



CLINICAL POLICY and PROCEDURE Self-Administration of Medications

A. EFFECTIVE DATE:

May 18, 2021

B. PURPOSE:

To establish guidelines for self-administration practices of medications

C. POLICY:

1. Patients should not self-administer medications.
2. If patient self-administration of a medication is deemed necessary by the physician (e.g. provider requests a special program to train a patient in preparation for medication administration at home), the related procedure should be maintained.
3. The self-administration of controlled substances is prohibited.

D. SCOPE:

Applies to all UConn Health inpatients and outpatients receiving medications dispensed from John Dempsey Hospital Pharmacy

E. DEFINITIONS:

None

F. MATERIAL(S) NEEDED:

None

G. PROCEDURE:

While self-administration of medication is discouraged, the following procedure should be maintained if it is deemed necessary.

1. Medication for self-administration must be dispensed from the hospital pharmacy supply and labeled in the same manner as an outpatient prescription.
2. The prescriber must specifically state on the order with the intended medication name, "patient may self-administer", and indicate dosage, route and frequency of administration. If the patient's nurse and /or pharmacist believes that this is not safe or appropriate the LIP will be called to discuss the concern to reach a resolution.

3. The primary nurse assigned to a patient, is responsible for monitoring the patient's self-administration of the medication. The medication administration record will note that the patient is self-administering their medication(s). The nurse will document on the medication administration record the patient took the medication by noting the time administered on the record. The nurse will provide education to the patient and/or caregiver on the medication with the following information included but not limited to: medication name, type, indication for use, route, frequency, administration, and dose. The nurse will verify that the patient is administering the medication properly.
4. Medications for self-administration will have appropriate directions printed on the label on the medication container and each medication will be issued to the patient in an appropriate container.

H. ATTACHMENTS:

None

I. REFERENCES:

Joint Commission Standard Medication Management Standard 06.01.03

J. SEARCH WORDS:

Self-administration, medication

K. ENFORCEMENT:

Violations of this policy or associated procedures may result in appropriate disciplinary measures in accordance with University By-Laws, General Rules of Conduct for All University Employees, applicable collective bargaining agreements, the University of Connecticut Student Code, other applicable University Policies, or as outlined in any procedures document related to this policy.

L. STAKEHOLDER APPROVALS:

On File

M. COMMITTEE APPROVALS:

None

N. FINAL APPROVAL:

- | | |
|---|---------------------------|
| <ol style="list-style-type: none"> 1. <u>Bruce T. Liang, MD (Signed)</u>
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 Interim Chief Executive Officer & EVP for Health Affairs
 Dean, School of Medicine | <u>11/08/2022</u>
Date |
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 Anne D. Horbatuck, RN, BSN, MBA
 Clinical Policy Committee Co-Chair | <u>11/02/2022</u>
Date |

3. Scott Allen, MD (Signed) 11/04/2022
Scott Allen, MD Date
Clinical Policy Committee Co-Chair
4. Caryl Ryan (Signed) 11/04/2022
Caryl Ryan, MS, BSN, RN Date
Chief Operating Officer, JDH
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O. REVISION HISTORY:

Date Issued: 7/15/75

Date Revised: 8/3/93, 1/15/91, 11/10/97, 06/22/00, 10/16/03, 9/2/10, 9/11/12, 7/17/15, 2/28/19,
4/2/21

Date Reviewed: 4/2/21