

# Louisiana Administrative Code

## Title 46 – Professional and Occupational Standards

### Part LIII: Pharmacists

#### Chapter 15. Hospital Pharmacy

##### §1501. Cross References

- A. For all regulations that apply to permitted hospital pharmacies concerning pharmacy practices not specifically stated in this chapter, refer to Chapter 11.

AUTHORITY NOTE: Promulgated in accordance with R.S. 37:1182.

HISTORICAL NOTE: Promulgated by the Department of Health and Hospitals, Board of Pharmacy, LR 14:808 (October 1988), effective January 1, 1989, amended LR 29:2093 (October 2003), effective January 1, 2004.

##### §1503. Definitions

- A. As used in this chapter, the following terms shall have the meaning ascribed to them in this Section:
- Hospital Pharmacy* – a pharmacy department permitted by the board and located in a hospital licensed pursuant to R.S. 40:2100 et seq. For the purposes of this chapter, a hospital pharmacy is one example of a primary care treatment modality pharmacy.
- Registered Patient* – A person receiving health care services within a hospital facility.
- Remote Processing Services* – the processing of a medical order or prescription by one pharmacy on behalf of another pharmacy, including:
- receiving, interpreting, or clarifying a medical order;
  - entering data and transferring medical order information;
  - interpreting clinical data;
  - performing therapeutic intervention relative to medication therapy; and
  - providing drug information concerning a patient’s drug therapy; provided, however, that remote processing does not include the physical preparation or physical transfer of drugs.
- Remote Processor* – a permitted hospital pharmacy in Louisiana which provides remote processing services for another permitted hospital pharmacy in Louisiana.
- Unit Dose* – the packaging of individual prescription doses in a suitable container that have been properly labeled as to the identity of the generic, chemical, or trade name of the drug; strength; lot number; and expiration date. All unit doses qualify as “prepackaging” as used in this chapter. However, all prepackaging is not necessarily in “unit dose” packaging.

AUTHORITY NOTE: Promulgated in accordance with R.S. 37:1182.

HISTORICAL NOTE: Promulgated by the Department of Health and Hospitals, Board of Pharmacy, LR 14:708 (October 1988), effective January 1, 1989, amended LR 29:2093 (October 2003), effective January 1, 2004, amended LR 33:1132 (June 2007).

##### §1505. Hospital Pharmacy Permit

- A. A hospital pharmacy permit shall be required to operate a pharmacy department located within a hospital for registered patients in a hospital. The permit shall be applied for, and renewed, in the manner prescribed by the board in Chapter 11 of these regulations.

AUTHORITY NOTE: Promulgated in accordance with R.S. 37:1182.

HISTORICAL NOTE: Promulgated by the Department of Health and Hospitals, Board of Pharmacy, LR 14:708 (October 1988), effective January 1, 1989, amended LR 29:2093 (October 2003), effective January 1, 2004, amended LR 33:1132 (June 2007).

##### §1507. Pharmacist-in-Charge

- A. The pharmacist-in-charge of a hospital pharmacy permit shall have had at least two years of experience as a licensed and practicing pharmacist prior to accepting the appointment.

AUTHORITY NOTE: Promulgated in accordance with R.S. 37:1182.

HISTORICAL NOTE: Promulgated by the Department of Health and Hospitals, Board of Pharmacy, LR 14:708 (October 1988), effective January 1, 1989, amended LR 29:2093 (October 2003), effective January 1, 2004.

### §1500. Drug Distribution Control

What does this mean?

- A. The hospital pharmacist-in-charge shall be responsible for the safe and efficient procurement, receipt, distribution, control, accountability, and patient administration and management of drugs. The staff of the hospital facility shall cooperate with the pharmacist-in-charge in meeting drug control requirements in ordering, administering, and accounting for pharmaceuticals.
1. Procedure Manual. The pharmacist-in-charge shall maintain written procedures for the safe and efficient distribution of pharmaceutical products and delivery of pharmacy care. An updated copy shall be available for board inspection upon request.
  2. Inventories. The pharmacist-in-charge shall:
    - a. perform an annual inventory on all controlled dangerous substances; and
    - b. maintain a perpetual inventory of Schedule I and II controlled dangerous substances.
  3. Records. The pharmacist-in-charge shall maintain adequate records regarding the use and accountability of controlled dangerous substances. Proof of use records for controlled dangerous substances shall be maintained separately and in such a manner as to be readily retrievable. These records shall specify the following minimum information:
    - a. drug name, strength, and quantity;
    - b. dose;
    - c. full name of patient;
    - d. date and time of administration; and
    - e. name of person administering the drug.

