Department of Pharmacy

Medication Administration – Transcription of Medication Orders (N 11-11)

Intent:

An accurate and current patient medication administration record (MAR) is critical for accurate medication administration and patient safety. All medication orders will be entered by nursing personnel into the patient’s MAR. A copy of the prescriber’s order will be transmitted promptly to the pharmacy. Nursing should reconcile the updated MAR with the prescribers’ orders and/or the previous MAR prior to using the MAR. The MAR can be maintained through a combination of electronically generated profiles, labels, and/or manual entries. All updates will be checked against the prescribers’ orders (electronic and/or written).

Policy:

1. A computer-generated MAR may be generated, if not available electronically. Pre-printed/paper MARs may be used in certain defined instances (i.e. on OB right at the time of delivery or during the peri-operative period in ASA, the OR Suite, and PACU)

2. Medication orders transcribed onto the MAR must have the following information:
   a. Date that the medication was ordered.
   b. Name of the medication.
   c. Dose of the medication.
   d. Route of administration.
   e. Administration times.
   f. Stop date, if appropriate.
   g. PRN reason (symptoms for which a PRN dose is to be administered), if written as PRN.
   h. Dosage form of the medication.
   i. If a liquid dosage form is used, the dose should be expressed in both milligrams (or grams) and the volume to be administered (volume only necessary for antacids).

3. Standardized time (e.g., military time) is used to record all administration times on the MAR.

4. A copy of all prescribers’ orders will be sent promptly to the pharmacy. If written, each prescriber’s order sheet must be labeled with at least the patient’s name, room number, medical records number, and all other identifying information available on the patient’s identification card. No medications, except in an emergency, will be dispensed by the pharmacy without a valid written medication order.

5. The following patient information must be sent to the pharmacy with the initial prescriber’s order or be readily available to the pharmacist:
   a. Patient name
   b. Room number with bed assignment
   c. Patient ID number
   d. Age (date of birth)
   e. Gender
f. Allergies (drug, food) with specific reactions identified

g. Diagnosis (primary and secondary)

h. Weight

i. Height (needed to calculated doses based on body surface area and for calculating renal function)

j. Pertinent laboratory values

k. Diet restrictions

l. Pertinent medication history

m. Pregnancy/lactation status, if applicable

Additional patient information may from time to time be required for the pharmacy to safely review medication orders. In such cases the pharmacy will request this data.

6. Any changes in patient information such as newly identified allergies, additional diagnoses, etc., will be provided to the pharmacy so that the medication regimen may be reviewed.

7. Any apparent discrepancies between the MAR and the prescribers’ orders will be communicated by nursing to pharmacy to resolve any potential problems.