



**MONTANA STATE HOSPITAL
POLICY AND PROCEDURE**

**LICENSED INDEPENDENT PRACTITIONER REVIEW OF
PATIENT MEDICATION REGIMEN**

Effective Date: May 24, 2018

Policy: PS-03

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I. PURPOSE: To ensure patients at Montana State Hospital (MSH) are free from unnecessary or excessive medications as per Montana Codes Annotated (M.C.A. 53-21-145).

II. POLICY:

- A. The attending licensed independent practitioner is responsible for all medications given or administered to a patient.
- B. A medication may not be administered unless there is a written order by an Licensed Independent Practitioner.
- C. Notation of each individual's medication must be kept in the individual's medical records.
- D. Review of a patient's drug regimen by the attending Licensed Independent Practitioner will be done no less than weekly.
- E. Medications may not be used as a punishment, for the convenience of staff, as a substitute for a treatment program, or in quantities that interfere with the patient's treatment program.

III. DEFINITIONS:

- A. **MAR:** Medical Administration Record, which lists all medications that a patient is taking at the given time.
- B. **Licensed Independent Practitioner:** an active, provisional or part-time physician or APRN and or CNS who attends to the care of the patients at MSH.

IV. RESPONSIBILITIES:

- A. The attending Licensed Independent Practitioner is responsible for reviewing the MAR weekly to determine the appropriateness of all medication administered.

B. Pharmacy and Nursing department will ensure each patient's MAR is updated as needed and reflects all the current medications.

V. PROCEDURE:

A. In accordance with current Montana statute, the attending Licensed Independent Practitioner will review the drug regimen of each patient admitted under his or her care on a weekly basis.

B. On a weekly basis, the attending Licensed Independent Practitioner will review the MAR on each patient (see sample attached). At that time, the Licensed Independent Practitioner will initial the MAR to document the drug regimen has been reviewed and is appropriate. If changes are necessary, this will be recorded on the Progress Notes and signed by the Licensed Independent Practitioner. The date the review takes place will also be recorded on the MAR.

VI. REFERENCES: M.C.A. 53-21-145.

VII. COLLABORATED WITH: Director of Nursing, Medical Director, Pharmacy Director.

VIII. RESCISSIONS: PS-03, *Practitioner Review of Patient Medication Regimen* date August 1, 2012; PS-03, *Practitioner Review of Patient Medication Regimen*, dated July 13, 2009; PS-03 *Practitioner Review of Patient Medication Regimen* dated August 22, 2006; PS-03 *Practitioner Review of Patient Medication Regimen* dated June 6, 2003.

IX. DISTRIBUTION: All hospital policy manuals.

X. ANNUAL REVIEW AND AUTHORIZATION: This policy is subject to annual review and authorization for use by either the Administrator or the Medical Director with written documentation of the review per ARM § 37-106-330.

XI. FOLLOW-UP RESPONSIBILITY: Medical Director

XII. ATTACHMENTS: None.

Signatures:

Jay Pottenger
Hospital Administrator

Thomas Gray, MD
Medical Director