NORTHERN NEVADA ADULT MENTAL HEALTH SERVICES

POLICY AND PROCEDURE

SUBJECT: PATIENT MEDSTATION SYSTEM (PYXIS)

NUMBER: NN-MM-28

ORIGINAL DATE: 12/07/06

REVIEW/REVISE DATE: 8/2/07, 11/18/10

APPROVAL: Rosalyne Reynolds {s}, Agency Director

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I. PURPOSE

The purpose of this policy is to provide direction for safe and effective administration of medication with the automated medication management system.

II. POLICY

It is the policy of Northern Nevada Adult Mental Health Services (NNAMHS) Dini-Townsend Hospital for authorized users of Medstation Rx to follow guidelines established when obtaining medications for consumers and performing all related activities.

III. DEFINITIONS

1. Patient Medstation System (PYXIS) – The name of the system
2. Console – The main operation center in the Pharmacy
3. Medstation – Medication dispensing station on each unit
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IV. PROCEDURE

1. Authorized Access
   a. Access will be strictly maintained to ensure security for medications and confidentiality of consumer data.
   b. Pyxis Tutorial Certificate and review of Pyxis Medstation procedure must be verified prior to obtaining access.
   c. A list of RN authorized users will be provided to pharmacy by the Director of Nursing.
   d. A temporary password will be issued with the user ID. The access code will be entered into the console by pharmacy personnel.
   e. The authorized user will log on with the temporary password. The system will prompt the user to create their unique password. This will then prompt user to begin the bio-identification process.
   f. Authorized users who have forgotten their unique password must be re-entered into the system by pharmacy personnel. A temporary user ID will be assigned until another permanent access code can be used.
   g. The pharmacy will be notified when an employee terminates, transfers or access privileges need to be changed.
   h. Staff is strictly prohibited from sharing access codes for this equipment.
2. Patient Information
   a. The consumer's name should appear on the Patient Medstation System census list. This information is available from the Admission/Discharge Transfer (ADT) interface.
   b. If the consumer is not on the Patient Medstation System census list, check with the AVATAR system to ensure the ADT status of the consumer.
   c. There will be no granted access to add consumers at the Medstation.
   d. Consumers discharged or transferred from a nursing unit will remain on that Medstation for one (1) hour to allow time for any credits or returns.

e. The amount of time after the ordered med stop times that a medication will continue to appear on the Medstation is one (1) hour to allow for reconciliation review between pharmacy and nursing.

f. Med ordered start times will appear on the Medstation screen immediately after entry by the pharmacy staff.

g. Consumer's allergies are not entered into the Pyxis system, Therefore, we shall use the system default of "See MAR for Allergies" for all patients. Follow nursing procedures for checking patient allergies through the MAR. Pharmacy will continue to verify and document any missing allergies that are not reported via the consumer medication orders, through pharmacy intervention logs.

3. Medication Administration - For consistent use in accessing medications and maintaining related records, the following procedures will be followed when obtaining medications for consumers and performing all related activities:

a. The medications listed in the Patient Medstation System do not represent the consumer's Medication Administration Record (MAR). The MAR (or practitioner's order) must be consulted prior to accessing the medication.

b. To remove medications from the Patient Medstation System, select "remove" at the main menu and follow instructions on the screen.

c. A list of current consumers on the unit will appear.

d. Select consumer name by first letter(s) of the last name or use the "Page Down" key.

e. Select the medications to be administered. (May select by the brand or generic name.) Enter the first letter(s) of the medication name to find quickly, or use the "Page Down" key.

f. Enter the quantity needed for the dose to be administered, remove medication, and close the drawer.

g. If multiple medications are to be removed at the same time, select all medications to be dispensed, then press the "Remove Selections" key. The

appropriate drawer will open for each medication selected. Verify the count; remove the medication.

h. All controlled substance medications require the RN to verify the pocket quantity each time a medication is removed. (To waste part of the drug during the removal process, refer to “Wasting Medications” in this procedure.)

