Program: Ambulatory

Chapter: Medication Management

Overview:

Medication management is an important component in the palliative, symptomatic, and curative treatment of many diseases and conditions. However, medications are also capable of causing great harm if the incorrect dose or medication is inadvertently administered to a patient. To eliminate any potential harm that could be caused by medications, organizations need to develop an effective and safe medication management system.

A safe medication management system addresses an organization's medication processes, which in many organizations include the following (as applicable):
- Planning
- Selection and procurement
- Storage
- Ordering
- Preparing and dispensing
- Administration
- Monitoring
- Evaluation

The "Medication Management" (MM) chapter addresses these critical processes, including those undertaken by the organization and those provided through contracted pharmacy services. However, the specifics of the medication management system used by the organization can vary depending on the care, treatment, or services it provides. Not all organizations will implement all of the medication processes. For example, organizations without pharmacy services will conduct the medication ordering process and will provide patients with prescriptions.

Effective and safe medication management also involves multiple services and disciplines working closely together. The medication management standards address activities involving various individuals, such as licensed independent practitioners and staff, within an organization's medication management system.

In addition, an effective medication management system includes mechanisms for reporting potential and actual medication-related errors and a process to improve medication management processes and patient safety based on this information.

In essence, a well-planned and implemented medication management system supports patient safety and improves the quality of care by doing the following:
- Reducing variation, errors, and misuse
- Using evidence-based practices to develop medication management processes
- Managing critical processes to promote safe medication management throughout the organization
- Standardizing equipment and handling processes, including those for sample medications, across the organization to improve the medication management system
- Monitoring the medication management process for efficiency, quality, and safety

About This Chapter:

The goal of the medication management standards is to provide a framework for an effective and safe medication management system. Effective and safe medication management is dependent on carefully implementing medication management processes based on the care, treatment, or services provided by the organization. Planning provides the groundwork for the following critical areas of performance outlined in this chapter:
- Managing high-alert and hazardous medications
- Selecting and procuring medications
- Storing medications
- Managing emergency medications
- Controlling medications brought into the organization by patients, their families, and licensed independent practitioners
- Managing medication orders
- Preparing medications
- Labeling medications
- Dispensing medications
- Retrieving recalled or discontinued medications
- Administering medications
- Managing investigational medications
- Monitoring patients' reactions to medications
- Responding to real or potential adverse drug events, adverse drug reactions, and medication errors

Selected elements of performance (EPs) that are applicable to sample medications include a note that states, "This element of performance is also applicable to sample medications." The Joint Commission is not endorsing the use of sample medications. The note is only intended to identify which Medication Management EPs are applicable to sample medications for organizations that permit their use. Medication Management EPs that do not include this note are not applicable to sample medications.

Chapter Outline:

III. Storage (MM.03.01.01, MM.03.01.03, MM.03.01.05)

IV. Ordering and Transcribing (MM.04.01.01)

V. Preparing and Dispensing (MM.05.01.01, MM.05.01.07, MM.05.01.09, MM.05.01.11, MM.05.01.15, MM.05.01.17, MM.05.01.19)

VI. Administration (MM.06.01.01, MM.06.01.05)

VII. Monitoring (MM.07.01.01, MM.07.01.03)

VIII. Evaluation (MM.08.01.01)

IX. Antimicrobial Stewardship (MM.09.01.03)

EP Attributes Icon Legend:

CMS	CMS Crosswalk	**D**	Documentation is required
ESP-1	EP applies to Early Survey Option	**NEW**	EP is new or changed as of the selected effective date.

Chapter: Medication Management

MM.01.01.01: The organization plans its medication management processes.

Rationale: Medication management is often complicated, involving many people and processes. For this reason, the organization plans each part of the process with care so that safety and quality are maintained. This planning may involve the coordinated efforts of multiple services and disciplines.

