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DEPARTMENT OF MILITARY AND VETERANS AFFAIRS
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VETERANS AFFAIRS BULLETIN
NO. 2-09

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MEDICATION GUIDANCE

1. **PURPOSE.** To provide guidance and information on addressing issues associated with the 30-day medication regime currently established by the Department of Human Services.
2. **BACKGROUND.**
 - a. The State of New Jersey has lost over \$9 million since the inception of the 30-day dosage system last year.
 - b. Each week, throughout the state, discontinued medications (some never opened), costing thousands of dollars, are brought back to NeighborCare in Whippany.
 - c. The VMHs do not get credit for discontinued and returned medications. We pay for the 30 days of the discontinued medication and the 30 days of the new medication.
 - d. Every time a physician writes a new or changed medication order, NeighborCare will automatically fill that order with a 30-day supply of the medication.
3. **MEDICATION GUIDANCE.**
 - a. Physicians are asked to **PLEASE SPECIFY** in the written order **how many days of the medication** NeighborCare is to dispense if it is known that a resident will NOT be taking the medication for a full 30 days.
 - b. For example, Coumadin is the #1 wasted medication in all 15 State facilities. Coumadin doses change frequently, so physicians are asked to order only the needed number of days for a specific Coumadin dosage. Then when the dosage changes, again only order the Coumadin for the required number of days (2 days; 5 days; 7 days; etc.).
 - c. If a physician increases the dosage of a medication (e.g. from 10 mg to 20 mg), the physician is strongly encouraged to work with the medication nurse to determine how they can use up the tablets/capsules/etc. that are already on the med cart. **The nurse must then clearly** transcribe the adjustment made to the dosage by the Physician's Order **on the MAR** (e.g. that two (2) of the 10 mg. tablets/capsules/etc. should be given to make the 20 mg. ordered dose); and also insure that the new dosage is ordered so that it will be available when the "old" tablets/capsules are finished. The Physician's Order must reflect the exact dosage and guidance for administration - for example "use two mg. tabs until all 10 mg. tabs are used, then 20 mg tabs, BID."

- d. When a **brand new medication** is ordered for a resident, it is not known whether or not the resident will be able to tolerate the medication. It is strongly recommended that the physician write a 1 or 2-week (only) order for the **new medication** in order to insure that it is effective and well-tolerated. In this way, we will not be paying for a 30-day supply of a medication that is not effective.

4. **BINGO CARDS.**

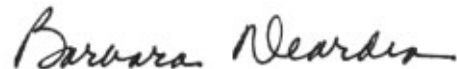
- a. Bingo cards must be used **in numerical order**. Each bingo card is numbered in the corner of the label, and #1 must be used first, then proceed to #2, and so on.
- b. Only **one** bingo card should be opened at a time. We are constantly finding medication carts with 2 or 3 bingo cards opened and in use for the same medication.
- c. Utilizing only one bingo card for each medication will result in there being more room in the med cart drawers. This may ease crowding of bingo cards and alleviate the problems associated with packing too many cards in the med cart drawers.
- d. Nurses must replenish the bingo cards when they are empty. As part of the post-medication-pass cart cleaning process, the medication nurse must remove empty bingo cards and discard them as per VMH policy, and put the next sequentially numbered bingo card(s) into the drawer for the next med pass.
- e. **Discontinued** medication bingo cards must be removed from the medication carts and placed into the bins for return to the pharmacy. Please **do not** leave discontinued medications in the medication drawers. This is a med error waiting to happen.

5. **QUESTIONS AND INQUIRIES.**

Questions and inquiries concerning this bulletin should be addressed to BG (Ret) Frank R. Carlini, Director, Division of Veterans Healthcare services at 609-530-6766 or e-mail Frank.Carlini@njdmava.state.nj.us

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