i. If the screen reads “medication not available”, the medication count in the Patient Medstation System is zero and needs to be refilled. Notify the pharmacy to refill the medication.

j. Refrigerated medications will not be stored in the Patient Medstation System. Check the unit medication refrigerator for these medications and document the use on floor stock sign-out sheets.

k. Multi-dose medication removed from the Patient Medstation System must be labeled with the consumer name and date. This will be placed in the consumer’s cassette. Only access another multidose item from the Patient Medstation System when the consumer runs out of this supply.

l. If the order has not been entered into the pharmacy computer by the pharmacist, check to see if the order has been sent.

m. If the medication is not listed in the Patient Medstation System profile, it is a non-PYXIS medication located in the consumer’s medication cassette.

n. Place the medication removed from the Patient Medstation System in clearly labeled consumer cassette.

o. Log off the system after all transactions; (EXIT) button.

4. Override Function – for Profile Medstations

a. Medications needed for “emergency” or dispensing situations when the pharmacy is closed have been approved by pharmacy and nursing for the override function. This will be available regardless of the consumer’s medication profile in the pharmacy computer.

b. If the medication is needed and the drug is available at the Medstation, the Nursing Supervisor should:
   i. Verify selection of the correct consumer.
   ii. Check for the drug under generic and brand name.
   iii. Re-check the drug order using the practitioner's order and the MAR.
   iv. Verify that the drug order has not expired (e.g.: controlled substances expire after 14 days and must be reordered if the consumer continues to need the medication).
   v. Rx review
c. If the above information has been verified and the override-approved medication is needed, select "Override Meds" from the "Remove Meds" function.
d. Only nurses with nursing supervisor privileges can override medications.
   i. NOTE: The override function will be utilized ONLY if needed medications are not linked to the consumer on the Patient Medstation System, AND not on the Floor Stock or in the After-Hours Closet.

5. Returning Medications
   a. Any medication that is removed from the Patient Medstation System that is in its original container (not opened) and will not be administered to a consumer for whatever reason will be returned to the Patient Medstation System. To do this, select from the Main Menu and then select the "Return" option (See PYXIS Medstation Quick Reference Guide for additional information). A witness is required for returning a controlled substance.
   b. The nurse returning a medication is responsible for returning the medication to the return bin.
   c. If the medication package is not intact, the dose should be wasted and not returned.

6. Wasting Medications
    a. If all (not in original sealed container) or part of a controlled substance is to be wasted, select the “Waste” option under the “Procedures” selection. Two nurses are required for wasting all controlled substances.
        i. Select “Waste Med”.
        ii. Select the medication to be wasted.
        iii. Indicate the amount that was administered (be specific, e.g.: mg. or ml.)
        iv. Acquire the assistance of a witness, who will enter ID and bio identification.
        v. The witness should review and verify the entered waste transaction on the screen before proceeding.
    b. The documentation of the wastage should be completed at the time the controlled substance is wasted.
    c. If total dose is wasted, type “0” given and select “credit consumer”.
    d. Unused narcotics should be wasted properly with a witness present.
7. Discrepancies
    a. A discrepancy occurs when the physical count does not match the displayed count from the Patient Medstation System. Discrepancies may be identified during the change of shift Discrepancy Report, inventory, refilling, or at any time when a nurse removes medication for a consumer.
    b. At the conclusion of each shift the charge nurse is responsible to resolve all Open Discrepancies from the Patient Medstation System.
    c. To document the discrepancy, type in the Patient Medstation System:
        i. Select “Resolve Discrepancies”.
        ii. Select “other” and enter the appropriate discrepancy code.
8. Inventory Count
    a. Controlled substances will be inventoried on as needed basis by pharmacy and nursing personnel.

b. Non-controlled medications will be inventoried by pharmacy personnel.

c. At least once a month expiration dates will be checked by pharmacy personnel.

d. Controlled substances are also inventoried during each replacement or refill transaction. A nurse and pharmacy personnel will substantiate the accuracy of the count.

e. Non-controlled medications are also inventoried during loading and refilling.

