

ADMINISTRATIVE POLICY AND PROCEDURE

Subject: HOME INTRAVENOUS (IV) THERAPY PROGRAM

Policy No.: B837

Supersedes: August 30, 2017

Review Date: April 25, 2023

Origin Date: August 1, 1998

Revision Date: April 25, 2023

PURPOSE:

To provide patient/family/caregiver adequate preparation and provide continuity of IV therapy upon discharge.

PROCEDURE:

1. Forty-eight hours prior to the anticipated discharge date, the physician writes an order for:
 - a. Discharge teaching of intravenous medication administration.
 - b. Name, dosage, frequency, route, and duration of medications to be administered.
 - c. Associated diagnostic studies, as applicable.

Home Health order will be routed to Case Manager (CM) on Multipatient task list in the electronic health record (EHR).

2. Assessment of patient's appropriateness for this program is done by CM using the following criteria:

- | | | |
|---|-----------|----------|
| A. Oriented x 3 | Yes _____ | No _____ |
| B. Home Support | Yes _____ | No _____ |
| C. Telephone access at home. | Yes _____ | No _____ |
| D. Telephone number to contact patient | _____ | |
| E. IV(arm) access | Yes _____ | No _____ |
| F. Able to learn IV home method | Yes _____ | No _____ |
| (Patient, family or dependable adult) | | |
| G. Transportation from home to clinic available | Yes _____ | No _____ |
| H. Running water | Yes _____ | No _____ |
| I. Refrigeration available | Yes _____ | No _____ |

No to any of these questions means patient may not be a candidate. Notify the physician if the answer is **no** to any of the above.

- | | | |
|---|-----------|----------|
| J. Visual impairment | Yes _____ | No _____ |
| K. History of and/or active Substance abuse | Yes _____ | No _____ |
| L. Unable to read/comprehend | Yes _____ | No _____ |
| M. Patient/family/dependable adult unwilling to learn | Yes _____ | No _____ |

Yes to any of these questions means patient may not be a candidate. Notify the physician if the answer is **yes** to any of the above.

Revised: 7/00, 5/03, 8/17, 4/23

Reviewed: 7/00, 5/03, 8/17, 4/23

Approved By:

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3. If the patient is a candidate for the Rancho Home Infusion Pharmacy Service, then the Case Manager notifies the Clinical Pharmacist of the contracted pharmacy to enroll the patient into the Service.
4. If the patient is a candidate for the Rancho Home Infusion Pharmacy Service, then the Clinical Pharmacist of the contracted pharmacy coordinates home IV medications and supplies.
5. Staff RNs teach patient and/or primary caregiver IV administration according to established protocols.
6. CM completes referral through ORCHID using Ensocare Carefinder Pro and sends to Home Health (HH) agency. CM also telephones referral to HH agency. The CM includes the following information on the referral:
 - A. Height and weight
 - B. Drug allergies
 - C. Venous access site
 - D. Diagnosis/indication for intravenous drug therapy
 - E. Most recent Chem 7, CBC, antibiotic drug levels and any culture results
 - F. Physician orders

In all situations, patients are given a choice of pharmacy to use.

7. When patient is discharged from the hospital the HH agency makes the initial visit within agreed upon time frame.
8. After first HH visit, HH agency calls the Rancho CM (See Administrative P&P 826.5). The Rancho CM and the HH nurse establish a plan of treatment for the patient based upon physician orders. When required, the HH agency arranges for a pharmaceutical company to provide the needed intravenous medications.
 - A. When a change in CM is necessary, the CM notifies the HH agency.
9. When diagnostic lab values are required, these results are communicated by HH agency to the Rancho CM and to the designated clinical pharmacist for his/her review.
 - A. The HH Agency communicates all other pertinent data to the appropriate Rancho CM.
 - B. The Rancho Case Manager communicates all data to the appropriate Rancho physician and Rancho staff.
10. The designated clinical pharmacist will:
 - A. Adjust dosages based upon established protocols that have been approved by Rancho physicians. These protocols are available in the Department of Medicine.
 - B. Communicate all pertinent information to the assigned Rancho CM.
 - C. Send a copy of new orders to Rancho Los Amigos via fax and mail a copy to the CM Department for the physician's signature (for outside clinical pharmacist only). CM Department returns signed copy of physician orders to the Home Health Agency.
11. Patients enrolled in the Rancho Home Infusion Pharmacy Service will be given a return appointment to the infusion refill clinic no later than one week post discharge.
12. Continued follow up care will be determined by the Rancho physician or the patient's assigned Primary Care Provider if not assigned to a Rancho Medical home. This will include a periodic reevaluation to determine the efficacy of intravenous drug treatment.

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13. Intravenous medications are discontinued when:
 - A. The stop date has occurred and there is no renewal order by the physician.
 - B. Physician order is written to discontinue the medication.
14. All documentation of home IV medications is done in accordance with Rancho protocols for documentation.
15. Copies of Physician orders and plans of treatment from the Home Health Agency are sent by the CM Department to Health Information Management to be filed in the patient's medical record.