Introduction: Not applicable

Elements of Performance

1 The organization follows a written policy that describes that the following information about the patient is accessible to licensed independent practitioners and staff who participate in the management of the patient's medications:
- Age
- Sex
- Diagnoses
- Allergies
- Sensitivities
- Current medications
- Height and weight (when necessary)
- Pregnancy and lactation information (when necessary)
- Laboratory results (when necessary)
- Any additional information required by the organization

Note 1: This element of performance does not apply in emergency situations.
Note 2: This element of performance is also applicable to sample medications. (See also IM.02.01.01, EP 3)

EP Attributes

New	FSA	CMS	DOC	ESP
			D	ESP-1

Chapter: Medication Management

MM.01.01.03: The organization safely manages high-alert and hazardous medications.

Rationale: High-alert medications are those medications that bear a heightened risk of causing significant patient harm and/or sentinel events when they are used in error and, as a result, require special safeguards to reduce the risk of errors. Examples of high-alert medications include opioids, insulin, anticoagulants, and neuromuscular blocking agents. Lists of high-alert medications are available from organizations such as the Institute for Safe Medication Practices (ISMP).

Hazardous drugs and medications are those in which studies in animals or humans indicate that exposure to them has a potential for causing cancer, developmental or reproductive toxicity, genotoxicity, or harm to organs. An example of a hazardous drug is one that contains antineoplastic agents or other ingredients that cause the aforementioned risks. Lists of hazardous drugs are available from the National Institute for Occupational Safety and Health (NIOSH).

For safe management, the organization needs to develop its own lists of both high-alert medications and hazardous drugs. These should be based on the organization's unique utilization patterns, its own internal data about medication errors and sentinel events, and known safety issues published in professional literature. It is up to the organization to determine whether medications that are new to the market are high alert or hazardous. In addition, the organization may separately choose to include other drugs that require special precautions such as investigational medications, controlled substances, and psychotherapeutic medications.

Note: For a list of high-alert medications, see https://www.ismp.org/recommendations. For a list of hazardous drugs, see https://www.cdc.gov/niosh/docs/2016-161/pdfs/2016-161.pdf.

Introduction: Not applicable

Elements of Performance

1 The organization identifies, in writing, its high-alert and hazardous medications. *
Note: This element of performance is also applicable to sample medications.
Footnote *: For a list of high-alert medications, see https://www.ismp.org/recommendations. For a list of hazardous drugs, see https://www.cdc.gov/niosh/docs/2016-161/pdfs/2016-161.pdf. (See also EC.02.02.01, EP 1)

EP Attributes

New	FSA	CMS	DOC	ESP
	- Medication Management	§414.68(c)(1)(iv)	D	ESP-1

2 The organization follows a process for managing high-alert and hazardous medications.
Note: This element of performance is also applicable to sample medications. (See also EC.02.02.01, EP 8; MM.03.01.01, EP 9)

EP Attributes

New	FSA	CMS	DOC	ESP
	- Medication Management	§414.68(c)(1)(iv)		

Chapter: Medication Management

MM.01.02.01: The organization addresses the safe use of look-alike/sound-alike medications.

Rationale: Not applicable.

Introduction: Not applicable

Elements of Performance

1 The organization develops a list of look-alike/sound-alike medications it stores, dispenses, or administers.
Note 1: One source of look-alike/sound-alike medication name pairs is the Institute for Safe Medication Practices (https://www.ismp.org/recommendations/confused-drug-names-list).
Note 2: This element of performance is also applicable to sample medications.

EP Attributes

New	FSA	CMS	DOC	ESP
	- Medication Management		D	ESP-1

2 The organization takes action to prevent errors involving the interchange of the medications on its list of look-alike/sound-alike medications.
Note: This element of performance is also applicable to sample medications.

EP Attributes

New	FSA	CMS	DOC	ESP
	- Medication Management			

3 The organization annually reviews and, as necessary, revises its list of look-alike/sound-alike medications.
Note: This element of performance is also applicable to sample medications.

EP Attributes

New	FSA	CMS	DOC	ESP

Chapter: Medication Management

MM.02.01.01: The organization selects and procures medications.

Rationale: Not applicable.

