

**OLIVE VIEW-UCLA MEDICAL CENTER/HEALTH CENTERS  
PHARMACY  
POLICY & PROCEDURE**

**NUMBER: 1385  
VERSION: 1**

**SUBJECT/TITLE: DISCHARGE PRESCRIPTIONS**

**POLICY:** Prior to discharge, a registered nurse will be responsible to provide a patient with information for all discharge medications. Discharge prescription orders may be sent to any pharmacy of the patient's choice. Nursing staff will notify Olive View-UCLA Medical Center (OVMC) Outpatient Pharmacy of all discharge prescriptions sent to the pharmacy.

**PURPOSE:** To provide procedures for handling discharge prescriptions at OVMC.

**DEPARTMENTS:**

**DEFINITIONS:**

**PROCEDURE:**

- I. General
  - A. All discharge prescriptions shall be sent to an outpatient pharmacy for processing and dispensing.
    1. All medications supplied for a patient during a hospitalization or patient encounter at OVMC shall not be dispensed to patients at discharge. This includes inhalers, topicals, and eye drops.
  - B. All patients that have in-network insurances, ATP, Medical Pending and Medical Restricted, may have their discharge prescriptions dispensed by OVMC outpatient pharmacy.
  - C. The medical or nursing staff shall notify OVMC outpatient pharmacy when a discharge prescription will be sent for processing
  - D. Discharge prescriptions will be processed in a timely manner upon receipt of discharge notifications
  - E. Prior to discharge, a registered nurse shall provide a patient with information for all discharged medications prescribed and print medication education handouts as needed
    1. Information shall include:
      - a. Use and storage
      - b. Precautions and relevant warning
      - c. Importance of compliance with directions
    2. The nurse shall document this information was provided in the EMR

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II. Processing Discharge Prescriptions at OVMC Outpatient Pharmacy

A. Billing

1. Patients who present themselves to the Pharmacy when Financial Services are not available should not be turned away without offering cash pay (coded as 000) for full prescriptions.
2. Cashiers are normally available to receive cash payments for patient prescriptions Monday through Friday from 7:30 a.m. – 6:00 p.m., as well as Saturday, in the Main Cashier's Office from 8:30 a.m. - 4:30 p.m.
  - a. No cash payments will be accepted after these hours
3. No refunds for financial code changes will be accepted.
4. Patients may only be entitled to a refund for medications which have not left the pharmacy's control.

B. A Discharge Pharmacist will be responsible for processing discharge medications when present.

1. Hours of operation for this service are 8:30 a.m. - 4:00 p.m., Monday through Friday.
  - a. Outside of these hours, discharge prescriptions may be routinely picked up the next day. However, prescription orders received after 4:00 p.m. that may need immediate attention and will be identified by a phone call requesting same day service.
  - b. For weekends, holidays and after hours, designated pharmacists are to handle discharge prescriptions.

C. All discharge prescriptions should follow the process detailed below:

1. All discharge prescriptions are placed in the pharmacy waiting queue to ensure timely processing
2. All discharge notifications are time stamped, copied and given back to nursing personnel
3. The Discharge Pharmacy Technician is responsible for recording all request for discharge medications in the Discharge Prescription Log, that includes time, name, MRN, location and the number of prescriptions
4. Once all discharge prescriptions are completed, the pharmacist will place a communication order to the nursing staff that discharge medications are ready
  - a. If there are any additional prescriptions added or there are changes to the current prescriptions after the communication order is placed, the provider must call the pharmacy to notify the pharmacy personnel.
5. Window 1 shall be designated for discharge prescriptions pick up ONLY

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- a. All discharge prescriptions ready for pick up will be placed on the rack nearest Window 1
- b. Discharge prescriptions may be dispensed to any of the following:
  - i. The patient.
  - ii. Licensed nursing personnel
  - iii. Patient's designee/family member
- c. Schedule II Controlled Substances shall only be dispensed to
  - i. Registered Nurses
  - ii. Patient designee/family member who is 18 years of age or older

**D. Drug Risk Notification**

- 1. A pharmacist shall inform patients or patient's designees of the harmful effects of prescription drugs if drug poses substantial risk in combination with alcohol or may impair person's ability to drive a motor vehicle by placing a warning label on the prescription container. This label shall be required for, but not limited to, the following:
  - a. Muscle relaxants
  - b. Analgesics with central nervous system depressant effects.
  - c. Antipsychotic drugs, including phenothiazines.
  - d. Antidepressants.
  - e. Antihistamines, motion sickness agents, antipruritics, antinauseants, anticonvulsants and antihypertensive agents with central nervous system depressant effects.
  - f. All Schedule II, III, IV and V depressant or narcotic controlled substances which could have an adverse effect on a person's ability to operate a motor vehicle.
  - g. Anticholinergic agents and other drugs which may impair vision
  - h. Disulfiram and other drugs (e.g. chlorpropamide, metronidazole) which may cause a disulfiram-like reaction.
    - i. Monoamine oxidase inhibitors.
    - j. Nitrates

**E. Pharmacist Consultation**

- 1. Pharmacist consultation for discharge medications will only be provided to the patient or patient designee upon request.

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References:	
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