



HEALTH HOLDING

HAFER ALBATIN HEALTH
CLUSTER
MATERNITY AND
CHILDREN HOSPITAL

Department:	Pharmaceutical Care Department		
Document:	Multidisciplinary Policy And Procedure (MPP)		
Title:	Automatic Stop Orders		
Applies To:	Medical, Nursing And Pharmacy Staff		
Preparation Date:	December 12, 2024	Index No:	MM-MPP-032
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1. PURPOSE:

- 1.1 To ensure that there is a means by which all medication is re-evaluated and reviewed on consistent basis and that the information is shared with the prescriber.
- 1.2 To ensure patient safety and improve medication monitoring.
- 1.3 To ensure review of patient medication regimens, to help avoid potential toxicity or dependence resulting from prolonged use of specific medications.
- 1.4 To ensure automatic cancellation of all medications at time of surgery.
- 1.5 To ensure appropriate use of antibiotics and to help avoid emergence of resistant organisms to antibiotics.

2. DEFINITONS:

- 2.1 Automatic Stop Order (ASO): The stop mechanism is to ensure that the review process occurs and stops any or all medications from being dispensed from the pharmacy until the medications have been reordered by the physician. All patient medications must be reviewed by the prescribing physician due to various reasons. Some of these reasons are: NPO order, surgery, and transfer of a patient into or out of an intensive care setting, at the end of a specific length of therapy
- 2.2 BLANKET Orders: Abbreviated or unclear orders (e.g., resume pre-op medications, give medication according to protocol).

3. POLICY:

- 3.1 Medication orders for certain types of medications (e.g., narcotic, and controlled substances, antibiotics, and anticoagulants) are only valid for a certain number of days as determined by the hospital's pharmacy and therapeutic committee while the patient is in the hospital.
- 3.2 When a patient either goes to surgery or is transferred from one care to another within the hospital, all medications previously prescribed shall be considered discontinued until new orders are written by the prescribing physician.
- 3.3 After medications discontinued, the pharmacy automatically stops sending the medication to the patient's nursing unit, and the attending physician must write an entirely new order if the patient is to continue to receive that medication. It is known as "Hard Stop "in electronic pharmacy profiles.
- 3.4 The pharmacy will facilitate completion of specific medication protocols in which physicians may indicate a direction that exceeds or is shorter than the automatic stop order times by indicating the desired duration.
- 3.5 All patient medication orders must be reviewed and renewed periodically by physicians as per an approved schedule.

4. PROCEDURE:

- 4.1 All medication orders of unspecified length of treatment are subject to automatic discontinuation. The prescriber may override the automatic stop date by specifying a particular duration with the initial order.

