Virginia Association of Community Services Boards

Medication Repackaging

Preface

In order to repackage medication to assist clients with self administration staff must successfully complete a Board of Pharmacy approved training program, which includes instruction on the following areas:

1. **Theory**
   - Medical terminology
   - Drug classifications, including controlled substances, dosage, measurement and forms
   - Intended purpose and effects of medication
   - Correct and safe techniques of medication repackaging, including, but not limited to, the correct methods to prepare, provide and chart medication
   - Documentation of medication repackaging for each client.
   - Responsibilities associated with control and storage of medication
   - Available medication reference texts or other written materials
   - State and federal statutes and regulations pertaining to medication

2. **Worksite practicum, to include:**
   - An orientation to medications, procedures, and systems at the participant's worksite
   - Demonstration of repackaging and documentation procedures and
   - Successful completion of a competency checklist in the areas of:
     - ✓ Appropriate container selection, usually a pillbox
     - ✓ Proper container preparation according to instructions for administration
     - ✓ Medication selection
     - ✓ Medication counting
     - ✓ Repackaging of medication within the appropriate container
     - ✓ Maintenance of records
     - ✓ Proper storage of medication
     - ✓ Translation of medical abbreviations
     - ✓ Review of administration records and prescriber's orders for the purpose of identifying any changes in dosage administration
     - ✓ Reporting and recording the client's failure to take medication.
     - ✓ Identification, separation and removal of expired or discontinued medication
     - ✓ Prevention and reporting of repackaging errors

Preface

Instructors and Program Director

Instructors for the program shall be either (i) a pharmacist with a current license in any jurisdiction and who is not currently suspended or revoked in any jurisdiction in the United States; or (ii) a pharmacy technician with at least one year of experience performing technician tasks who holds a current registration in Virginia or current PTCB certification and who is not currently suspended or revoked in any jurisdiction in the United States. The CSB Executive Director shall maintain a list of instructors for the program.

The program will award a certificate of completion on successful completion of the program.

Definitions

Dispensing Practitioner: A licensed health professional who has the authority to dispense medications; *a pharmacist is the dispensing practitioner you may be the most familiar with.* Document: To record or write. Documentation of the administration of medications is required on the medication administration record (MAR).

Generic – Derived from the word "Genesis," meaning "The Beginning." It is the first name or the official medical name given to the drug. The name is always the same since it contains some of the original formula. Examples:

Medication	**Generic**	**Medication**	**Generic**
Acetylsalicylic Acid	Aspirin ASA	Chlorpromazine	Thorazine
Acetaminophen	Tylenol APAP	Risperidone	Risperdal
Ibuprofen	Motrin	Clonazepan	Klonopin

Definitions

Generic Substitution – When a doctor prescribes using a drug's trade name, it is legal to dispense a different brand from the one specified as long as it has the same generic name. (For instance, if a doctor writes for Datril, the pharmacy may dispense Tylenol, since both drugs have the same generic name acetaminophen. In this way, pharmacies only have to stock one brand of a drug, and will usually purchase the least expensive brand).

- Drugs made by different companies may be the same formula, but can differ in color, size, and shape. All have to meet the requirements of the Federal Food, Drug and Cosmetic Act. You may also see drugs labeled as Legend Drugs or non-legend drugs. Legend Drugs may be obtained only with a prescription. Non-legend (medications that do not require a prescription) are over-the-counter drugs.

Label: Information on the medication package; referred to also as medication label or prescription label.

Medication Administration Record (MAR [or "Medication Delivery Record" MDR]): A record that lists all of the medications ordered for the client consumer, including routine or regularly scheduled medications and PRN medications; It is used to document or record the administration or delivery of medications.

Medication: a substance or mixture of substances used in the diagnosis, cure treatment or prevention of disease.

Medication Schedule: Scheduled time of the day when the medication is to be taken (ingested, dissolved in mouth, etc), applied topically, injected, etc.

Medication Pass Schedule: Scheduled time of the day when medications are provided for clients to administer.

