

Pharmacy and Therapeutic Committee

1. The Pharmacy and Therapeutic Committee (PTC) is an advisory group that considers essentially all the matters related to the use of drugs in a hospital including evaluation of drugs & dosage forms and safe use of investigational drugs.
2. It is responsible for framing policies and procedures for selection, procurement, dispensing, labeling, availability, administration, and control of drugs throughout the hospital.
3. This committee is composed of physicians, pharmacists and other health care professionals selected with the guidance of the medical staff.
4. It is a policy recommending body to the medical staff and the administration of the hospital on matters related to the therapeutic use of drugs.
5. It encourages rational use of drug in the hospital and also monitors issues relating to drug safety.
6. One of the most important functions of PTC is to prepare and update hospital formulary, which provides information on various drugs to be used in the hospital.

Organization of Pharmacy and Therapeutic Committee

The constitution of PTC committee includes :

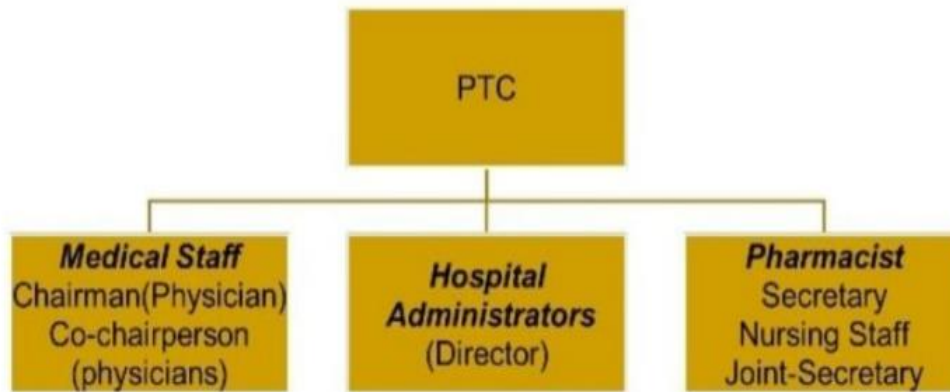
1. Facility medical staff and other prescribers
2. Pharmacist
3. Nurse
4. Administrators

Additional supporting PTC members may include:

1. Quality improvement manager
2. Medication safety leaders
3. Informaticists and other healthcare
4. Professionals and staff who participate in the medication-use process
5. Patient and family engagement advisors

Composition of PTC:

- Composition of PTC might vary from hospital to hospital. It may composed of :
 1. At least *three physicians* from the medical staff
 2. A *pharmacist*
 3. A representative of the *nursing staff* and
 4. An hospital administrator with his or her designated an ex-officio member of the committee one of the *physicians* may be appointed as the *chairman* of PTC. The *pharmacist* functions usually as the *secretary* and therefore, he is designated as the Secretary of the committee.



Objective of the PTC:

- The PTC has 3 major roles to play. These are
 - 1) **Advisory**
 - 2) **Educational**
 - 3) **Drug safety and adverse drug monitoring**

Advisory:

- The committee recommends the adoption of policies or assists in the formulation of broad professional policies regarding evaluation, selection and therapeutic use of drugs in the hospital.
- The committee serves in an advisory capacity to medical staff and hospital administration in all matters pertaining to the use of drugs, including the investigational drugs.
- It makes recommendations concerning the drugs to be stocked in hospital patient care areas.
- The committee advises the pharmacy in implementation of effective drug distribution and control procedures.

The committee develops and compiles a formulary of drugs and prescriptions of formulations accepted for use in the hospital.

