SUBJECT:

POLICY #: 1273

XI-125 AUTOMATED MEDICATION DISPENSING MACHINE (PYXIS SPECIALTY STATION)

VERSION: 1

APPROVED BY:

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PURPOSE: To provide guidelines for the use of automated medication dispensing

machines (Pyxis) in the Ambulatory Surgical Center (ASC).

POLICY: Pharmacy, Nursing and Anesthesiology staff will follow the procedures

outlined in this policy to utilize Pyxis Med Stations, located in the ORs and

medication room.

DEFINITIONS:

1. Pyxis Med Station: automated medication dispensing machine.

2. Bio-ID: Fingerprint

- 3. Console: Pyxis computer located in the main High Desert Regional Health Center (HDRHC) Pharmacy building that links to all Pyxis stations and stores centralized data including a list of floor stock items, users, and transactions.
- 4. Designated Provider: Licensed staff who has been granted a Power of Attorney by the Medical Director to act as an agent to execute applications for books of official order forms and to sign such order forms in requisition for schedule I and II controlled substances, in accordance with Section 308 of the Controlled Substances Act (21 U.S.C. 828) and part 1305 of Title 21 of the Code of Federal Regulations.
- **5. User:** Anyone who has access to the automated dispensing system. Privileges are defined for individual users or as a group of users (i.e. RN, CRNA, MD).

PROCEDURE:

Access to medications in the Pyxis Stations will be limited to personnel that are authorized, trained, and licensed. Personnel authorized to use the Pyxis System will receive training specific to their defined responsibilities.

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STAFF RESPONSIBILITIES/DUTIES:

A. HDRHC-Pharmacy Responsibilities:

- 1. <u>Pharmacy Director, Pharmacy Supervisor, Pharmacist (Super Users)</u>:
 - Assign users IDs and passwords
 - Add, delete users
 - Manage inventory list and notes
 - Generate and maintain appropriate files as they relate to medication accountability in accordance with policy, state and federal regulations.
 - Final verification of refills filled by technicians

2. Pharmacy Technicians:

- Prepare refills to be checked by pharmacist
- Run station reports

B. Nursing and Anesthesia Staff Responsibilities:

1. CRNA, RN, or Anesthesiologist

- Access the Pyxis Station with Bio-ID or password if indicated
- Enter patient information, if not previously done by registration clerk
- Load and unload medications
- Access Station inventory
- Recover drawer
- Remove and exchange outdated medications
- Fill and refill stock
- Run station reports
- Remove, return, and waste medications
- Resolve discrepancy reports
- Report unresolved discrepancy counts
- Perform inventory counts for controlled substances (weekly), if indicated

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- Witness a waste for controlled substances
- Replace recording paper

2. LVN

May remove, return, waste and witness waste

I. MED STATION ACCESS

- A. Security Access- Bio-ID and if indicated password.
 - The HDRHC Pharmacy Supervisor or the Pharmacist Super User will be responsible for inputting pharmacy and ASC employees at the pharmacy console.
 - 2. Bio-ID shall be the primary method of machine access.
 - 3. Default to ID/Password should only occur if:
 - **a.** The employee tries to use the Bio-ID three times and fails; witness is required for the transaction continuation.
 - **b.** The user's fingertip is injured or not scanning properly password will be given to the employee to use.
 - 4. If Bio-ID is not available, or a user forgets his/her password, the user is required to see the pharmacy with his/her valid identification badge for reset.

B. Security Maintenance

- Permanent user access will be authorized, and monitored by HDRHC Pharmacy. Security authorization, by job title, has been previously determined. The database is maintained in the Pharmacy. Bio-ID does not expire, however password expires every six (6) months.
- 2. When an ASC employee, who has authorized access to the Pyxis, is terminated or transfers out, the ASC Nurse supervisor will promptly inform HDRHC Pharmacy Supervisor. Pharmacy will generate and review an "All users" report biannually to ensure that the list of users is up-to-date and that appropriate privileges are allocated to the users based on job function. Pharmacy will remove all privileges from console as indicated.

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- 3. Passwords shall be selected by the users and must not be shared or transferred to any other person(s).
- Pyxis keys will be locked in a secure area, to be accessed only by Designated Providers.