Introduction: Not applicable

Elements of Performance

1 The organization develops criteria for determining which medications are available for dispensing or administering to patients.
Note: This element of performance is also applicable to sample medications.

EP Attributes

New	FSA	CMS	DOC	ESP

2 The criteria for selecting medications are approved by the organization and include indications for use, effectiveness, and risks.
Note: This element of performance is also applicable to sample medications.

EP Attributes

New	FSA	CMS	DOC	ESP

3 Before using a medication new to the organization, the organization determines a method to monitor the response of the patient.
Note: This element of performance is also applicable to sample medications. (See also MM.07.01.01, EP 2)

EP Attributes

New	FSA	CMS	DOC	ESP

4 The organization maintains a written list of medications, including strength and dosage, for dispensing and administering. The list is readily available to those involved in medication management.
Note: Sample medications are not required to be on this list.

EP Attributes

New	FSA	CMS	DOC	ESP
			D	ESP-1

6 The organization standardizes and limits the number of drug concentrations available in the organization.

EP Attributes

New	FSA	CMS	DOC	ESP

7 The organization follows a process to select and procure medications that are not on its list of medications.
Note: This element of performance is also applicable to sample medications.

EP Attributes

New	FSA	CMS	DOC	ESP

9 Medications designated as available for dispensing or administration are reviewed at least annually based on emerging safety and efficacy information.

EP Attributes

New	FSA	CMS	DOC	ESP

10 The organization follows a process to communicate medication shortages and outages to licensed independent practitioners and staff who participate in medication management.

EP Attributes

New	FSA	CMS	DOC	ESP

12 The organization follows written medication substitution protocols to be used in the event of a medication shortage or outage.

EP Attributes

New	FSA	CMS	DOC	ESP
			D	

14 The organization follows a process to communicate the medication substitution protocols for shortages or outages to licensed independent practitioners and staff who participate in medication management.

EP Attributes

New	FSA	CMS	DOC	ESP

Chapter: Medication Management

MM.03.01.01: The organization safely stores medications.

Rationale: Medication storage is designed to assist in maintaining medication integrity, promote the availability of medications when needed, minimize the risk of medication diversion, and reduce potential dispensing errors. Law and regulation and manufacturers' guidelines further define the organization's approach to medication storage.

Introduction: Not applicable

Elements of Performance

2 The organization stores medications according to the manufacturers' recommendations.
Note: This element of performance is also applicable to sample medications.

EP Attributes

New	FSA	CMS	DOC	ESP
	- Medication Management	§416.48 §416.48(a) §414.68(c)(1)(iv)		

3 The organization stores controlled (scheduled) medications to prevent diversion, in accordance with law and regulation.
Note: This element of performance is also applicable to sample medications.

EP Attributes

New	FSA	CMS	DOC	ESP
		§416.48		

4 The organization safely handles medications between receipt by licensed independent practitioners or staff and administration of the medications.
Note: This element of performance is also applicable to sample medications.

EP Attributes

New	FSA	CMS	DOC	ESP

6 The organization prevents unauthorized individuals from obtaining medications in accordance with its policy and law and regulation.
Note: This element of performance is also applicable to sample medications.

EP Attributes

New	FSA	CMS	DOC	ESP
		§416.48		

7 All stored medications and the components used in their preparation are labeled with the contents, expiration date, and any applicable warnings.
Note: This element of performance is also applicable to sample medications.

EP Attributes

New	FSA	CMS	DOC	ESP
		§416.48 §414.68(c)(1)(iv)		

8 The organization removes all expired, damaged, and/or contaminated medications and stores them separately from medications available for administration.
Note: This element of performance is also applicable to sample medications.

EP Attributes

New	FSA	CMS	DOC	ESP

9 The organization keeps concentrated electrolytes present in patient care areas only when patient safety necessitates their immediate use, and precautions are used to prevent inadvertent administration. (See also MM.01.01.03, EP 2)

EP Attributes

New	FSA	CMS	DOC	ESP
	- Medication Management	§416.48		

18 The organization periodically inspects all medication storage areas.
Note: This element of performance is also applicable to sample medications.