Medication Pill Box: A container designed to organize a person's medications to assist in: 1. preventing double dosing; 2. helping to take the medication on time; 3. Save money by helping to take the medication properly; 4. Helping clients feel better through taking medication properly; 5. Helping clients to be more independent. A Medication Pill Box is designed to help people properly take medications. The Pill Box is not a substitute for a doctor, but rather a resource for making sure that your doctor's medication instructions are followed.

Non-controlled Medications (or non-legend drugs): All other medications that are not listed as controlled substances, otherwise known as Over the counter (OTC) medications.

OTC Medications: Over-the-counter or non-prescription medications; medications which can be purchased or obtained without a prescription; however, you need a physician's order to repackage them.

Definitions

Prescription Medications: Medications that can only be obtained or purchased through an order or prescription written by a physician or prescribing practitioner.

PRN: as needed or if necessary.

Prescribing Practitioner: Refers to a licensed health care professional who is authorized to prescribe or order a medication; the prescribing practitioner people are the most familiar with is a physician or doctor. Other prescribing practitioners include physician assistants, family nurse practitioners and dentists.

"Repackaging": removing a drug from a container already dispensed and labeled by a pharmacy or medical practitioner authorized to dispense, for a particular client of a CSB or BHA, and placing it in a container that is designed for a person to be able to repackage his own dispensed prescription medications to assist with self-administration and compliance with dosage instructions. Such repackaging shall not include the preparation of a patient-specific label which includes drug name, strength, or directions for use or any other process restricted to a pharmacist or pharmacy technician under the direct supervision of a pharmacist.

Report: To make known, to give information about something.
Side effects / adverse effects: Any effect other than the desired effect; unwanted effects or adverse reactions from a medication.

Trade Name : Name given to the drug by the manufacturer. There is a great multiplicity of trade names under which a single drug may be sold. These are also known as "Brand Names." Examples:

Abbreviations

Many abbreviations are used in writing medication orders. Common abbreviations include:

s.i.g: Signatura, the "signature" section of a medical prescription, which contains directions to the patient, and the signature of the prescribing doctor

p.o.: by mouth

IM: intramuscular injection

sq (also seen as "SQ"): subcutaneous injection

IV: intravenous

PR: per rectum

h.s.: at hour of sleep (bedtime)

ac: before meals

pc: after meals

q: every, e.g., q 8 h means every 8 hours

q.d.: every day

b.i.d. (also seen as "BID"): twice/day

t.i.d. (also seen as "TID"): three times/day

q.i.d. (also seen as "QID"): four times/day

q.o.d.: every other day

Sl: Sublingual, literally 'under the tongue'

prn: as needed

Five “Rights” of Medication Repackaging

It is our duty and responsibility to ensure health care quality and patient safety.

The individual repackaging medication must check the medication supply against the prescriber's order to ensure that all five items below agree with the prescriber’s order.

1. **Right Patient:** Identify the correct client’s chart, their medication[s], verify client’s chart and medication orders against medication pill bottle.

2. **Right Drug:** Check record for name of drug and compare with drug as dispensed. As many drugs have similar spellings, this needs to be checked carefully.
   For prevention of errors, it is recommended that several checks of the drug are made:
   - when reaching for the package / bottle that contains the drug,
   - when opening the drug,
   - when placing drug ion the appropriate container and
   - when returning the packaging to its storage area.

3. **Right Dose:** Compare ordered dose to dose on hand. At times, calculations may need to be performed to ascertain the correct dose. For example, a scored tablet, or one that is designed and intended for dividing, may need to be halved or quartered in order to administer the correct oral dose. This requires simple division and appropriate technique and or tools, (e.g., a tablet splitter), on tablet splitting.

4. **Right Route:** Check medication record for how to administer the drug and check labeling of drug to ensure it matches prescribed route.

5. **Right Time:** Verify that frequency or time ordered matches current time and place the appropriate quantity in each representative time slot within the medication pill box.

Assisting Clients to Self Administer Medication

Repackaging to assist the client to self administer drugs:

Successfully completion of this repackaging program will authorize a person to remove a drug from a container already dispensed and labeled by a pharmacy or medical practitioner authorized to dispense, for a particular client of a CSB or BHA, and place it in a container **designed to assist with self administration by a client in compliance with dosage instruction.** The program is NOT intended to teach or authorize an individual to administer medication. Assisting with self-administration is different form administering the drug to the client.