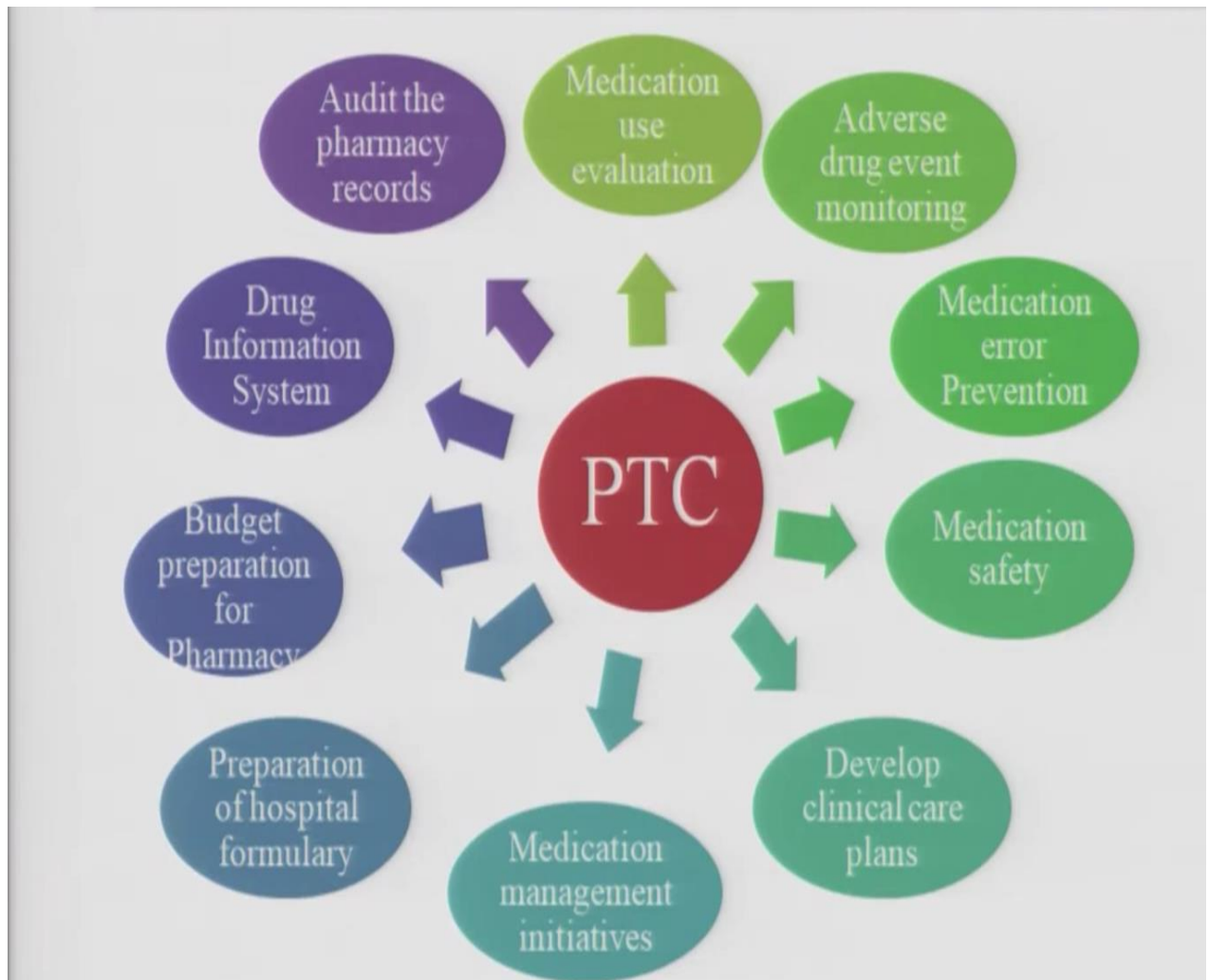
The committee should minimise duplication of the same basic drug, drug safety, and cost.

It establishes or plans suitable educational schemes for the hospital's professional staff on the matters related to the use of drugs.

Drug safety and adverse drug monitoring:

- This function is assigned to or taken up by the PTC and it should be continuous scheme of exerting vigilance.

Functions of Pharmacy and Therapeutic Committee



POLICIES OF PHARMACY AND THERAPEUTIC COMMITTEE

The use of drugs in hospital is controlled by establishing different policies. Following examples of thoroughness required.

1. Proposal of a new drug for the hospital formulary shall be submitted on a formulary request form to the pharmacy department.
2. Drugs evaluated and approved by the committee will assigned to one of the following categories:

Formulary drug: FDA approved drug which is essential for good patient care and with well-established usage. Once accepted as a formulary drug, it may be prescribed by all members of the attending and house staffs.