II. SYSTEM SET UP

A. Schedule II to V medications (controlled substances) need to be verified by the Blind Count (i.e. before removing the medication, user needs to enter the "beginning count"). If a discrepancy is discovered at the time of withdrawal, the user will notify the Designated Provider and assist in the resolution of the discrepancy.

III. REMOVAL, RETURN AND WASTE OF MEDICATIONS USING THE PYXIS STATION

- A. Removing medications from Pyxis Med Station:
 - 1. A user authorized to access the Pyxis Med Station will be able to remove medication for a patient from the Pyxis by Bio-ID.
 - 2. To remove medications: select "Remove Meds" option from the main menu. A list of current patients will appear.
 - Select the patient's name for which medications are needed. If the patient does not appear on the patient list screen, the designated nurse can add the patient at the station.
 - 4. The inventory count on schedule II to V medications (controlled substances) must be verified prior to removing the medication. If the count is inaccurate, you will need to resolve the discrepancy.
 - 5. Contact the pharmacy (for information and assistance), if medications are not available in the station (either non-formulary or not a floor stock item).
 - 6. Log off the system after all transactions (EXIT key). The system will auto logoff after 2 minutes of inactivity.
 - 7. Controlled drug pockets are never to be left open indiscriminately.

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- B. Return a medication from Pyxis Med Station:
 - 1. Any medication that is removed from Pyxis, can be returned to Pyxis if all the following conditions are met:
 - a. Medication must be in the original unopened package
 - b. Multi-dose vials
 - c. The integrity of medication (including labeling) must be acceptable for reuse
 - d. There is no evidence of tampering
 - e. The medication has not expired
 - 2. Items can be returned if the:
 - a. Wrong item was removed
 - b. Provider cancels the order
 - c. Anesthesia provider changed their plan for medication use.
 - Refrigerated medications and Insulin vials will be returned to the refrigerator
 - 4. Narcotics can only be returned to return bin, unless they do not fit in the return bin (ex. Midazolam oral solution 118ml)
 - 5. Larger items: Intravenous fluids can be returned to the pocket
 - 6. To return a medication:
 - a. From the Main Menu, press Return
 - Select a patient and press Go to Items list
 - c. Select the item you want to return
 - d. Press Return items
 - e. The drawer or door opens
 - f. Return the item in the original bin or return bin and close the drawer
 - g. Log off the system by pressing EXIT.
 - 7. The return bin needs to be checked and consolidated weekly by the Designated Provider Prior to the end of shift

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C. Wasting Medications

- The Pyxis Station will document wastage for controlled drugs ONLY
 - a. From the Main Menu, select Waste
 - b. Select a Patient
 - c. Select the medication to be wasted
 - d. Indicate the amount that was wasted and short reason
 - e. A witness will need to enter Bio-ID
- The witness should review and verify the entered waste transaction on the screen before proceeding. The documentation of the wastage should be completed at the time the controlled substance is wasted.
- 3. Wasted controlled drugs are NOT to be returned to the Pyxis Station.
- D. Anesthesia Pyxis: Remove, Return and Waste:
 - 1. To Remove:
 - a. Patient cases
 - b. Select patient
 - c. Select medication
 - d. Follow the instructions
 - 2. To return or waste:
 - a. Go to "patient case info"
 - b. Selection medication
 - c. Follow the instructions

IV. RESOLVING A DISCREPANCY

A. A discrepancy occurs when the physical count does not match the displayed count from Pyxis. The system is programmed to note this transaction only for Scheduled II-V controlled substances.

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- B. If a discrepancy is discovered at the time of withdrawal, the user will notify the Designated Provider and assist in discrepancy resolution. Controlled substance discrepancies will be resolved as soon as possible by:
 - 1. The person discovering the discrepancy, or
 - 2. The person creating the discrepancy
- C. Prior to the end of shift, the Designated Provider will verify that there are no unresolved discrepancies. If an unresolved discrepancy exists, the Designated Provider will ensure that the discrepancy is resolved within 24 hours.
- D. A weekly reconciliation is performed by Designated Providers to ensure all discrepancies have been resolved.
- E. To resolve a discrepancy:
 - 1. From the Main Menu select Menu
 - 2. Press document discrepancy
 - 3. Select discrepancy
 - 4. Press Other
 - 5. Type and write the reason for discrepancy
 - 6. Press Accept
- F. Each discrepancy will have the name of the person documenting the count error and the person with prior access.
- G. If the discrepancy cannot be resolved as above, an activity report can be generated that provides a list of patients that received a particular medication for past 30 days. Each transaction will include the user's name, time, and dose removed. A witness is necessary to document resolution of the discrepancy.
- H. The "resolve discrepancy icon" will disappear from the bottom of the home screen. If unable to reconcile the discrepancy, the Designated Provider will notify HDRHC Pharmacy. Discrepancy reports on controlled substances will be monitored by the Pharmacy on a regular basis.

