

Phenytoin/fosphenytoin Pharmacy Expectations

Note: The following guidelines are designed to provide consistent pharmacy care for patients on phenytoin or fosphenytoin while hospitalized. These guidelines are not intended to serve as instructions for an automatic pharmacy dosing consult service. They are instead a tool to assist the pharmacist with assessment of phenytoin dosing or answering questions about phenytoin levels. Providers retain responsibility for dosing and monitoring phenytoin unless a formal consult is entered.

For any patient who is receiving phenytoin/fosphenytoin during admission, pharmacists will perform the following activities:

- Pharmacists will review any phenytoin levels within 24 hours of laboratory reporting.
 - General goal ranges for drug level monitoring can be found in the Phenytoin/Fosphenytoin Dosing & Monitoring Pearls reference.
 - Individual patient-specific goal levels may differ from the Pearls Reference. Consider consulting the outpatient chart, patient, or provider for patient-specific goals.
 - Pharmacists should investigate levels outside of the goal range, and recommend dosage adjustments to the provider, if appropriate.
- Documentation will occur for patients on phenytoin/fosphenytoin in the following cases:
 - If formally consulted to monitor phenytoin/fosphenytoin,
 - If pharmacist recommendations for dose changes are made to the medical team,
 - If phenytoin levels are ordered by pharmacy,
 - If outpatient monitoring or discharge planning is needed.
- Documentation will occur in the progress notes section of the medical record. Notes should contain all pertinent information, which may include: dose, goal range, drug interactions, assessment for possible adverse effects, and pharmacy-specific discharge planning needs.
- Pharmacists will order levels in the following situations, if clinically indicated:
 - To assess efficacy or toxicity with new therapy, changes in drug dose, changes in organ function, or new drug interactions.
 - Upon request by providers.
 - Pharmacists will not order phenytoin levels during admission if: patient is stable, is on prior-to-admission regimen, with no new medication interactions, no lack of efficacy suspected, no toxicity suspected.
- Pharmacists will monitor patient profiles for potential drug interactions with phenytoin, and make recommendations as appropriate.