9. Out of Stock and Non-Stocked Medications

a. Controlled Substances:

i. The pharmacy technician responsible for narcotics will manage all refills, stock outs, and loads in the Patient Medstation System.

ii. Evening shift “Med Not Loaded” – new items will be loaded by a pharmacy technician or signed out manually using the Controlled Substance Administration Record (CSAR).

iii. All controlled substances issued manually with the Controlled Substance Administration Record must be stored in the locked Controlled Substance cabinet. All documentation and wastage will be recorded on the CSAR per nursing and pharmacy procedures.

b. Non-Controlled Substances:

i. Pharmacy personnel will be responsible for replacing out of stock items.

ii. Loading new items will be performed throughout the day.

iii. Inventory levels will be checked daily by printing the “Refill” report from the pharmacy console. These medications will be delivered and refilled into the Patient Medstation System by pharmacy personnel. This is accomplished by selecting “Procedures” from the Main Menu and then selecting “Refill” (See PYXIS Medstation Manual for additional information). The inventory must be counted accurately during this transaction.

iv. Non PYXIS items and first issue items for meds not in the Patient Medstation System will be dispensed to the consumer's medication bin. Non-PYXIS items (i.e.: extemporaneously prepared items, non-standard doses, etc.) will be dispensed daily using the pharmacy labels.

v. Non-stocked and Non-Patient Medstation System non-controlled substances in the POU will be obtained from the pharmacy when needed.

vi. Stock and inventory level changes stored in the Patient Medstation System will be based on usage and consumer convenience.

10. Replacing Transaction Paper and Cleanliness

a. Replacement rolls of paper will be stored in the pharmacy and will be provided to the Patient Medstation System when needed. Limited stock will be placed at the nursing station for emergency use. The exterior of the Patient Medstation System will be cleaned with a slightly damp cloth, taking care not to let liquids seep into any openings or seams. The same precautions apply to the drawer interiors. The fingerprint lens should be lightly cleaned with water.

b. Nursing staff will only use plain water to clean the screen and keyboard cover. (Alcohol based products destroy the Plexiglas screen and should not be used.)

11. Downtime Procedure

a. The Patient Medstation System is connected to the hospital's emergency power system and has a four (4) minute battery backup installed in the Patient Medstation System unit. The hospital has emergency power throughout the whole hospital, so power outage may not be an issue in the short run.

b. In the unlikely event the pharmacy console is without power, the pharmacy must immediately contact the PYXIS Service Center for instructions on shut down procedures on the pharmacy console. The Patient Medstation System units will automatically shut themselves down.

c. If it becomes necessary to manually open the Patient Medstation System on the unit, the pharmacy must be contacted. The keys to open the Patient Medstation System will be stored in the Main Pharmacy. If deemed necessary by the pharmacist and Charge Nurse, the Patient Medstation System will be opened using the following guidelines based on the length of the power outage.
    i. Non-Controlled Substances: The drawers will remain open and disposition and charging will be performed manually using the Patient Medstation System.
    ii. Controlled Substances: The drawers will remain open and all or the most commonly prescribed drugs will be transferred to the locked Controlled Substance cabinet. Inventory will be transcribed on the CSAR. Disposition, documentation and charging will occur using the CSAR. Any remaining controlled substances in the Patient Medstation System will be relocked.