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- Individuals who frequently cause discrepancies will be counseled and retrained. Individuals who continue to be the frequent cause of discrepancies may lose Pyxis privileges or be referred to OHR for further disciplinary action.
- J. For all controlled substances, if a discrepancy is not resolved in a timely manner (within 24 hours), procedures outlined in the "controlled Drug Loss Policy" need to be followed.

V. RESTOCKING AND PAR LEVELS

- A. HDRHC Pharmacy receives a report through the Pyxis that an item level is lower than the specified levels, and the Pharmacist prepares the medication for pick-up by ASC Nursing/anesthesia team.
- B. The PAR levels will be evaluated on a periodic basis based on usage reports.
- C. Changes to Pyxis Station inventory and/or par levels will be based on HDRHC Pharmacy analysis of usage reports, interdisciplinary collaboration and Formulary revisions as approved by ASC Medical Advisory Committee.
- D. Taking Inventory
 - The Designated Provider will perform inventory for all controlled substances weekly or as needed by running an inventory report and performing a blind count for controlled drugs in each Pyxis machine.
 - 2. From the Main Menu, press inventory
 - 3. Press "select by class"
 - 4. Press "all controlled"
 - 5. Press "inventory section" on the bottom of the page
 - 6. Follow the instruction

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E. Refilling a Station

- 1. The Designated Provider will be responsible for refilling the Stations as needed.
- 2. HDRHC Pharmacy technician will run a fill list report and under the supervision of a HDRHC Pharmacist, prepare all medications.
- 3. HDRHC Pharmacist will check and initial the complete list, including controlled drugs.
- 4. HDRHC Pharmacy technician will notify ASC staff when medications are ready for pick-up.
- 5. The Designated Provider will fill the Pyxis cabinet and a second staff is required to witness all controlled drugs filled into the Pyxis. The Designated provider is to document that the correct controlled drug and quantity of medication was refilled into the proper location in Pyxis.

F. Refilling Stock

- The Designated Provider will verify each item before refilling the Pyxis
- 2. To put medications in the drawer:
 - a. From the Main Menu, press "refill"
 - b. Select the items
 - c. Select "Refill Selected Items"
 - d. The drawer or door opens
 - e. If the verify Count is on, count the items in the pocket
 - f. If the amount matches the amount shown, press Yes
 - g. If the amount does not match the amount show, press No
 - h. Enter the correct amount in the *Actual Count* field and press Count verified

G. Checking for Outdated Medications

1. When medications are refilled, the earliest outdate will be recorded in the machine.

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- The HDRHC pharmacy will track and supply replacement for all medications as they near the outdate time (except for controlled drugs: HDRHC Pharmacy will only notify ASC staff when outdated).
- For all outdated medications, a Designated Provider will outdate the medications, (witnessed by a second licensed staff, if controlled drugs).
- All outdated controlled drugs will be documented in the salvage logbook and signed by two (2) Designated Providers and will be sent back to the main pharmacy.
- 5. Non-controlled medications will be discarded in appropriate waste bins in the clinic.

VI. CONTROLLED DRUG ORDERING

- A. All controlled drugs are to be ordered by the Medical Director or the Designated Provider.
- B. Schedule II controlled drugs:
 - 1. Will be requested from the HDRHC Pharmacy-Purchasing agent utilizing a controlled drug request form.
 - a. This order will be reviewed and verified by a pharmacist.
 - Schedule II controlled drugs will be ordered utilizing the Controlled Substance Ordering System (CSOS) under the pharmacy DEA license.
 - 3. Once CII medications are received by the pharmacy, they are transferred to the ASC DEA account utilizing the standard D.E.A. Form 222, which is filled out by the HDRHC Pharmacist and signed by the Medical Director or the Designated Provider.
 - Date and purchase order number of the invoice of the received controlled drugs will be logged in the logbook in the pharmacy.
 - b. The carbon copy of the controlled drug request form along with the purchaser copy from the 222 form is provided to the designated provider upon pickup.
 - c. These forms will be retained by the ASC for a period of at

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least three years.