Guidance on this point includes:

- Generally, taking pills out of the consumer's bottle or blister pack and handing them to the consumer for on-the-spot ingestion is considered "administration" and is not permitted.

- Handing the bottle or blister pack to the consumer, instructing or verbally prompting the consumer to take (i.e., "self-administer") the medication, coaching the consumer through the steps to ensure compliance, and closely observing the consumer self-administer the medication all fall short of "administer" and are therefore permitted.

- Reading/reviewing written materials about medication effects and side effects, or asking questions to monitor possible side effects, are also not considered "administration", hence are permitted. From *Guidance for Community Service Boards*

Delivery of Medication

Delivery Process

"Deliver" means handing or delivering the already-dispensed medication to the patient or patient's agent. Delivery may be delegated by the person dispensing to other staff, including un-licensed staff. Completion of the Medication Administration training approved by the Board of Nursing is not required for staff who deliver medications,. The act of providing a dispensed supply of medication to a client or the client's agent, (that is more than one dose) is outlined below.

A. Medication Receipt - All of the processes involved in getting medications to the client needs to be considered. This includes the procurement of drug, (delivery by a pharmacy, receipt from client or other), storage and handling of medication, repackaging (if applicable), and inventory control. Unnecessary steps need to be minimized to make sure the right medications are available when needed to reduce the potential for errors.

B. Order repackaging - Medication delivery does not require the act of repackaging. However, if medication is to be repackaged, that occurs under the delivery process. The objective is to maximize the medication preparation process, (packaging, labeling, and quality control) to ensure the right medications are ready for transport to the client. Repeatable processes help remove the inconsistency that increases the chance of errors entering the system's process .

C. Medication Transport and delivery - Medication transport involves many processes — from delivery and documentation to error-proofing. Client medications should consistently be delivered to the right client, the right medication at the right time to the right place. Remember: right patient, right drug, right dose, right route and right time.

Repackaging of Medication

Repackaging Process

Repackaging involves taking a previously dispensed medication and transferring it to another container while maintaining specific items in the labeling of the new container.

These are:

- the client's first and last name;
- the name and 24-hour contact information for the CSB or BHA.

Because dispensed drugs are packaged in blister packages, vials or unit dose containers labeled with the drug name, drug dose, frequency and client's name, moving the medication from one container to another is considered repackaging and not dispensing.

Medication can repackaged in a CSB or BHA program by individuals who have passed an approved medication repackaging training program.

Remember:

1 **Right Patient**

5 **Right Time**

3 **Right Dose**

2 **Right Drug**

4 **Right Route**

Repackaging of Medication

Repackaging Requirements

The repackaging of a dispensed prescription drug order pursuant to § 54.1-3420.2 shall only be done at a CSB or BHA.

Repackaging should be under good lighting and the use magnifying lenses and or keep the medication bottles at eye level to improve the likelihood of proper interpretation of look-alike medication names.

The repackaging of dispensed prescription drugs shall be restricted to solid oral dosage forms and a maximum of a 14-day supply of drugs.

The drug container used for repackaging pursuant to this section shall bear a label containing the client's first and last name, and name and 24-hour contact information for the CSB or BHA.

A clean, well-closed container that assists the client with self-administration shall be used when multiple doses of a repackaged drug are provided to the client at one time. Medication pill boxes must be wiped with alcohol pads when reusing containers. See *"Infection Control"*

A prescription drug order shall not be repackaged beyond the assigned expiration date noted on the prescription label of the dispensed drug, or beyond one year from the date the drug was originally dispensed by a pharmacy, whichever date is earlier.

Encourage clients to ask questions if the appearance of their medication changes. Take time to fully investigate any client concerns.

The training program will review the selection of an appropriate container for repackaging, e.g the container must be designed to facilitate accurate self administration based on the medication and dosage..

The training program will include how to properly prepare the container in accordance with instructions for administration that will vary based on the container chosen. Various examples of appropriate containers will be used in the training.

The training will emphasize preparing containers in a consistent manner to reduce confusion for the patient.

