

PHARMACY AND THERAPEUTICS COMMITTEE

DATE: June 28, 2012

LOCATION: Private Dining Room

CALLED TO ORDER: 7:00 A.M.

ADJOURNED: 8:09 A.M.

Members Present:		Members Absent:		Guest:
Richard Pesce, M.D.	Karen Babb, RPh	Jackie Jackson, RN,COO	Nathan Chamberlain, M.D.	Mark Brzezienski, M.D.
Mark Anderson, M.D.	Diona Brown, RN,C.N.O.	Brian Jones, RD, LDN	John L. Gwin, Jr., M.D.	J. Eugene Huffstutter, M.D.
David Dodson, M.D.	Vickie Burger, Lab	Nan Payne, RN	Tarek Kadrie, M.D.	Charles Portera, Jr., M.D.
Gale Fellowes, M.D.	Patrick Ellis, RPh	Melissa Roden, RN	Robert Mynatt, M.D.	William Warren, M.D.
	Patrick Hagan, Finance	Beverly Slate, Supply Chain	Nathan Schatzman, M.D.	John Jantz, RPh, resident
	Lila Heet, RPh	Hannah Walker, RN	William Oellerich, M.D.	Ali Roberts, RPh, resident
	Daniel Marsh, RPh		Michael Stipanov, M.D.	
			Gwen Davis, RN	
			Scott Madaris, RN	
			Jayne McGarey, RPh	
			Susan Izell, RN	
			Don Jones, RPh	
			Deb Moore, RN, COO	
			Elvie Smith, RN	

This meeting will be convened under the protection of the Tennessee Statute 63-6-219 and the Health Care Quality Improvement Act of 1986, Public Law 99-660. All information, case reviews, meeting minutes, statistics and correspondence are confidential and protected. Included in that protection are those that are involved in the review of the information. Any discussion of this information outside the realm of Peer Review constitutes a breach and violates the protection of the persons involved in the breach.

AGENDA ITEM	FINDINGS OR CONCLUSION	ACTION, RESPONSIBILITY	STATUS
Minutes	The April 12, 2012 minutes were approved as submitted.		Complete
Formulary	The following medication were reviewed: 1. Febuxostat (Uloric®) – Used in treatment of gout. Dr. Huffstutter came to provide additional information to request approval. 2. Bupivacaine (Exparel®) – liposomal formulation indicated for post-surgical analgesia in bunionectomy and hemorrhoidectomy. Dr. Brzezienski presented information on this drug and requested that it be added to formulary for use specifically in breast reconstruction. He is currently involved in a study using this drug in breast reconstruction patients. Dr. Portera is also interested in use of this drug. The Committee reviewed this drug at the Feb 2012 meeting and voted to continue to keep it off formulary until more results are available from Dr. Brzezienski’s trial. 3. ARB Therapeutic Interchange 4. Statin Therapeutic Interchange 5. Fosfomycin (Monurol®) – Used in treatment of uncomplicated UTI in women. 6. Fingolimod (Gilenya®) – Used in the treatment of MS.	1. Approved; Dr. Fellowes will check with Risk Mgmt. re: substitution w/o physician order. 2. Did not approve. Committee would like to see results of ongoing study once study is complete. 3-4. Dr. Warren requested these items be tabled until August or after OneCare. 5. Approved 6. Tabled until August	Pending Pending Pending Complete Pending
Esmolol	According to the Cardiac IV Drugs and Continuous Medication Infusion Drips policy (MM-05416), Esmolol may be managed on a Telemetry Unit, but not started. A request was made to change this policy to allow Esmolol to be started on a telemetry unit if no bolus is administered.	Approved	Complete
Denosumab (Prolia®)	Indicated for treatment of osteoporosis. The committee reviewed this drug at the June 2011 meeting and voted to restrict this agent to patients in which Reclast use is contraindicated—Crcl less than 35ml/min.	Agent was tabled until the P&T subcommittee can review for reimbursement.	Complete
Dilaudid dose limits (Hydromorphone)	Dosing revisions for Dilaudid have been implemented. The recommended IV starting dose is 0.2-1mg (previously 1-2mg). Committee discussed automatic correction of handwritten orders outside of this range, but recommended that pharmacist call physician if starting dose is outside recommended range.		Pending

AGENDA ITEM	FINDINGS OR CONCLUSION	ACTION, RESPONSIBILITY	STATUS
Antimicrobial renal adjustments and dose optimization	Ciprofloxacin and Aztreonam will be added to the current renal dosing adjustment and dose optimization protocol. The process will be monitored by the antimicrobial stewardship team.	Approved	Complete
ADRs	Committee reviewed Adverse Drug Reactions. Class 1: 239 Class 2: 140 Class 3: 0 Total: 379 Inpatient: 104 Prior to Admission: 275	Information	Complete
Pharmacy Dashboard	May 2012 compared to January 2012 <ul style="list-style-type: none"> ♦ Pharmacokinetic consults increased 25% ♦ TPN pts per 1000 Adj Pt Days decreased by 25% ♦ No central line infections in TPN pts ♦ Coumadin consults decreased by 16% ♦ Chemotherapy doses increased by 25% 	Information	Complete
Major Adverse Drug Event Prevention	Committee reviewed the details of the major adverse drug event preventions by pharmacists.	Information	Complete
TPN Ordering Restrictions	Tabled until August meeting.	Information	In process

There being no further business, the meeting was adjourned at 8:09 A.M. The next P&T meeting is August 9, 2012.

Respectfully submitted,

Sandy Vredeveld, D.Ph. Director of Pharmacy
Karen Babb, Pharm.D Lead Pharmacist

Approved by,

Richard Pesce, M.D. Chairman