

Appendix A. Medication System: Potential Breakdown Points

- I. Prior to order reaching pharmacy**
 - A. Administrative
 - 1. Staffing adequate
 - 2. Staff well trained
 - 3. Equipment adequate
 - 4. Equipment working properly
 - 5. Policies and procedures in place
 - B. Resident admission
 - 1. Paperwork completed efficiently
 - 2. Resident assigned identification number in timely fashion
 - 3. Allergies and other required resident information transmitted to record
 - C. Medication order written
 - 1. Physician writes order in chart
 - 2. Nurse transcribes verbal order to chart
 - 3. Order written by another method
 - 4. Order technically correct (right chart)
 - 5. Order therapeutically correct
 - 6. Order clear and unambiguous
 - D. Medication order (chart) to nursing station
 - 1. Order (chart) returned to nursing station promptly
 - 2. Order (chart) returned to appropriate place
 - 3. Appropriate notification of STAT medication
 - 4. Transmit to pharmacy (routine pick up or FAX)
 - E. Nursing procedures
 - 1. Nurse understands use of each medication
 - 2. Order transcribed to MAR/Kardex
 - 3. Discontinued medications noted on MAR/Kardex
 - 4. Discontinued medications separated for return to pharmacy
 - 5. Resident allergies and other required information documented in chart
 - 6. Narcotics signed out properly
 - F. Clerk check
 - 1. Order verified complete by clerk
 - 2. Documentation of order completion
 - 3. Order transcribed (copy of chart order), sent to pharmacy
 - 4. Order transcribed to Kardex
 - 5. Chart returned to appropriate location
 - G. Medication reorder
 - 1. Medication reorders sent to pharmacy
- II. Order in pharmacy**

- A. Receipt of order
 - 1. Order received in timely manner
 - 2. Order received clear and unambiguous
 - 3. Information complete
 - 4. Order reviewed for special problems
 - 5. Order processed in reasonable time frame
- B. Clarification of order
 - 1. Nurse contacted for unclear order
 - 2. Physician contacted for unclear order
 - 3. Nurse contacted physician for unclear order
 - 4. Physician contacted for inappropriate drug
- C. Interpretation of order
 - 1. Order interpreted as physician intended
 - 2. Order interpreted as therapeutically sound
- D. Order entry
 - 1. Orders entered on correct resident
 - 2. Appropriate codes used
 - 3. Order entered in timely manner
 - 4. Order entered completely and correctly
 - 5. Pharmacist alerted to allergies
 - 6. Pharmacist alerted to drug interactions
 - 7. Pharmacist alerted to therapeutic duplications
 - 8. Discontinued medications stopped in pharmacy records
- E. Medication preparation/storage
 - 1. Medication in stock
 - 2. Compounded medications prepared appropriately
 - 3. Prepackaged medications appropriately labeled
 - 4. Medication is properly stored
- F. Medication dispensing
 - 1. STAT medications delivered per policy
 - 2. Medications prepared are correct
 - 3. Medications prepared are appropriately labeled
- G. Pharmacist check
 - 1. Pharmacist verifies order is complete
 - 2. Pharmacist verifies label is correct
 - 3. Pharmacist verifies medication administration times are correct
 - 4. Pharmacist follows up on resident allergies
 - 5. Pharmacist follows up on drug interactions
 - 6. Pharmacist follows up on therapeutic duplication
 - 7. Pharmacist verifies medication is correct
 - 8. Medication sent to facility

III. After order leaves pharmacy

- A. Receipt of medications and forms
 - 1. Medications and forms placed in appropriate location
 - 2. Nurse checks medications and labels in timely manner
- B. Maintenance of MAR

1. Kardex checked against original order
 2. MAR checked against original order
 3. New orders entered on MAR, including monitoring parameters, special instructions/cautions
 4. Discontinued orders entered on MAR
 5. Administration times verified on MAR
- C. Medication administration
1. Medications administered in timely manner
 2. Nurse checks medication against MAR
 3. Nurse verifies correct dose
 4. Nurse verifies route of administration is correct
 5. Nurse verifies resident is correct
 6. Drug administered therapeutically appropriate
 7. Nurse administers dose as scheduled
 8. Nurse follows proper procedure for administration
- D. Documentation
1. Nurse documentation completed after dose given
 2. Nurse documentation is accurate
 3. Physician/pharmacist notified of any adverse reaction
- E. Resident monitoring
1. Monitoring parameters for each drug understood
 2. Monitoring done in timely manner
 3. Monitoring is done accurately
 4. Resident data is documented in chart/nurses' notes

Feinberg, JL, ed. Med Pass Survey. A Continuous Quality Improvement Approach. ASCP 1993.