What is added what is subtracted?

AUTHORITY NOTE: Promulgated in accordance with R.S. 37:1182.

HISTORICAL NOTE: Promulgated by the Department of Health and Hospitals, Board of Pharmacy, LR 29:2093 (October 2003), effective January 1, 2004.

### §1511. Prescription Drug Orders

- A. The pharmacist shall review the practitioner's medical order prior to dispensing the initial dose of medication, except in cases of emergency.

AUTHORITY NOTE: Promulgated in accordance with R.S. 37:1182.

HISTORICAL NOTE: Promulgated by the Department of Health and Hospitals, Board of Pharmacy, LR 14:708 (October 1988), effective January 1, 1989, amended LR 29:2093 (October 2003), effective January 1, 2004.

### §1513. Labeling

- A. All drugs dispensed by a hospital pharmacy, intended for use within the facility, shall be dispensed in appropriate containers and adequately labeled as to identify patient name and location, drug name(s) and strength, and medication dose(s). Additionally, compounded preparations and sterile preparations shall be labeled with the expiration or beyond-use date, initials of the preparer, and the pharmacist performing the final check.

AUTHORITY NOTE: Promulgated in accordance with R.S. 37:1182.

HISTORICAL NOTE: Promulgated by the Department of Health and Hospitals, Board of Pharmacy, LR 14:708 (October 1988), effective January 1, 1989, amended LR 29:2093 (October 2003), effective January 1, 2004.

### §1515. Ambulance Service Drugs

- A. Hospital pharmacies that supply prescription drugs, including any controlled dangerous substances, to any authorized ambulance service or emergency medical service shall maintain proper records to ensure control, proper utilization, inventory, and accountability.

AUTHORITY NOTE: Promulgated in accordance with R.S. 37:1182.

HISTORICAL NOTE: Promulgated by the Department of Health and Hospitals, Board of Pharmacy, LR 29:2093 (October 2003), effective January 1, 2004.

### §1517. Pharmacist Absence/Drug Cabinet

Know what must be done for drug cabinets

- A. Pharmacist Absence. In the absence of a licensed pharmacist, admittance to the pharmacy by unauthorized persons is prohibited. When the pharmacy is closed, a pharmacist shall be on emergency call.
- B. Drug Cabinets. In the absence of a licensed pharmacist, arrangements shall have been formulated in advance by the pharmacist-in-charge to provide drugs for the patients by the use of drug cabinets.
  - 1. Emergency Use. A drug cabinet is solely intended for the proper and safe storage of needed drugs when the pharmacy is closed and shall be available for emergency use by authorized hospital personnel only.
  - 2. Security. The drug cabinet shall be a securely constructed and locked enclosure located outside the permitted pharmacy ensuring access to authorized personnel only.
  - 3. Inventory. The pharmacist-in-charge shall be responsible for the selection and quantity of the drugs to be maintained in the drug cabinet and shall maintain a perpetual inventory of any controlled dangerous substances stored in the drug cabinet.
  - 4. Labeling. Medications stored in a drug cabinet shall be properly labeled.
  - 5. Quantities. Prepackaged drugs shall be available in amounts sufficient for immediate therapeutic or emergency requirements.
  - 6. Accessibility. Written medical practitioner's orders and proof of use, if applicable, shall be provided when a drug cabinet inventory is utilized.
  - 7. Inspection. Medications stored in a drug cabinet shall be inspected every thirty days.
  - 8. Policy Manual. A policy and procedure manual shall be maintained to implement the drug cabinet requirements and is to be made available to the board upon request for inspection and approval.

AUTHORITY NOTE: Promulgated in accordance with R.S. 37:1182.

HISTORICAL NOTE: Promulgated by the Department of Health and Hospitals, Board of Pharmacy, LR 29:2093 (October 2003), effective January 1, 2004.

### §1519. Drug Returns

- A. In a hospital with a permitted hospital pharmacy on site, drugs may be returned to the pharmacy in accordance with good professional practice standards.

AUTHORITY NOTE: Promulgated in accordance with R.S. 37:1182.

HISTORICAL NOTE: Promulgated by the Department of Health and Hospitals, Board of Pharmacy, LR 29:2094 (October 2003), effective January 1, 2004.