EP Attributes

New	FSA	CMS	DOC	ESP
		§414.68(c)(1)(iv)		

Chapter: Medication Management

MM.03.01.03: The organization safely manages emergency medications.

Rationale: Patient emergencies occur frequently in health care settings. The organization, therefore, needs to plan how it will address patient emergencies and what medications and supplies it will need. Although the processes may be different, the organization treats emergency medications with the same care for safety as it does medications in nonemergency settings.

Introduction: Not applicable

Elements of Performance

1 Organization leaders decide which, if any, emergency medications and their associated supplies will be readily accessible in patient care areas based on the population served. Whenever possible, emergency medications are available in unit-dose, age-specific, and ready-to-administer forms.

EP Attributes

New	FSA	CMS	DOC	ESP

6 When emergency medications or supplies are used or expired, the organization replaces them as soon as possible to maintain a full stock.

EP Attributes

New	FSA	CMS	DOC	ESP

Chapter: Medication Management

MM.03.01.05: The organization safely controls medications brought into the organization by patients, their families, or licensed independent practitioners.

Rationale: A number of valid reasons exist for allowing the patient to use their own medications in an organization. The organization needs to control the use of these medications in order to protect the safety of the patient and the quality of care provided. Therefore, the organization needs to define its responsibilities for the safe use of these medications.

Introduction: Not applicable

Elements of Performance

1 The organization defines when medications brought into the organization by patients, their families, or licensed independent practitioners can be administered.
Note: This element of performance is also applicable to sample medications.

EP Attributes

New	FSA	CMS	DOC	ESP

2 Before use or administration of a medication brought into the organization by a patient, their family, or a licensed independent practitioner, the organization identifies the medication and visually evaluates the medication's integrity.
Note: This element of performance is also applicable to sample medications. (See also MM.06.01.01, EP 3)

EP Attributes

New	FSA	CMS	DOC	ESP

Chapter: Medication Management

MM.04.01.01: Medication orders are clear and accurate.

Rationale: Not applicable.

Introduction: Introduction to Standard MM.04.01.01

Medication errors may occur when staff are communicating or transcribing medication orders. Verbal and telephone orders are particularly susceptible to error. The organization is responsible for reducing the potential for medication errors and the misinterpretation of these medication orders. As part of this process, the organization determines the required elements of a medication order, the type of medication orders that are deemed acceptable for use, and the actions to take when medication orders are incomplete, illegible, or unclear. Clear understanding and communication between staff and licensed independent practitioners involved in the medication process are essential.

Elements of Performance

1 The organization follows a written policy that identifies the specific types of medication orders that it deems acceptable for use.
Note: There are several different types of medication orders. Medication orders commonly used include the following:
- As needed (PRN) orders: Orders acted on based on the occurrence of a specific indication or symptom
- Standing orders: A prewritten medication order and specific instructions from the licensed independent practitioner to administer a medication to a person in clearly defined circumstances
- Automatic stop orders: Orders that include a date or time to discontinue a medication
- Titrating orders: Orders in which the dose is either progressively increased or decreased in response to the patient's status
- Taper orders: Orders in which the dose is decreased by a particular amount with each dosing interval
- Range orders: Orders in which the dose or dosing interval varies over a prescribed range, depending on the situation or patient's status
- Signed and held orders: New prewritten (held) medication orders and specific instructions from a licensed independent practitioner to administer medication(s) to a patient in clearly defined circumstances that become active upon the release of the orders on a specific date(s) and time(s)
- Orders for compounded drugs or drug mixtures not commercially available
- Orders for medication-related devices (for example, nebulizers, catheters)
- Orders for investigational medications
- Orders for herbal products
- Orders for medications at the end of an episode of care, or at discharge or transfer

EP Attributes

New	FSA	CMS	DOC	ESP
			D	

2 The organization follows a written policy that defines the following:
- The minimum required elements of a complete medication order, which must include medication name, medication dose, medication route, and medication frequency
- When indication for use is required on a medication order
- The precautions for ordering medications with look-alike or sound-alike names
- Actions to take when medication orders are incomplete, illegible, or unclear
- For medication titration orders, required elements include the medication name, medication route, initial rate of infusion (dose/unit of time), incremental units to which the rate or dose can be increased or decreased, how often the rate or dose can be changed, the maximum rate or dose of infusion, and the objective clinical measure to be used to guide changes
Note: Examples of objective clinical measures to be used to guide titration changes include blood pressure, Richmond Agitation–Sedation Scale (RASS), and the Confusion Assessment Method (CAM).