- d. An original invoice will be retained by HDRHC Pharmacy for a period of three years.
- Schedule III-V controlled drugs will be ordered from the HDRHC Pharmacy-Purchasing agent utilizing a controlled drug request form.
 - 1. A carbon copy of this form will be kept in the ASC narcotic file.
 - 2. When an order is received it will be noted on the copy with the date and initials of the Medical Director or the Designated Provider.
 - 3. An invoice will be retained by the pharmacy for a period of at least three years.
- D. Schedule II-V controlled drugs that do not fit in the Pyxis Med Station or the Anesthesia Pyxis Machines are stored in a locked safe in a secure area only accessible by the Medical Provider or the designated provider.

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E. The Medical Director or the Designated Provider will add the amount received to the balance recorded in the inventory logbook. The total amount on the inventory log must be reconciled with the actual count in the Safe. The Medical Director/Designated Provider along with a witness will initial next to the new balance confirming the correctness of the count.

VII. MONITORING AND PERFORMANCE IMPROVEMENT

All activity reports may be obtained at the Pyxis Stations or at the Pharmacy console.

Report Name	Frequency	Responsibility
All station events narcotic activity	Weekly	Pharmacy
Inventory/Refill reports	Weekly for anesthesia/Twice a week for Med Station	Pharmacy Technician
Archive Function	Weekly	Auto archive
Outdated Medications	Weekly	Pharmacy Technician/Designated Provider
Inactive users	Bi-annually	Pharmacy/Nurse Supervisor
Controlled Drugs Inventory	Monthly/Weekly	Pharmacy/Designated Provider

VIII. AUDITS

- A. HDRHC Pharmacy will audit all controlled drug activities weekly and compare with the patient's chart to verify that both an order exists and the medication was administered to the patient.
- B. Any discrepancies found will be reported to HDRHC the Pharmacy Supervisor who will follow-up with Nurse Supervisor or Anesthesia Staff to investigate and resolve the discrepancy.

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IX. DOWNTIME PROCEDURES

- A. In the event of a catastrophic power failure or Pyxis Med Station failure, an internal battery backup at the Pyxis Station provides about 60 seconds of power to automatically initiate a safe shutdown of the med station and 40 minutes for anesthesia Pyxis. If the power failure continues, the following actions should be taken:
 - 1. Notify the designated provider.
 - 2. Notify IS Department and Pharmacy.
 - 3. Call the 800 number located on the Pyxis machine for technical support.
- B. The Nurse Supervisor will make the decision to use the Station keys to gain access to the medications in the machine, however, in cases of power failure ALL Pyxis drawers will be locked and no transaction can be made by staff.
- C. All transactions from an unlocked Station will be manually recorded in a logbook located in med station room.
- D. If a support technician comes to fix the machine, the designated provider must be present at all time with the technician until completion of the job (A maintenance log book will be kept with the Pyxis machine indicating when the problems occurs, when the problems are resolved, name of the witness provider and name of the support technician).
- E. Copies of the log sheets will be sent to HDRHC Pharmacy to account for the medications used during downtime.
- F. For controlled substances:
 - 1. Transfer the medications to pharmacy.
 - 2. Use a perpetual controlled substances inventory form to record all the transactions.
- G. The Pyxis Station must be locked and secured at all times.

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X. RECOVERING A JAMMED DRAWER

- A. The recover drawer alert icon will appear on the Main Menu
- B. Push "recover drawer"
- C. Choose the selected drawer to recover
- D. Follow instruction
- E. If the recovery is not successful, contact pharmacy for assistance.

XI. ARCHIVING SYSTEM DATA

A. The system is set up for auto-archiving the Pyxis Station data weekly.

XII. TEMPORARY UNIT CLOSURE

A. Pharmacy must be notified of unit closure to ensure that Pyxis Station is secured.

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