

Policy Number Date of Issue Review Dates Revision Dates OHS.PHARM.014 February 2011 Jan 2013, Sept 2016, Oct 2018 Feb 2011, July 2014, Oct 2016, Oct 2018, Oct 2021, Oct 2024 Pharmacy / Nursing / Medical Staff

Policy Owner(s)

## **High Alert Medications**

## I. Purpose

The purpose of this policy is to reduce medication errors with identified high alert medications which have an increased risk of causing significant harm to a patient when used in error.

### II. Scope

This policy applies to (i) Ochsner Health, (ii) Ochsner Clinic Foundation, and/or (iii) all facilities and entities wholly-owned and/or leased by Ochsner Clinic Foundation ("Ochsner").

#### III. Definitions

- A. <u>High Alert Medication</u> is a drug that bears heightened risk of causing significant harm when used in error.
- B. <u>ADC</u> Automated Dispensing Cabinet
- C. <u>DERS</u> Drug Error Reducing Software

### IV. Policy Statements

- A. A list of high alert medications which may lead to potentially harmful medications errors shall be established, reviewed and updated, and approved at System P&T.
- B. Health care professionals will take necessary precautions to minimize errors associated with the use of high alert medications.
  - a. Each health care professional will be responsible for their individual role in preventing errors associated with each high alert medication.

### V. Procedures/Standards and Roles & Responsibilities

- A. The System Pharmacy and Therapeutics (System P&T) Committee, Performance Improvement Committee, Medication Safety Committees (depending on individual facility), and/or other committee(s) will evaluate the high alert medication list and recommend changes as needed.
  - 1. Recommendations for changes to the high alert medication list will be given to the System P&T Committee for approval.
- B. The specific committee will consider the following in determining if a medication should be included on the high alert list.
  - 1. Medication errors that have occurred at the facility.
  - 2. Medications on the formulary with FDA risk evaluation and mitigation strategies.
  - 3. Institute for Safe Medication Practice's list of high alert medications.
  - 4. FDA medication safety alerts.
  - 5. Joint Commission sentinel alerts involving medications.



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- 6. Recommended from System P&T Committee
- C. HAM Clinical Data Categories will be created at a system level and placed in each ADC to alert personnel to high alert medications.
- D. Health care professionals will be educated on high alert medications and their role in preventing errors associated with the use of these medications via system education platform(s) and other methods as needed for the individual department.
- E. Staff in patient care areas where medications are administered will maintain awareness of the high alert medication list.

## VI. Enforcement and Exceptions

[This section intentionally left blank.]

### VII. Internal References

Attachment A - High Alert Medication List

#### **VIII. External References**

The Joint Commission. Medication Management Standard MM.01.01.03: The hospital safely manages high-alert and hazardous medications. Institute for Safe Medication Practice. ISMP's List of High Alert Medications. 2023. Accessed from <a href="http://www.ismp.org/tools/highalertmedications.pdf">http://www.ismp.org/tools/highalertmedications.pdf</a>. MM.01.01.03 - High Alert and Hazardous Medications

IX. Approved

Warner Thomas, President and Chief Executive Officer

Deborah Simonson, PharmD, VP – Chief Pharmacy Officer

### X. Policy History

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Reviewer	Date of Review	Notes
System Clinical Coordinators	9/23/2024	Approved
Meeting		
System Medication Safety and	9/17/2024	Approved
PEDS Medication Safety	10/1/2024	
System Operational Pharmacy	9/24/2024	Approved
Team		
DOP System Policy Committee	9/26/2024	Approved
System P&T Committee	10/23/2024	Approved