EP Attributes

New	FSA	CMS	DOC	ESP
			D	ESP-1

7 If the organization uses preprinted medication order sheets, it updates them based on current evidence and practice.

EP Attributes

New	FSA	CMS	DOC	ESP

8 The organization prohibits summary (blanket) orders to resume previous medications.

EP Attributes

New	FSA	CMS	DOC	ESP

Chapter: Medication Management

MM.05.01.01: The organization reviews the appropriateness of all medication orders for medications to be dispensed in the organization.

Rationale: Not applicable.

Introduction: Not applicable

Elements of Performance

1 The organization defines who can review medication orders or prescriptions for dispensed medications, and under what conditions this occurs, in accordance with law and regulation.

EP Attributes

New	FSA	CMS	DOC	ESP

4 All medication orders are reviewed for the following:
- Patient allergies or potential sensitivities
- Existing or potential interactions between the medication ordered and food and medications the patient is currently taking
- The appropriateness of the medication, dose, frequency, and route of administration
- Current or potential impact as indicated by laboratory values
- Therapeutic duplication
- Other contraindications

EP Attributes

New	FSA	CMS	DOC	ESP
	- Medication Management			

11 After the medication order has been reviewed, all concerns, issues, or questions are clarified with the individual prescriber before dispensing.

EP Attributes

New	FSA	CMS	DOC	ESP

Chapter: Medication Management

MM.05.01.07: The organization safely prepares medications.
Note: This standard is applicable to all organizations that prepare medications for administration.

Rationale: Not applicable.

Introduction: Not applicable

Elements of Performance

1 When an on-site licensed pharmacy is available, a pharmacist, or pharmacy staff under the supervision of a pharmacist, compounds or admixes all compounded sterile preparations except in urgent situations in which a delay could harm the patient or when the product's stability is short.

EP Attributes

New	FSA	CMS	DOC	ESP

2 Staff use clean or sterile techniques and maintain clean, uncluttered, and functionally separate areas for product preparation to avoid contamination of medications.

EP Attributes

New	FSA	CMS	DOC	ESP
	- Medication Management	§416.48(a) §414.68(c)(1)(iv)		

3 During preparation, staff visually inspect the medication for particulates, discoloration, or other loss of integrity.

EP Attributes

New	FSA	CMS	DOC	ESP
	- Medication Management	§416.48 §416.48(a) §414.68(c)(1)(iv)		

Chapter: Medication Management

MM.05.01.09: Medications are labeled.
Note: This standard is applicable to all organizations that prepare and administer medications.

Rationale: A label on every medication and medication container has long been a standard of practice by the pharmacy profession and is required by law and regulation. A standardized method to label medications and containers promotes medication safety.

Introduction: Not applicable

Elements of Performance

1 Medication containers are labeled whenever medications are prepared but not immediately administered.
Note 1: An organization that exclusively uses a single medication in a patient care area can draw up or prepare multiple doses for later use as long as the medication is segregated and secured from all other medications in the organization (for example, a vaccine, flu shot) and the container holding the individual doses is labeled.
Note 2: An immediately administered medication is one that an authorized staff member prepares or obtains, takes directly to a patient, and administers to that patient without any break in the process.
Note 3: This element of performance is also applicable to sample medications.

EP Attributes

New	FSA	CMS	DOC	ESP
	- Medication Management	§416.48 §416.48(a) §414.68(c)(1)(iv)		

2 Information on medication labels is displayed in a standardized format, in accordance with law and regulation and standards of practice.
Note: This element of performance is also applicable to sample medications.

