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TYPE: CLINICAL MEDICINE - BEHAVIORAL HEALTH

POLICY: USE OF PSYCHOTROPIC DRUGS

REPLACES: 4/10, 2/14, 8/16

PURPOSE: To define the policy for War Memorial Hospital's Behavioral Health Center's

administration of psychotropic medication.

PROCEDURE:

Psychotropic chemotherapy shall be defined as therapeutic intervention of any medication that falls in the class or family of drugs known as psychotropic/neuroleptic drugs. Any medication administered for the treatment or amelioration of disorders of thought, mood, or behavior. [AR 330.7001(m)]

- 1. Medication shall be administered by a physician, registered nurse, or licensed practical nurse. Graduate nurses and graduate practical nurses can administer medication providing they have been oriented and have satisfied the hospital requirements to administer medication. Nurse interns can also administer medication providing they are under the direct supervision of the registered nurse whom they are working under.
- 2. Medication shall not be used as a punishment, for staff convenience, or as a substitute for other appropriate treatment.
- 3. Patients shall be evaluated for medication effectiveness daily and at least once per week at the treatment team meeting.
- 4. Informed consent for psychotropic medication shall be obtained prior to the initiation of the psychotropic medication, unless it is used to prevent injury, or the patient is under court order to receive the medication and refuses to consent. [AR 330.7158(8)(a)-(e)]
- 5. The physician or nurse will provide a verbal and written explanation of the psychotropic medications prescribed, including but not limited to the indication of use, dosages, and the common side effects or adverse effects of the medication. This is to be documented on the medication consent form and in the multidisciplinary education record. (MHC 330.1719)
- 6. Hospital medication policies/procedures shall be followed in addition.
- 7. Prescribed medications shall be administered per policy #08.001, Medication Administration, with the following exceptions/additions:
 - A. Physician shall be notified when extra-pyramidal side effects develop.
 - B. A provider may administer chemotherapy to prevent physical harm or injury after signed documentation of the physician is placed in the resident's clinical record and when the actions of a resident or other objective criteria clearly

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demonstrate to a physician that the resident poses a risk of harm to himself, herself or others. [AR 330.7158(8)(c)]

- 8. Initial administration of psychotropic chemotherapy may not be extended beyond forty eight hours (48) hours unless there is consent. [AR 330.7158(8)(d)]
- 9. The duration of psychotropic chemotherapy shall be as short as possible and at the lowest possible dosage that is therapeutically effective. [AR 330.7158(8)(d)]
- 10. The psychotropic chemotherapy shall be terminated as soon as there is little likelihood that the patient will pose a risk to harm his or herself or others. [AR 330.7158(8)(d)]
- 11. Additional courses of chemotherapy may be prescribed and administered if a patient decompensates and again poses a risk to his or herself or others.
- 12. Psychotropic medication shall not be administered to an individual who has been hospitalized by medical certification or by petition on the day proceeding and on the day of his/her court hearing unless the individual consents, or unless the administration of the psychotropic drug is necessary to prevent physical injury to the individual or others.
- 13. Provider shall document the administration of all medication in the recipient's clinical record. [AR 330.7158(6)]

CROSS REFERENCES AND LEGAL AUTHORITY

- A. PUBLIC ACT 258 OF 1974 AS AMENDED MI MENTAL HEALTH CODE SECTIONS 330.1100A, 330.1748, 330.1719
- B. MI DEPARTMENT OF COMMUNITY HEALTH ADMINISTRATIVE RULES AR 7158

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APPROVED BY: Dr. Paul Sorgi, Medical Director

APPROVED BY: Recipient Rights Committee

APPROVED BY: Medical Executive Committee

Date: May 8, 2015

Date: May 13, 2015

Date: June 15 2015

Date: Sep. 4, 2015

Date: Sep. 9, 2015

APPROVED BY: Medical Executive Committee

Date: Aug. 21, 2015

REVIEWED BY: Corinna Haller, Director of Nursing & Date: July 14, 2016

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APPROVED BY: Marla Bunker RN BSN MBA, VP Nursing/Operations Date: July 17, 2016 **APPROVED BY:** Dr. McCullough for Medical Executive Committee Date: Aug. 1, 2016

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APPROVED BY: Recipient Rights Advisory Committee Date: April 28, 2017 **APPROVED BY:** Marla Bunker RN BSN MBA, VP Nursing/Operations Date: June 16, 2017 **APPROVED BY:** Robert Mackie, MD – for MEC Date: July 13, 2017