

**POLICY AND PROCEDURE MANUAL  
PHARMACY SERVICES**

SECTION: DEPARTMENT OF PHARMACY  
SUBJECT: EHR DOWNTIME PROCEDURES

CODE: 1.23.0  
DATE: 2/26/16  
REVISED: 4/19/22  
APPROVED: Tinh Tran, Pharm. D  
MEC APPROVED:  
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**PURPOSE:**

To delineate the procedure for providing pharmaceutical care for patients while the Cerner system is unavailable.

**DEFINITIONS:**

- Scheduled Downtime: the system is not available for use due to a planned event
- Unscheduled Downtime: inaccessible system as a result of an unplanned event
- 724 domain: A read-only version of patient chart, including Medication Administration Record and clinical notes
- MAR: Medication Administration Record
- FIN: Financial Identification Number

**PROCEDURES:**

1. Pharmacist on duty will call IS for information on the nature of the situation, estimated time it may take for the system to return, and whether to proceed with the downtime procedure.
2. Support:
  - a. Pharmacist on duty will contact pharmacy supervisor, who will anticipate staffing needs depending on the information gathered and arrange for additional support as needed.
  - b. Pharmacy supervisor will notify the Director of Pharmacy.
3. MAR:
  - a. If the network is also down, the 724 domain should be accessed from the designated downtime PC.
  - b. Nursing to provide blank MAR forms in each nursing unit.
4. Labels:
  - a. Downtime labels will be used.
  - b. Downtime labels must meet the labeling requirement.
    - Patient Name – FIN number – Room Number
    - Drug generic name and strength
    - Dose and volume
    - Route
    - Quantity to send
    - Date of order
    - Technician/Pharmacist initials

Reviewed: 11/14/2018bdk, 4/19/2022 TT

Approved By: 

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• For compounded products, also include:

- Concentration/strength
- Name and volume of diluent
- Rate or duration of infusion
- A statement “Compounded by the pharmacy”
- Expiration date for compounded products
- Date of order
- Technician and pharmacist initials

5. Medication Orders:

- a. Blank provider order sheets will be available in each nursing unit.
- b. Power plans or order sets will be available on the 724 domain and on the intranet website.
- c. Orders will be sent to pharmacy (faxed, tubed, or delivered).
- d. All orders received should be filed for each unit in the pharmacy.
  - 1) Orders will be filed by Unit and bed number and in chronological order
  - 2) Pharmacy technician filing the orders will keep track of patient movement and transfers.
- e. Medications will not be dispensed without a complete order; the order must be reviewed against the existing MAR or Patient Medication Profile by the Pharmacist for appropriateness.
- f. The correct number of labels should be produced to provide a sufficient number of doses to last through the downtime if system return is expected to be of short duration.
  - 1) Indicate the number of doses dispensed and initials of pharmacist who reviews the order on the printed physician’s order.

6. Workflow:

- a. Changes to workflow will depend on when the downtime occurs.
  - 1) If it is during the day time, pharmacy supervisor will alter the workflow to support operation.
  - 2) If the downtime occurs at night, the night Pharmacy technician will support the night pharmacist in providing pharmaceutical patient care.

7. PYXIS station

- a. PYXIS system will be placed on critical override if necessary.
- b. Medications not available in the Pyxis will be dispensed from the pharmacy.

8. System Return:

- a. Pharmacist on duty will reconcile Pyxis medication removal against the physician’s order.
- b. Pharmacist will check other report functions and initiate or reinitiate any batch runs thereafter.

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9. Recovery:

a. Once Cerner system returns, “on-going” medication orders will need to be re-entered on PharmNet by pharmacists.

1) Orders will require the name of the ordering provider and must be back timed to when they were ordered (time ordered must be determined). Orders that are placed will need to be marked with ‘written’ communication type unless they are phone or verbal orders.

2) All telephone or verbal orders need to be designated as “Phone order” or “Verbal order,” respectively, so that the orders will be routed to the provider’s in-box for co-signing.

3) The printed orders will be initialed when completed.

b. While verifying in PharmNet, the number of charges should equal the number of doses dispensed but the label output should be changed to “0” (zero) under the “Label Copies” box of the “Printing” button so that additional doses are not made in error.

c. Medication administration

a) RN will back chart medication administration on eMAR.

10. Discharge Medications:

a. Written discharge prescriptions can be brought down to the Outpatient Pharmacy by nursing staff, patient, or patient’s family.