Drugs approved on a conditional trial period: A drug approved by FDA for general use but which the committee will evaluate for a 6 to 12 month period final consideration During this period, the drug may be prescribed by all members of the attending and house staff.

Specialized formulary drug: FDA approved drug recommended for use in specialized patient care.

Investigational drugs: FDA approved drug for a specific use by its principal investigator and designated associates. Such drugs are not commercially available.

3. Drugs which do not qualify for the four categories listed above shall be considered as "Non-Formulary Drugs" and will not be stocked in the pharmacy.

4. The committee is responsible for the rules and regulations which governs pharmaceutical company representative's activities in hospital.

5. The pharmacy department is authorized to dispensed drugs according to policies and procedures of the committee.

6. The pre-signing of blank prescriptions or drug orders is prohibited.

7. Drug Recall: After receiving the drug recall notice, all the drugs will be removed and replaced. This information is sent to all the staff and respective hospital department.

8 The pharmacy department is authorized to dispense drugs according to policies and procedures of the committee. According to the formulary system, all drugs will dispensed on the basis of generic names to avoid duplicate inventory and achieve a cost saving. Physicians may specify a specific brand name drug when deemed necessary.

9 The committee is responsible for the rules and regulations which governs pharmaceutical company representative activities within the hospital.



Inpatient Prescription

Inpatients are admitted patients in hospital, stay there for treatment till they are discharged. There are four types of dispensing system for inpatients.

1. Individual Prescription Order System

2. Complete Floor Stock System

3. Combination of Individual Prescription and Floor Stock System

4. Unit Dose Dispensing System

Inpatient Prescription:

a. Routine Drug Orders: A physician's medication order written on inpatient order form is deemed a legal prescription. A legible copy of the medication order must be forwarded to the Pharmacy and must include following information:

- The patient's address information.
- The name of the nursing unit.
- The name and strength of each drug.
- Directions for frequency of administration.
- The route of administration.
- The signature of the prescribing physician.
- The date and time that the order was written.
- Order written by medical students must be counter signed by a member staff.

b. IV Orders: Orders for intravenous medications must be written in the same manner as routine drug Orders and must include the following additional information.

- The exact quantity of the drugs which must be added.
- The exact volume and name of the infusate solution.
- Specific directions for administration such as IV drip, IV bolus, IV push, etc.
- Specific times to hang infusate solution and drip rate.
- Specific directions for continuing or discontinuing any IV medications.

c. Total Parenteral Nutrition (TPN):

- TPN designed to serve as a nutritional infusion providing essential amino acids, carbohydrates, and electrolytes for patient incapable of ingestion, digestion, or absorbing food substances given by mouth.
- Ordering: The TPN mixtures may only be prescribed by an authorized house staff physician in conjunction with a dietician through consultation.
- A 24 hour supply is to be ordered by the physician each morning.
- Only electrolytes and vitamins may be added to hyper-alimentation solutions.

d. Self-Medication: Only nitroglycerine and antacids may be left at the patient's bedside for self administration if so ordered by the physician. The quantity of nitroglycerine is limited to 10 tablets which must be counted by the nurse at the conclusion of each shift and charted in the patients' medical record. Antacids must be recorded and replenished in the same manner.

e. Medication brought to the Hospital by Patients: Medication brought into the hospital by the patient may not be kept at the patient's bedside. Medications are shown to the physician, and then send home with responsible family member or friend.

f. A new medication order must be written by the physician if a change is wanted in route of administration or in dosage.

h. Discharge Prescriptions: A separate prescription is required for each medication which the patient is to take home. Each prescription must contain the following information:

Patient address information.

Name of the drug and strength.

Quantity to be dispensed.

Specific instructions for patient administration.

Number of refills.

Signature and printed name of physician.

Outpatient Prescribing:

- a. The hospital requires that a prescription be written for any drug or medical supply which is to be dispensed for hospitalized patients at discharge, clinic patients, and employees., Such prescriptions may only be written on hospital prescription forms in compliance with all regulatory agencies.
- b. Information requires on prescription:
 - Address patient's information.
 - Date
 - Name and strength of medication
 - Quantity to be dispensed
 - Specific information for patient administration
 - Specific number of refills
 - Signature and printed name of the physician.