- 4.2 All medication orders are discontinued when the patient is transferred to the operating room.
- 4.3 All medication orders shall be rewritten when the patient is transferred to a unit with a different level of care.
- 4.4 Unless renewed or specifically ordered for different period (seven days unless it part of an approved protocol) medications will be automatically discontinued by the system after the approved time tables from pharmacy and therapeutic committee.
- 4.5 If the medication is to be renewed, a new and complete order is required to be written on the physician's order form.
- 4.6 For patients undergoing surgery or transferred from one care to another the following steps must be followed:
 - 4.6.1 The Most Responsible physician MRP must indicate on the physician's order sheet the day and time of surgery; he / she must specify that all medications must be put on hold on the day of surgery or at least 12 hours pre-operatively. In case a scheduled surgery is cancelled, a physician must write on the Order Sheet "Surgery was cancelled, resume all previous medications" for that patient.
 - 4.6.2 Once the operating physician finished surgery, he/she shall write a postoperative order and send it to the inpatient pharmacy (all medications rewritten) whether to continue previous medications or make an order for a new one including antibiotics.
 - 4.6.3 Antibiotics are dispensed for admitted patients for one week only, and automatic stop order shall be exercised by the inpatient pharmacy unless there is a renew order for continuation.
 - 4.6.4 In case the attending physician fails to write a post-operative order, the pharmacist will not dispense any medications to the patient.
 - 4.6.5 The pharmacist in-charge shall notify the charge nurse about the Automatic Stop Order (ASO) and he/she will remind the attending physician about writing a post-operative order to the Pharmacy.
 - 4.6.6 Medication not reordered shall be discontinued upon receipt of post-operative or transfer orders.
- 4.7 All medications for renewal must be ordered by medication name, dose, and frequency.
- 4.8 It is not acceptable for physicians to write the following terms in the renewal order (Blanket orders)
 - 4.8.1 Renew pre-operative medications.
 - 4.8.2 Continue same medications as before.
 - 4.8.3 Renew all previous medications
- 4.9 Prescribing of controlled medications is according to laws and regulations of MOH and SFDA.
- 4.10 All oral medications will be placed on hold for any physician's order indicating Nothing by mouth "N.P.O." for a patient.
- 4.11 All medications placed on HOLD are valid for 24 hours. At the end of the 24 hours, the medication on hold must be reordered by the physician or it will be discontinued.
- 4.12 Orders for Anticoagulants (e.g., I.V. heparins, warfarin) should be made on daily basis.
- 4.13 Orders for continuous intravenous drips (e.g., dopamine, dobutamine, KCL, NTG, fentanyl, midazolam, TPN, etc.) should be made on daily basis.
- 4.14 Orders for I.V., I.M. medications should be made on daily basis.
- 4.15 All medication orders for transfer patients are cancelled when a patient is transferred to or from a critical care unit. All medications must be reordered to continue therapy.
- 4.16 The transcription of medication order into the medication administration record (MAR) clearly reflects the type of order.
- 4.17 Automatic Stop Order (ASO): Medication will be automatically stopped unless renewed with appropriate prescriptions, or specifically ordered for a different period, according to the following approved timetables by P&T Committee:

No.	Type of Medications	Validity of Order
1	All medications at time of surgery.	12 hours pre-op.
2	Antibiotics	7 days from starting date.
3	Anticoagulants	1 day (24 Hours)
4	Narcotic & Controlled medications (IV)	1 day (24 Hours)
5	Controlled medications (P.O.)	7 days
6	IV, IM, Continuous IV Infusion & TPN	1 day (24 Hours)
7	Blood derivatives (e.g., albumin, immunoglobulins, clotting factors)	1 day (24 Hours)
8	All other medications	7 days unless shorter time is specified.

5. MATERIAL AND EQUIPMENT:

5.1 Forms and Records:

5.1.1 Physician's Order Sheet

5.2 Materials and Equipment:

5.2.1 NA

6. RESPONSIBILITIES:

6.1 Nurses

6.2 Pharmacists

6.3 Physicians

7. APPENDICES:

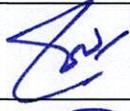
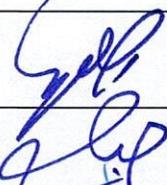
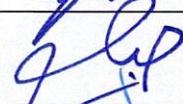
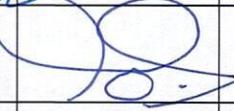
N/A

8. REFERENCES:

8.1 CBAHI Standards from <https://portal.cbahi.gov.sa/english/cbahi-standards>

8.2 Automatic Stop Orders | PDF | Pharmacy | Pharmaceutical Medication. (2022). Retrieved 9 March 2022, from <https://www.scribd.com/document/361085557/Automatic-Stop-Orders>.

9. APPROVALS:

	Name	Title	Signature	Date
Prepared by:	Ph. Reem Rakad Al Dhafeeri	Medication Safety Officer		December 12, 2024
Reviewed by:	Ph. Mohamed Al Mutairi	Narcotic and Controlled Drugs Supervisor		December 15, 2024
Reviewed by:	Ph. Mutlaq Khlaif Al Dhafeeri	Pharmaceutical Care Director		December 17, 2024
Reviewed by:	Mr. Sabah Turayhib Al Harbi	Nursing Director		December 19, 2024
Reviewed by:	Dr. Tamer Mohamed Naguib	Medical Director		December 22, 2024
Reviewed by:	Mr. Abdulelah Ayed Al Mutairi	QM & PS Director		December 23, 2024
Approved by:	Mr. Fahad Hazam Alshammari	Hospital Director		December 26, 2024