EP Attributes

New	FSA	CMS	DOC	ESP
		§414.68(c)(1)(iv)		

3 All medications prepared in the organization are correctly labeled with the following:
- Medication name, strength, and amount (if not apparent from the container)
Note: This is also applicable to sample medications.
- Expiration date when not used within 24 hours
- Expiration date and time when expiration occurs in less than 24 hours
- The date prepared and the diluent for all compounded intravenous admixtures and parenteral nutrition formulas

EP Attributes

New	FSA	CMS	DOC	ESP
	- Medication Management	§416.48 §416.48(a) §414.68(c)(1)(iv)		

7 When preparing individualized medications for multiple patients, the label also includes the following:
- The patient's name
- The location where the medication is to be delivered
- Directions for use and applicable accessory and cautionary instructions (See also NPSG.01.01.01, EP 1)

EP Attributes

New	FSA	CMS	DOC	ESP
	- Medication Management	§416.48 §414.68(c)(1)(iv)		

10 When an individualized medication(s) is prepared by someone other than the person administering the medication, the label includes the following:
- The patient's name
- The location where the medication is to be delivered
- Directions for use and applicable accessory and cautionary instructions (See also NPSG.01.01.01, EP 1)

EP Attributes

New	FSA	CMS	DOC	ESP
	- Medication Management	§416.48 §414.68(c)(1)(iv)		

Chapter: Medication Management

MM.05.01.11: The organization safely dispenses medications.

Rationale: Not applicable.

Introduction: Not applicable

Elements of Performance

2 The organization dispenses medications and maintains clinical records in accordance with law and regulation, licensure, and professional standards of practice.
Note 1: Dispensing practices and recordkeeping include antidiversion strategies.
Note 2: This element of performance is also applicable to sample medications.

EP Attributes

New	FSA	CMS	DOC	ESP
		§416.48		

Chapter: Medication Management

MM.05.01.15: The organization safely obtains medications when it does not operate a pharmacy.

Rationale: Not applicable.

Introduction: Not applicable

Elements of Performance

1 If the organization does not operate a pharmacy, the organization follows a process for obtaining medications from a pharmacy or licensed pharmaceutical supplier to meet patient needs.

EP Attributes

New	FSA	CMS	DOC	ESP
				ESP-1

Chapter: Medication Management

MM.05.01.17: The organization follows a process to retrieve recalled or discontinued medications.
Note: This standard is applicable to all organizations that dispense medications, including sample medications.

Rationale: Not applicable.

Introduction: Not applicable

Elements of Performance

1 The organization follows a written policy describing how it will retrieve and handle medications within the organization that are recalled or discontinued for safety reasons by the manufacturer or the US Food and Drug Administration (FDA).
Note: This element of performance is also applicable to sample medications. (See also EC.02.01.01, EP 11)

EP Attributes

New	FSA	CMS	DOC	ESP
		§414.68(c)(1)(iv)	D	ESP-1

3 When a medication is recalled or discontinued for safety reasons by the manufacturer or the US Food and Drug Administration (FDA), the organization notifies the prescribers and those who dispense or administer the medication.
Note: This element of performance is also applicable to sample medications. (See also EC.02.01.01, EP 11)

EP Attributes

New	FSA	CMS	DOC	ESP
		§414.68(c)(1)(iv)		

4 When required by law and regulation or organization policy, the organization informs patients that their medication has been recalled or discontinued for safety reasons by the manufacturer or the US Food and Drug Administration (FDA).
Note: This element of performance is also applicable to sample medications. (See also EC.02.01.01, EP 11)

EP Attributes

New	FSA	CMS	DOC	ESP
		§414.68(c)(1)(iv)		

Chapter: Medication Management

MM.05.01.19: The organization safely manages returned medications.

Rationale: Medications may be returned to the organization when allowed by law or regulation and organization policy. Previously dispensed but unused, expired, or returned medications in the organization must be accounted for, controlled, and disposed of in order to keep patients safe and prevent diversion.

