



NEONATAL MEDICATION PROTOCOLS

SCHEDULE 8 AND SCHEDULE S4R MEDICATIONS

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NCCU Clinical Guidelines
KEMH/PMH
Perth, Western Australia

SCHEDULE 8 AND SCHEDULE S4R MEDICATIONS

Schedule 8 and Schedule S4R medications will be ordered and administered in accordance with the Poisons Act and Regulations 1965 and the Hospital Policy WO46 Medicines-accountability, storage and reporting requirements

Ordering

- **S8 and S4R medications are on imprest in SCN KEMH and will be ordered by a Pharmacy Technician and delivered by a Pharmacist twice a week.**

OR

- A RN must complete the requisition for Schedule 8 and S4R medications. This must include the ward number, medication, strength and quantity required. Any unused lines should be crossed out. The RN ordering the medication must sign (and print his or her surname and designation beside the signature) and date the requisition form.
- A requisition book is kept on each ward, and must only be used by that ward and must be kept in a locked cupboard. New requisition books should be obtained from the Ward Pharmacist.
- Requisitions will be collected by a pharmacy staff member or delivered directly to the Pharmacy Department.

Checking

- Two RN's will count all Schedule 8 and S4R medications at least once every 24 hours. The entry in the register should be made in red ink and include the date, time, 'checked and correct' (or similar notation), signature of both RN's and the balance.
- Any discrepancy must be reported as soon as practicable using the Schedule 8 and restricted Schedule 4 Medicine discrepancy /loss report form .This form is available on the Intranet.

Prescribing and Administration

A Schedule 8 and S4R medications must be prescribed in accordance with the policy on Prescribing Administration of Medications to Neonates. Every dose of a Schedule 8 or S4R medication will be entered in the Register and show:

- the patient's name
- the date
- the time given
- the amount taken from the stock
- the amount (mg) and volume (mL) administered to the patient
- The amount of medicine discarded if less than an ampoule/syringe is used.
- the balance of stock remaining
- the name of the medical officer prescribing
- the signature of the person administering
- the signature(s) of the person(s) checking

The persons administering must also complete the register in indelible black ink. Their signatures will indicate that the medication has been administered and the remainder of any ampoule has been discarded correctly. All intravenous narcotics must be given by a RN.

Errors

Any entry written in error must not be altered, obliterated or cancelled in any manner. Correction fluids must not be used. An incorrect entry must be marked with an asterisk (*) and corrected by an entry on the next available line to show the current balance and briefly explain the mistake. This entry will be in red ink, dated and signed by the two staff involved. A record must be made in the Register if any medication is wasted.

Broken Ampoules

Any broken ampoule discovered whilst checking or administering from stock must be entered in the Register. The entry must specify the date, time, 'ampoule broken' (or similar notation), number found broken, and balance. This entry will be in red ink, dated and signed by the two staff involved. The Ward Pharmacist must be notified as soon as practicable and given the broken ampoule.

Transfer of Schedule 8 and S4R drugs between wards after hours

- A RN from the ward requiring the S8 or S4R must complete a requisition as described above. The requisition must be completed in full and specify the supplying ward.
- The ordering nurse must proceed to the supplying ward with the requisition, register and any remaining balance of the stock required.
- The supplying nurse must check the requisition, to ensure that it has been completed correctly.
- Supplying ward's register entry - The nurse must remove the required amount from Schedule 8 or S4R Cupboard and complete an outgoing entry in the supplying ward's register. This must include the date, time, ward to which the S8 or S4R is being given, the requisition number, amount given, name of ordering nurse and balance remaining. The receiving and supplying nurse must then sign the Register entry. The entry must be in indelible black ink.
- Receiving ward's register entry - Before leaving the ward, the receiving nurse must sign the entry. The entry must be written in red ink so that it can be distinguished as an incoming entry.

Receipt

The pharmacist must supply the schedule 8 or S4R medication and obtain a receipt as described in the Pharmacy Policy and Procedures Manual. Medications received from inter-ward borrowing are covered above. All Schedule 8 and S4R medications must be secured in a locked cupboard.

Returns

Schedule 8 medications no longer required, or out of date, should be returned to the Pharmacy Department. A RN must complete the requisition for Schedule 8 or S4R medications (as stated above) giving all details regarding the medications to be returned. Additive syringes prepared by CIVAS for specific patients that have not been used must be returned to the Pharmacy for destruction.

Disposal of Partially used infusions

When a narcotic infusion solution is changed or discontinued, any remaining syringe contents are to be discarded into the sink. Two nurses must witness this disposal and sign the IV chart.

Registers and Requisition Books

- The number of the ward to which both Register and Requisition book has been issued must be printed on the respective front covers.
- Every effort must be made to keep books in good order and pages must never be removed.

- Full books must be returned to Pharmacy. The Pharmacy Department is responsible for the issue of new Registers and Requisition books.
- The different medications entered in the Register should be specified in the index at the beginning of the Register. The current page number for each of the medications should also be marked there.
- Balances and page numbers must be documented when stock is either carried or brought forward.

Schedule 8 and S4R Medications Cupboard and Keys

- The keys must remain in the ward or department at all times.
- The Schedule 8 and S4R medications keys must always be in the personal possession of a registered nurse, pharmacist or doctor.
- The shift coordinator should ascertain that the keys have been handed over to a registered nurse on the oncoming shift.
- A person discovering that they have inadvertently removed the keys from the ward or department must return them promptly in person.
- If the keys are missing, the clinical nurse consultant/clinical manager/nurse manager must be notified immediately in hours and the hospital after hours nurse manager notified after hours.
- The chief pharmacist, as the accountable hospital officer must be notified as soon as practicable.
- If deemed necessary, the lock to the Schedule 8 cupboard will be changed as soon as practicable.