

State of Iowa Department of Corrections Policy and Procedures

Policy Number: HSP-403

Applicability: Institution

Policy Code: Public Access

Iowa Code Reference: 653-13.2

Chapter 6: Health Services

Sub Chapter: Pharmacy

Related DOC Policies: N/A

Administrative Code Reference: N/A Subject:

Prescribing Standards

ACA Standards: 5-ACI-6A-43(M)

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Yohe Effective Date: January 2025

Authority:

1. PURPOSE

To assist medical practitioners within the Iowa Department of Corrections (IDOC) in following basic guidelines for prescribing practices.

2. POLICY

It is the policy of the IDOC to optimize prescribing practices.

3. DEFINITIONS - As used in this document:

Licensed Practitioner - An individual who possesses the ability and licensure to prescribe medication, e.g. Licensed Medical Practitioner, Dentist, Optometrist, Licensed Medical Practitioner Assistant, Nurse Practitioner.

4. PROCEDURES

- A. IDOC health care practitioners will utilize their clinical expertise as well as nationally accepted clinical practice guidelines to optimize the use of medications, the overall quality of health care, and the utilization of health care

resources. A Preferred Product List has been developed by the Medication Review Committee with the approval of the IDOC PT/HS Committee consistent with clinical practice guidelines and the cost effective management of pharmacological interventions.

- B. When an IDOC pharmacist consults with an IDOC prescribing practitioner to clarify or change a drug order, all agreed upon clarifications and/or changes and their rationale, if applicable, must be documented by either the pharmacist or the prescribing practitioner in the medical record.
- C. All recommendations from off-site practitioners must be reviewed and approved by the IDOC practitioner prior to implementation. All medication orders from off-site referrals must be entered into ICON under a DOC practitioner's name, not that of the off-site provider.
- D. Controlled substance medications for the treatment of acute and chronic pain shall be prescribed in accordance with **Iowa Code 653-13.2** guidelines for patient evaluation: establishment of a treatment plan, informed consent, periodic review, consultation/referral to UIHC pain management professionals, and, if necessary, proper documentation and Licensed Medical Practitioner-patient agreements. Orders for Schedule III through V controlled substance medications for pain shall be assigned durations appropriate to the indication and symptoms, but not to exceed 30 days.
- E. The use of Benzodiazepines shall be restricted. Because of their high potential for abuse/dependence, their contraindication for use in individuals with a history of substance use disorders, and their high yard value, Benzodiazepine use is to be reserved for those patients with a "SMI" diagnosis in the acute levels of care when ongoing stabilization is necessary. The IDOC Clinical Practice Guideline for Benzodiazepines provides complete information on the agreed-upon usage and prescribing for these medications.
- F. Prescriber's orders for Schedule II controlled substances will providers to provide non-refillable prescriptions, in accordance with Federal and State Regulations. A new prescription order will be necessary every 30 days for long-term maintenance medications, such as medications for pain or stimulants for mental health conditions. For some medications, multiple prescription orders may be written for the same Schedule II controlled substance with multiple prescription orders having the combined effect of allowing the patient to receive

up to a 90-day supply of that controlled substance. Each 30-day prescription order may be the same medical ICON encounter or prescription, but must specify the beginning and ending date of each prescription.

- G. In the absence of a Licensed Medical Practitioner-specified duration of therapy, all orders expire automatically after 10 days; prescription orders for controlled substances expire automatically after 5 days. (See IDOC Policy **HSP-405 *Controlled Substances***.) Orders for non-controlled substances shall not exceed one year.
- H. Prescription renewal should be preceded by an examination or a review of pertinent clinical data recorded in the health record over the course of therapy to evaluate progress and assess the need for continuing the medication. This examination or chart review is documented by a note in the clinical record.
- I. All a patient's medication orders will be discontinued for:
 - a. A hospital admission of any duration;
 - b. A temporary absence from the institution of a duration of more than 30 days (court order, furlough, etc.)
- J. Any orders to discontinue medications may be written to either "stop immediately", in which case the medication will be stopped before the pharmacy processes the order, and will no longer show up in medical ICON to be administered during pill lines; or it can be written to "stop when pharmacy processes" in which case the medication will continue to be available in ICON for administration until the order has been processed by the pharmacy and the RX has been discontinued in the pharmacy profile.
- K. Treatment protocol medications may be administered by nursing staff through established protocols authorized by the PT/HS Committee. Duration of therapy is specified in treatment protocol. The administration of Treatment Protocol medications and the indication for the use of that medication will be appropriately documented in the medical record.
- L. Nursing protocol medications may be ordered by nursing staff for specific medical conditions as specified in the established protocols authorized by the PT/HS Committee. Prescription medications ordered by nursing protocol shall be entered under the name of the facility's Licensed Medical Practitioner or

designee, and shall be ordered only for the indication and duration specified in the protocol. Administration of Nursing Protocol medications will be appropriately documented in the medical record and the entry for any medications ordered will be co-signed by the appropriate Licensed Medical Practitioner.