12. Emergency Medication Removal
    a. In the event of a catastrophic power failure or station failure, an internal battery backup at the Patient Medstation System provides about 60 seconds of power to automatically initiate a safe shutdown of the station. If the power failure continues, you can gain access to the meds via an override process.
        i. Use the on/off switch at the back to turn the power off.
        ii. Obtain the two keys required to remove the access panel from the back of the Station from the pharmacy.
        iii. Remove the access panel from the back of the station.
        iv. Press the red release lever on the right side of the drawer and push the drawer out.
        v. Repeat for each drawer you need to access.
        vi. Record any med removals on the Back-Up Log.

vii. When power is restored, withdraw all meds which were manually removed (Refer to “Back Up Logs”)

13. Trouble Shooting

a. Use the following steps to help solve problems occurring with the Patient Medstation System:

i. Consult PYXIS Reference Manual located on the unit.

ii. Direct the questions to the unit resource nurse (RN III or RN IV) or the pharmacy.

iii. Contact Automated Dispensing Systems Coordinator, Corporate Pharmacy Services.

iv. Contact PYXIS Service Representative through pharmacy personnel.

v. If PYXIS Service Representative needs to service the Medstation, he/she must be accompanied by a hospital designee at all times.

b. The following guidelines may help to solve the most common problems encountered with the Patient Medstation System:

i. Wrong medication/Incorrect dose is selected and drawer is open:

A) Confirm count.

B) Press “Cancel”.

C) DO NOT TAKE MEDICATION.

D) Close drawer.

E) Repeat “Remove Meds” selecting correct drug and/or dose.

ii. Wrong medication is removed and transaction completed:

A) Return medication using “Return Meds" procedure. This will credit the consumer for the item that was charged inappropriately.

B) Repeat “Remove Meds” procedure selecting correct medication.

iii. Wrong consumer is selected and transaction completed:

A) Return medication using “Return Meds” procedure. This will credit the consumer for the item that was charged inappropriately.

B) Repeat “Remove Meds” procedure selecting correct consumer.

iv. Drawer closed before removing medication:

A) Choose the same consumer and medication.

B) Confirm count.

C) Press “Cancel”.

D) Remove med you forgot previously.

E) Close drawer.

v. Recovering a jammed drawer:

A) Press “Recover Drawer” option.

B) Select the drawer you want to recover. A witness is required for controlled substances.

C) Fully extend the drawer and release the cover.

D) Check meds in each pocket to make sure it does not protrude above the top of the pocket.

E) Close drawer and press “Done”.

F) If the recover is successful, the drawer will reopen and you are required to perform an inventory count of each pocket.

vi. Key pad not responding:

A) Check to see if the small clock on upper left corner of the screen has stopped.

B) Use the on/off switch on the back of the machine to turn the machine off and make sure the screen is blank.

C) Use the on/off switch on the back of the machine to turn the machine back on.

14. Pharmacy Functions

a. Reports:

i. Pick and Delivery – Controlled Substances: This report prints daily. It lists per nursing unit controlled substances at or below par. The pharmacy technicians use this report to restock controlled substances in the Patient Medstation System.

ii. Pick and Delivery – Non-Controlled Substances: This report prints daily. It lists per nursing unit all non-controlled substances at or below par. The pharmacy technicians use this report to restock non-controlled substances in the Patient Medstation System.

iii. Returns and Wastes – Controlled Substances: This report prints daily, listing all returns and waste activities which have occurred.

iv. Med Refill Activities Report: This report prints daily and lists controlled substance refills. It is used by controlled substance personnel to assure all controlled substance refills were handled appropriately.

v. Meds Ordered and Not Loaded Report: This report prints throughout the day. A pharmacist reviews this report to determine which meds to load into Patient Medstation System.

viii. Discrepancy and Open Discrepancy Report: This prints daily. It lists per nursing unit all controlled substance discrepancies. It is used by the pharmacist to follow up discrepancies.

ix. Discrepancy and Open Discrepancy Report: This report prints daily. It lists per nursing unit all non-controlled substance discrepancies. It is used by the pharmacist to following discrepancies.

x. Override Report: This report prints daily. It lists per nursing unit all overrides. It is used by the pharmacist to follow up on overrides.

b. The service line to call for PYXIS problems is 800-727-6102.