Introduction: Not applicable

Elements of Performance

1 The organization determines under what circumstances unused, expired, or returned medications will be managed by the pharmacy or the organization.
Note: This element of performance is also applicable to sample medications.

EP Attributes

New	FSA	CMS	DOC	ESP

2 When the organization accepts unused, expired, or returned medications, it follows a process for returning medications to the pharmacy's or organization's control which includes procedures for preventing diversion.
Note: This element of performance is also applicable to sample medications.

EP Attributes

New	FSA	CMS	DOC	ESP

3 The organization determines if and when outside sources are used for destruction of medications.
Note: This element of performance is also applicable to sample medications.

EP Attributes

New	FSA	CMS	DOC	ESP

Chapter: Medication Management

MM.06.01.01: The organization safely administers medications.

Rationale: Not applicable.

Introduction: Not applicable

Elements of Performance

1 Only authorized licensed independent practitioners and clinical staff administer medications. The organization defines, in writing, those who are authorized to administer medication, with or without supervision, in accordance with law and regulation.
Note: This does not prohibit self-administration of medications by patients, when indicated.

EP Attributes

New	FSA	CMS	DOC	ESP
		§416.48(a) §414.68(c)(1)(iv)	D	ESP-1

3 Before administration, the individual administering the medication does the following:
- Verifies that the medication selected matches the medication order and product label
- Visually inspects the medication for particulates, discoloration, or other loss of integrity
- Verifies that the medication has not expired
- Verifies that no contraindications exist
- Verifies that the medication is being administered at the proper time, in the prescribed dose, and by the correct route
- Discusses any unresolved concerns about the medication with the patient's licensed independent practitioner, prescriber (if different from the licensed independent practitioner), and/or staff involved with the patient's care, treatment, or services

Note 1: For ambulatory surgical centers that elect to use The Joint Commission deemed status option: The Centers for Medicare & Medicaid Services require ambulatory surgical centers to use single dose (single-use) medication vials for only one patient.
Note 2: For ambulatory surgical centers that elect to use The Joint Commission deemed status option: The Centers for Medicare & Medicaid Services require ambulatory surgical centers to date multi-dose injectable medications that are used for more than one patient when they are opened, and discard them within 28 days of opening or according to the manufacturer's recommendations, whichever is more stringent. (See also MM.03.01.05, EP 2)

EP Attributes

New	FSA	CMS	DOC	ESP
		§416.48(a) §414.68(c)(1)(iv)		

9 Before administering a new medication, the patient or family is informed about any potential clinically significant adverse drug reactions or other concerns regarding administration of a new medication. (See also PC.02.03.01, EP 10)

EP Attributes

New	FSA	CMS	DOC	ESP
		§414.68(c)(1)(iv)		

13 Before administering a radioactive pharmaceutical for diagnostic purposes, staff verify that the dose to be administered is within 20% of the prescribed dose, or, if the dose is prescribed as a range, staff verify that the dose to be administered is within the prescribed range.

EP Attributes

New	FSA	CMS	DOC	ESP
				ESP-1

Chapter: Medication Management

MM.06.01.05: The organization safely manages investigational medications.

Rationale: Investigational medications can be of great help to the patient. In some cases, investigational medications may represent one of a few options in the patient's plan of care. The organization contributes to the safety of patients participating in investigational or clinical medication studies by controlling and monitoring the use of these medications.
Note: For a discussion of patient rights regarding the use of investigational medications, see Standard RI.01.03.05.

Introduction: Not applicable

Elements of Performance

1 The organization follows a written process addressing the use of investigational medications that includes review, approval, supervision, and monitoring.

EP Attributes

New	FSA	CMS	DOC	ESP
			D	ESP-1

2 If the organization operates a pharmacy, the process for the use of investigational medications specifies that the pharmacy controls the storage, dispensing, labeling, and distribution of investigational medications.

EP Attributes

New	FSA	CMS	DOC	ESP
				ESP-1

3 The written process for the use of investigational medications specifies that when a patient is involved in an investigational protocol that is independent of the organization, the organization evaluates and accommodates the patient's continued participation in the protocol.