### §1521. Off-Site Pharmacy Services

- A. Availability. Pharmacy services may be procured contractually from outside the hospital for inpatient administration.
- B. Contractual agreements shall provide for:
  - 1. emergency – the pharmacy provider shall be available for on-call for emergency pharmacy services.
  - 2. storage – adequate drug storage facilities shall be provided to the pharmacy provider.
  - 3. labeling – prescription drugs supplied to hospital inpatients shall be properly labeled to ensure that adequate control, supervision, and recall of medication are monitored.
  - 4. contractual pharmacy service – off-site contractual pharmacy services rendered to the hospital shall be in accordance with federal and state laws, rules, and regulations.
- C. A pharmacy providing off-site contractual pharmacy services to a hospital shall not be considered a hospital pharmacy.
- D. Medications. Prescription medications independently supplied to registered patients shall comply with all appropriate board regulations and statutes and/or hospital rules, regulations, and policies.

AUTHORITY NOTE: Promulgated in accordance with R.S. 37:1182.

HISTORICAL NOTE: Promulgated by the Department of Health and Hospitals, Board of Pharmacy, LR 29:2094 (October 2003), effective January 1, 2004.

Know who can be dispensed to!

### §1523. Outpatient Pharmacy Dispensing

- A. Hospital outpatient dispensing shall require a separate pharmacy permit for the specialty classification(s) under these regulations. All records including the annual inventory of controlled dangerous substances for the outpatient pharmacy shall be maintained and kept separate and apart from that of the inpatient pharmacy, as the outpatient pharmacy may not acquire drugs through the hospital pharmacy permit under the provisions of the Robinson-Patman Act, 15 U.S.C. §13(c).
- B. Nothing in this section shall prohibit the dispensing of certain prescriptions from the hospital pharmacy, as allowed under the Robinson-Patman Act, 15 U.S.C. §13, including:
  - 1. dispensing to the hospital inpatient for use in his treatment at the hospital;
  - 2. dispensing to the patient admitted to the hospital's emergency facility for use in the patient's treatment at that location;
  - 3. dispensing to the hospital outpatient for personal use on the hospital premises;
  - 4. dispensing in the context of a genuine take-home prescription, intended for a limited and reasonable time as a continuation of, or supplement to, the treatment that was administered at the hospital to the recipient while an inpatient, an outpatient, or an emergency facility patient if the patient needs that treatment; or
  - 5. dispensing to the hospital's physicians, employees, or its students for their personal use or for the personal use of their dependents.

AUTHORITY NOTE: Promulgated in accordance with R.S. 37:1182.

HISTORICAL NOTE: Promulgated by the Department of Health and Hospitals, Board of Pharmacy, LR 29:2094 (October 2003), effective January 1, 2004.

### §1525. Remote Processing of Medical Orders

- A. General Requirements
  - 1. A hospital pharmacy may obtain remote processing services from a remote processor provided the pharmacies:
    - a. have the same owner or have entered into a written contract or agreement that outlines the services to be provided and the responsibilities and accountabilities of each pharmacy in compliance with federal and state laws, rules, and regulations; and
    - b. share a common electronic file or have appropriate technology to allow access to sufficient information necessary or required to provide the requested services.
  - 2. A contract or agreement for remote processing services shall not relieve the hospital pharmacy from employing or contracting with a pharmacist to provide routine pharmacy services within the facility. The activities authorized by this Section are intended to supplement hospital pharmacy services when the pharmacy is not operating and are not intended to eliminate the need for an on-site hospital pharmacy or pharmacist.
- B. Access to Patient Information
  - 1. The remote pharmacist shall have secure electronic access to the hospital pharmacy's patient information system and to all other electronic systems that the hospital pharmacist has access to when the pharmacy is operating. The remote pharmacist shall receive training in the use of the hospital's electronic systems.
  - 2. If a hospital pharmacy is not able to provide remote electronic access to the patient information system, both pharmacies shall have appropriate technology to allow access to the required patient information.
- C. Policies and Procedures
  - 1. Hospital pharmacies and remote processors engaging in the acquisition or provision of remote processing services shall maintain a policy and procedure manual for reference by all personnel; it shall also be available for inspection and copying by the board.
  - 2. At a minimum, the manual shall include policies and procedures for:
    - a. identification of the responsibilities of each of the pharmacies;
    - b. protection of the integrity and confidentiality of patient information; and
    - c. maintenance of appropriate records to identify the name, initials, or unique identification code of each pharmacist performing processing functions, the specific services performed, and the date of such services.

AUTHORITY NOTE: Promulgated in accordance with R.S. 37:1182.

HISTORICAL NOTE: Promulgated by the Department of Health and Hospitals, Board of Pharmacy, LR 33:1132 (June 2007).

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