PrimaryCare:24

STANDARD OPERATING PROCEDURE DOCUMENT (SOP)

Title	**High Risk Drug Procedure**	**Doc. No.**	**PCS024**
Scope	**All staff**		
Purpose	This procedure identifies best practice for administrative staff and clinicians for prescribing High Risk Drugs. It ensures that prescriptions for High Risk Drugs are only issued to patients when the prescriber is confident that the patient is being adequately monitored and reviewed and therefore ensuring patient safety. High Risk Drugs for the purpose of this procedure are: Lithium Methotrexate Azathioprine Ciclosporin Leflunomide Mycophenolate Penicillamine Warfarin		

PROCEDURE		**RESPONSIBILITY**
1.	Prescriptions for high risk drugs are only issued when patients have had blood monitoring and have been adequately reviewed for the condition for which they are prescribed.	PC24 Clinician
2.	The monitoring will be in line with shared care recommendations or in line with evidence based practice.	PC24 Clinician
3.	High risk drugs will be placed on the patient's acute list of medication to ensure that monitoring is checked at each request. (Refer to Repeat Prescribing Policy – all acute drugs are request issued which ensures that they go into the queries box for signing and are scrutinised by a clinician.)	PC24 Clinician
4.	At the time of signing a prescription for a high risk drug, evidence of monitoring /review MUST be checked by the prescriber before a prescription is issued.	PC24 Clinician

5.	If for any reason monitoring is unavailable then the prescriber/administrator must endeavour to obtain information, if this is not forthcoming the prescriber must make a clinical decision about a prescribing e.g. weekly prescriptions until monitoring / review takes place. This will be documented in the patient notes.	PC24 Clinician
6.	Searches will be undertaken every 6 months to ensure that high risk drugs are being adequately monitored and prescribed safely.	Lead Clinician

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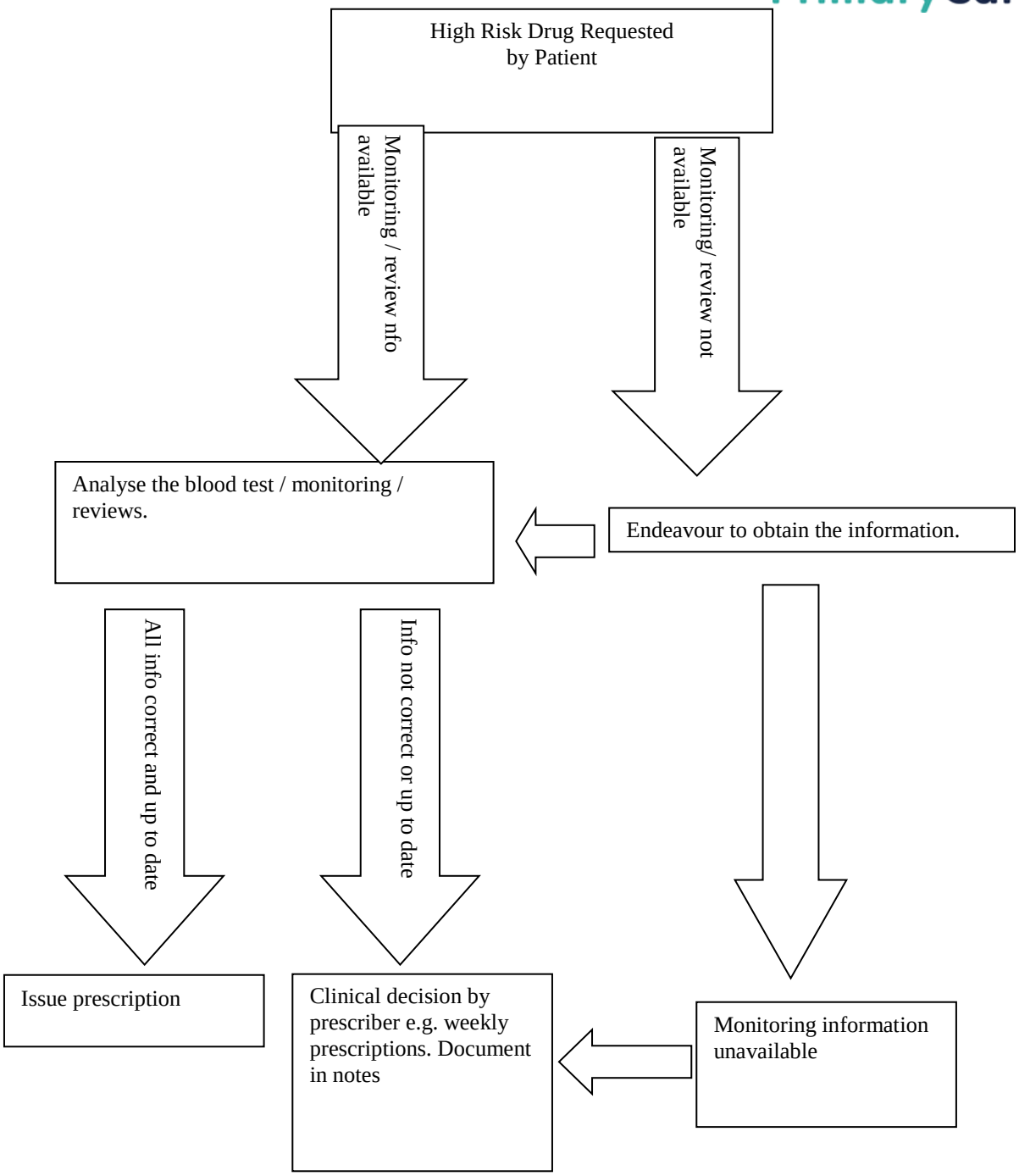
Version	V1
Supersedes	
Approving Managers/Committee	Head of Medicines Management
Date Ratified	November 2018
Department of Originator	Service Delivery
Responsible Executive Director	Director of Service Delivery/Medical Director
Responsible Manager/Support	Head of Service
Date Issued	November 2018
Next Review Date	November 2020
Target Audience	All staff

Version	**Date**	**Control Reason**	**Accountable Person for this Version**
V1	**November 2018**	**New SOP**	**Head of Meds Management**

Reference documents	**Electronic Locations**	**Locations for Hard Copies**
	Primary Care 24 Intranet / Corporate Policies/ Current SOPS/ ……	Standard Operating Procedures File in the Call Centre.

Document Status: This is a controlled document.
Whilst this document may be printed, the electronic version maintained on the PC24 Intranet is the controlled copy. Any printed copies of the document are not controlled.

Appendix 1 - Summary of Procedure for Requesting High Risk Drugs


High Risk Drug Requested by Patient
Monitoring / review nfo available
Monitoring/ review not available
Analyse the blood test / monitoring / reviews.
Endeavour to obtain the information.
All info correct and up to date
Info not correct or up to date
Issue prescription
Clinical decision by prescriber e.g. weekly prescriptions. Document in notes
Monitoring information unavailable