EP Attributes

New	FSA	CMS	DOC	ESP

Chapter: Medication Management

MM.07.01.01: The organization monitors patients to determine the effects of their medication(s).

Rationale: Not applicable.

Introduction: Not applicable

Elements of Performance

1 The organization monitors the patient’s perception of side effects and the effectiveness of the patient's medication(s).
Note: This element of performance is also applicable to sample medications.

EP Attributes

New	FSA	CMS	DOC	ESP
		§414.68(c)(1)(iv)		

2 The organization monitors the patient's response to medication(s) by taking into account clinical information from the clinical record, relevant lab values, clinical response, and medication profile.
Note 1: Monitoring the patient's response to medications is an important assessment activity for nurses, physicians, and pharmacists. In particular, monitoring the patient’s response to the first dose of a new medication is essential to the safety of the patient because any adverse reactions, including serious ones, are more unpredictable if the medication has never been used before with the patient.
Note 2: This element of performance is also applicable to sample medications. (See also MM.02.01.01, EP 3)

EP Attributes

New	FSA	CMS	DOC	ESP
		§414.68(c)(1)(iv)		

Chapter: Medication Management

MM.07.01.03: The organization responds to actual or potential adverse drug events, significant adverse drug reactions, and medication errors.

Rationale: Adverse drug reactions and medication errors place patients at considerable risk. For safe, quality care, organizations must have systems in place to respond to and monitor a patient in the event of an adverse drug reaction or medication error.

Introduction: Not applicable

Elements of Performance

1 The organization follows a written process to respond to actual or potential adverse drug events, significant adverse drug reactions, and medication errors.
Note: This element of performance is also applicable to sample medications.

EP Attributes

New	FSA	CMS	DOC	ESP
		§414.68(c)(1)(iv)	D	ESP-1

2 The organization follows a written process addressing prescriber notification in the event of an adverse drug event, significant adverse drug reaction, or medication error.
Note: This element of performance is also applicable to sample medications.

EP Attributes

New	FSA	CMS	DOC	ESP
		§414.68(c)(1)(iv)	D	ESP-1

3 The organization complies with internal and external reporting requirements for actual or potential adverse drug events, significant adverse drug reactions, and medication errors.
Note: This element of performance is also applicable to sample medications.

EP Attributes

New	FSA	CMS	DOC	ESP
		§414.68(c)(1)(iv)		

Chapter: Medication Management

MM.08.01.01: The organization evaluates the effectiveness of its medication management system.
Note: This evaluation includes reconciling medication information. (Refer to NPSG.03.06.01 for more information)

Rationale: Not applicable.

Introduction: Not applicable

Elements of Performance

1 As part of its evaluation of the effectiveness of medication management, the organization does the following:
- Collects data on the performance of its medication management system
- Analyzes data on its medication management system
- Compares data over time to identify risk points, levels of performance, patterns, trends, and variations of its medication management system
Note: This element of performance is also applicable to sample medications. (See also PI.01.01.01, EPs 12, 13)

EP Attributes

New	FSA	CMS	DOC	ESP

5 Based on analysis of its data, as well as review of the literature for new technologies and best practices, the organization identifies opportunities for improvement in its medication management system.

EP Attributes

New	FSA	CMS	DOC	ESP

6 When opportunities are identified for improvement of the medication management system, the organization does the following:
- Takes action on improvement opportunities identified as priorities for its medication management system
- Evaluates its actions to confirm that they resulted in improvements
Note: This element of performance is also applicable to sample medications. (See also PI.04.01.01, EP 2)

EP Attributes

New	FSA	CMS	DOC	ESP

8 The organization takes additional action when planned improvements for its medication management processes are either not achieved or not sustained.

EP Attributes

New	FSA	CMS	DOC	ESP

16 When automatic dispensing cabinets (ADCs) are used, the organization has a policy that describes the types of medication overrides that will be reviewed for appropriateness and the frequency of the reviews. A 100% review of overrides is not required.

EP Attributes

New	FSA	CMS	DOC	ESP
			D	ESP-1