# OKLAHOMA
# STATE BOARD OF PHARMACY

John A. Foust, D.Ph., Executive Director
4545 Lincoln Blvd, Suite 112 • Oklahoma City, OK 73105-3413
Telephone (405) 521-3815 • Fax (405) 521-3758
www.pharmacy.ok.gov • pharmacy@pharmacy.ok.gov


Approved: August 3, 2011
These guidelines shall be followed for:

## COMINGLING MEDICATION DISPENSING GUIDELINES

These minimum requirements shall be addressed in the policies and procedure of a pharmacy which is dispensing packets containing comingled medications for use in long term care or other group-type facilities.

1. Process by which individual packets are reviewed and the prescription is certified by the pharmacist.

2. If (1) above is less than the total number of packets, the percentage of and/or random number of packets to be reviewed from each prescription or batch. The pharmacy shall report, on at least a quarterly basis, the number and percentage of packets which were found to be incorrect.

3. Process to be use for isolating discontinued medications from the others in the comingled packaging.

4. Process of documentation and destruction of unused or returned medications.

5. Process for relabeling medications, including documentation of relabeling, if that is to be a part of the comingling dispensing cycle.

6. Process for documentation that medications that are returned to the pharmacy for destruction are not used for another patient.

7. Implementation of an internal error reporting system that will include, but not be limited to, number of medications given in error (including additional doses, missed doses, and medications for which there is not a current order for the patient). Statistics and raw data from this error reporting system shall be available to the Board during inspections.

8. Implementation of a continuing performance monitor with reports, on at least a quarterly basis, the total number and percentage of packets which had to be altered in some way (repackaging, segregation of a medication within the dispensed packet by physical barrier, or other such means of altering the administration of the total content of the dispensed packet) due to a change in the patient's medication therapy.

The policy and procedure manual and reports required by this policy shall be available in the pharmacy for review by Board compliance officers/inspectors. The manual shall be written and approval by the pharmacist-in-charge shall be documented prior to initiation of the dispensing of comingled medications under this program. The facility shall be educated in the comingled medication administration process, and such education documented by the pharmacy. The facility shall reference comingled medication administration in their policies and procedures where appropriate.