The training will include a review of relevant regulations and code, including: 18VAC110-20-726 (B,10); 18VAC 110-20-726D,2; and 18VAC110-20-726 (B,12}.

Training will emphasize the "Five Rights" throughout.

Laws Related to Repackaging

§ 54.1-3420.2. Delivery of prescription drug order. Section C. Prescription drug orders dispensed to a patient and delivered to a community services board or behavioral health authority facility licensed by the Department of Behavioral Health and Developmental Services upon the signed written request of the patient or the patient's legally authorized representative may be stored, retained, and repackaged at the facility on behalf of the patient for subsequent delivery or administration. The repackaging of a dispensed prescription drug order retained by a community services board or behavioral health authority facility for the purpose of assisting a client with self-administration pursuant to this subsection shall only be performed by a pharmacist, pharmacy technician, nurse, or other person who has successfully completed a Board-approved training program for repackaging of prescription drug orders as authorized by this subsection. The Board shall promulgate regulations relating to training, packaging, labeling, and record keeping for such repackaging.

D. Prescription drug orders dispensed to a patient and delivered to a Virginia Department of Health or local health department clinic upon the signed written request of a patient, a patient's legally authorized representative, or a Virginia Department of Health district director or his designee may be stored and retained at the clinic on behalf of the patient for subsequent delivery or administration.
(1998, c. 597; 2002, c. 411; 2010, c. 28.)

More information can be found on the Virginia Board of Pharmacy Website, at http://www.dhp.state.va.us/pharmacy/.

Medication Orders and Prescription Labels

Components of a medication order:

A record of orders for medication and other treatments is kept in the medical chart. Universally accepted safe clinical practice guidelines and state laws govern the components of medication orders in order to ensure consistency and patient safety. All orders should contain the patient's name, the date and time when the order is written, and the signature of the ordering clinician. The name of the medication is accompanied by the dosage, or how much of the drug should be given; the route of administration, or how the medication should be given (ie, intramuscular injection); and frequency, or how often the drug is to be given.

Components of a prescription label:
Name, address and phone number of pharmacy
Rx number
Date prescription was filled
Patient name
Directions
Name and dose of drug
Number of pills
Names of pharmacist and prescriber
Number of refills
Expiration date

Prescription Label
Community Care Pharmacy
1220 Bank Street
Richmond, VA. 23219
804 786 9489

Rx 200000
04/30/10
Al K. Seltzer
Take one tablet by mouth 3 (three) times daily before meals and at bedtime.

Metoclopramide 10mg #30 tablets

Dsp. By Misses White RPh., Pharm.D
Dr. M. Peacock Refills: 0
Exp. 04/30/11

Recordkeeping

A record of repackaging shall be made and maintained for one year from the date of repackaging and shall include the following:

a. Date of repackaging;
b. Name of client;
c. Prescription number of the originally dispensed prescription drug order;
d. Pharmacy name;
e. Drug name and strength;
f. Quantity of drug repackaged; and
g. Initials of the person performing the repackaging and verifying the accuracy of the repackaged drug container.

Any time a repackaged drug is initially given to a client, and upon any subsequent change in medication order, the client shall be provided written information about the name and strength of the medication and the direction for use. Such written information shall have been prepared by a pharmacy or by a nurse at the CSB or BHA.

Retention, storage and destruction of repackaged drugs

1. Any portion of a client's prescription drug order not placed into a container intended to assist with self-administration may be either given to the client or retained by the CSB or BHA for subsequent repackaging. If retained by the CSB or BHA, the remaining portion shall be stored within the board-approved drug storage location in the original labeled container, and shall only be used for the client for whom the drug was originally dispensed.

2. Any portion of a prescription drug order remaining at the CSB or BHA that has exceeded any labeled expiration date or one year from the original pharmacy dispensing date on the label shall be separated from unexpired drugs, stored within a designated area of the board-approved drug storage location, and destroyed within 30 days of expiration with the written agreement of the client. Remaining portions of discontinued prescription drug orders retained by the CSB or BHA shall also be separated from active stock and either returned to the client or destroyed within 30 days of discontinuance with the written agreement of the client.