unit-dose with a clear label written on it "Patient Own Medication."
  - 4.1.5 The pharmacist should properly label the medicine to contain full instructions and expiration date.
  - 4.1.6 Patient's own Narcotic and Controlled medications shall be kept in the inpatient pharmacy Narcotic & Controlled drugs cabinet separately from the regular stock medications.
  - 4.1.7 The dispensing and administration of the patient's own medication shall be only according to physician's order.

- 4.1.8 When the pharmacy receives the physician's order, pharmacist will prepare these home medications, label it as usual; dispense it using the unit- dose system and record it in the patient profile. It will also be documented in the patient medical record (ordering, dispensing and Medication Administration Record (MAR).
- 4.1.9 If the patient's own medication is finished, and it is out of stock or non-formulary drug in the pharmacy, the pharmacist will note in the prescription form that the medication is not available; and the physician should find an alternative drug or ask a pharmacy director to purchase it if possible.
- 4.1.10 The pharmacy director will request a purchase order by Mawared program when the physician fill out a non-formulary drug form for a patient and once made available it will be forwarded to the inpatient pharmacy where it will be dispensed the patient the same way in unit-dose.
- 4.1.11 If the patient's home medications were not permitted, both the patient and prescriber are informed and the nurse will send the medications of the admitted patient to the pharmacy department.
- 4.1.12 The pharmacist will inspect these medications and if he finds out that the physician did not order to continue these medications, or determined the medications are not clean, expired, and not properly labelled, the medication shall be disposed of, and patient will be informed of the action taken.
- 4.1.13 Upon discharge, the patient shall be informed of the new medication regimen that the Attending Physician has prescribed for him. If the discharge regimen contains a non-Formulary drug that's found in the patient's own medication, the pharmacist will dispense it to the patient with clear label, expiry date, and complete instructions.

## **5. MATERIAL AND EQUIPMENT:**

### **5.1 Forms and Records:**

- 5.1.1 Patient's own medication form.
- 5.1.2 Pharmacists note form.
- 5.1.3 Medication return form.
- 5.1.4 Medication administration record.
- 5.1.5 Monthly nursing unit inspection guide.

### **5.2 Materials and Equipment:**

- 5.2.1 NA

## **6. RESPONSIBILITIES:**

- 6.1 Physician: Check the patient's own medications to be included or excluded from his treatment plan.
- 6.2 Charge Nurse: Must inform the Attending Physician about the patient's own medication.
- 6.3 Pharmacist: Should properly label the medicine to contain full instructions and expiration date.

## **7. APPENDICES:**

- 7.1 N/A

## **8. REFERENCES:**

- 8.1 MOH, General administration of pharmaceutical care, 2014.



## 9. APPROVALS:

|              | Name                          | Title                        | Signature   | Date              |
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