



**POLICY AND PROCEDURE MANUAL  
PHARMACY SERVICES**

CODE: 2.07.5  
DATE: 12/19/84  
REVISED: 7/26/19, 4/19/22  
APPROVED: Thinkh Tran, Pharm. D.  
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SECTION: **CLINIC PHARMACY  
OUTPATIENT SERVICES**

SUBJECT: **DISCHARGE MEDICATION**

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POLICY

The Outpatient Pharmacy will supply medications for eligible patients being discharged from the Facility upon electronic order or written order (scheduled medications) from a provider.

Patients with private or group healthcare insurance will be given their prescriptions at discharge to be filled at a community pharmacy of their choice or their group healthcare pharmacy. Medi-Cal and self-pay patients will have the option of having their prescription(s) filled at Rancho's Outpatient Pharmacy or at a community pharmacy. Medi-Cal pending and patients without insurance will have their discharge prescription(s) filled at Rancho's Outpatient Pharmacy.

The full initial quantity will be filled for antibiotics, tapering doses, and controlled substances. If there are any refills on the above medications for non-eligible patients, the community pharmacy will call Rancho's Outpatient Pharmacy for a copy of the prescription and have the prescription transferred to the community pharmacy.

The Outpatient Pharmacy will supply a quantity of discharge medications for not more than 30 days supply with one refill for Medi-Cal, self-pay, Medi-Cal pending, and patients without insurance.

PROCEDURE

1. Prescriptions will be electronically prescribed or on a tamper-resistant prescription (for controlled substances).
2. Prescriptions being dispensed at Rancho are to be e-prescribed or delivered to the Outpatient Pharmacy by 3 P.M. the day prior to discharge. (Prescriptions may be brought to the Outpatient Pharmacy by the patient (or the patient accompanied by a family member or care giver or health care provider). Discharge prescriptions to community pharmacies may be e-prescribed or faxed at the patient's request.
3. In the rare event where prescriptions electronically prescribed to the Outpatient Pharmacy after 3 P.M. the day prior to discharge, the prescriptions will be assessed for immediacy of discharge and as applicable will be integrated with patient waiters.

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Approved By: *Ben Arndt*



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4. The pharmacist will perform medication reconciliation and compare discharge medications with the current medication profile in Orchid. If any issues arise, the pharmacist will notify the prescriber.
5. Prescription format and label will follow the outline as stated in Policy 2.02.0 and 2.03.0. The prescription will contain the following information:
  - a. Name of patient
  - b. Name and quantity of medication (or device) prescribed; strength of medication as applicable
  - c. Directions for use (with “as needed” medications qualified)
  - d. Date of issue
  - e. Name and address of the hospital
  - f. Signature of practitioner; computerized type set of: (1) name of practitioner; (2) California license number; (3) Federal DEA number (4) National Provider Identifier number
6. Scheduled II medications will be sealed by tamper resistant tape
7. If a social worker calls the pharmacy and states that the patient is homeless, the pharmacist will place the medications in durable plastic bags. If any medications require refrigeration, the pharmacist will notify the social worker.
8. Once the discharged prescriptions have been prepared and reconciled, pharmacy will call the unit for staff to pick up the prescriptions. Staff must bring the patient’s sticker label and sign the discharge medication log. Only a licensed nurse (RN, LVN, etc.) or physician may pick up controlled substance prescriptions. If patient family member or designated person comes to pick up medication, they must have the patient sticker label.
9. A pharmacist or Registered Nurse will ensure that each patient with discharge medications receives counseling regarding each of his/her medications. The information should include, but not be limited to the following:

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- a. Name and description of the medication.
  - b. Dosage and dosage form.
  - c. Route of administration.
  - d. Duration of drug therapy.
  - e. Indication for use.
  - f. Precautions for preparation and administration by the patient, including techniques for self-monitoring drug therapy.
  - g. Awareness of common significant adverse effects or interactions and the action required if such effects occur.
  - h. Storage of medications.
  - i. Action to be taken in the event of a missed dose.
  - j. Prescription refill information.
10. If the Nursing unit receives discharge medications for a patient, and the discharge is rescinded, Nursing will ensure that the discharge medications for that patient are returned to the Outpatient Pharmacy without delay. If the Outpatient Pharmacy is closed, Nursing will send the discharge medication(s) down to the Inpatient Pharmacy in a sealed tamper-evident bag and the Inpatient Pharmacist and Nurse will log the receipt of the discharge medication(s) by the Inpatient Pharmacy. The returned discharge medication(s) will be sent to the Outpatient Pharmacy when it opens. If the patient is to be discharged on the weekend or holiday, Nursing will make the necessary arrangements with the Outpatient Pharmacy to have the discharge medication(s) picked up from the Inpatient Pharmacy. In the event that the Outpatient Pharmacy receives duplicate prescriptions from the Nursing unit, the result of so-called missing medications on that particular unit, an inquiry will be initiated by the Pharmacy and Nursing to account for the missing medications. An event notification will follow as required.
11. Inpatient Pharmacy procedure for receipt of a rescinded discharge.



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- a. If the patient discharge is rescinded the nursing personnel will bring down patient's discharged medication to the inpatient pharmacy only when the outpatient pharmacy is closed.
- b. Procedure will be similar to the "Patient's Own Medication" storage.
- c. The patient's medication(s) will be sealed, by the nursing personnel, in a taper-proof bag. *Note: multiple bags may be needed*
- d. Pharmacy and nursing personnel will completely fill out the "Discharge Medication Return Form" (see the attached) and sign. Make a copy for the Pharmacy Supervisor.
- e. Attach the original form to the medication bag and place the copy in the narcotic door file holder.
- f. Place the medication bags in the "Returned Patient Discharge Medication" red bin in the "Patient's Own Medication" locker.
- g. On the next business day the inpatient pharmacy will return deliver the discharge medication bag(s) to the Outpatient pharmacy.
- h. The inpatient and outpatient pharmacy personnel will fill out the "Deliver to Outpatient Pharmacy" section of the original form and sign. The form will be then be given to the Inpatient Pharmacy Supervisor.