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PROCEDURE:

A) Drug Allergy on Admission:

1. On admission, each patient (or care giver) is to be questioned about the patient's allergy status.

1.1. If No Allergy Identified:


- a) No known Allergy (NKA) and date is to be noted on the Medication Reconciliation Form, paper-based and/or e-Nursing Assessment Sheet and paper-based and/ e-Medical Chart. The physician will enter the data (allergy status) in the computer system or patient to be accessible to staff. The nurse must be sure that it is identified by the physician as "NKA" on the admission order before it is sent to the inpatient pharmacy.

1.2. If an Allergy is claimed: on the first prescription delivered to the pharmacy.

- a) The names of the drugs and/or other agents plus the details of the reactions are recorded on the paper-based and/or e-Physician Admission Assessment and Medication Reconciliation Form.
- b) The names of the drugs or other agents are to be recorded on the patient medication Chart, progress notes, Emergency Department and Intensive Care Unit flowcharts, nursing care plans and also on the first prescription delivered to the pharmacy.
- c) All allergies are documented on the allergy record sheet that is to be kept at the front of the active e-medical record.
- d) The admitting physician will enter the data in the computer system to be accessible to pharmacy staff.

B) Drug Allergy Discovered after Admission:

1. The nurse should do the following:
 - 1.1. Add the details to the Nursing Admission Assessment Sheet.
 - 1.2. Record information on allergy record sheet.


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C) In Emergency Department and Outpatient Department:

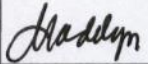
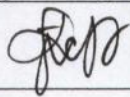
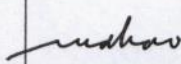


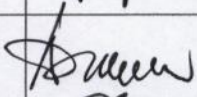

1. On presentation, each patient (or care giver/relative) is to be questioned about his/her allergy status.
 - 1.1. **If No Allergy Identified:**
 - a) "No Known Allergy" is to be noted on the Emergency Department Medical Record in appropriate area.
 - 1.2. **If an Allergy is claimed:**
 - a) The names of the drugs and/or other agents plus the details of the reactions are recorded in the:
 - E-Medication record
 - Triage Screen, alert details.
 - 1.3. **Outcome:**
 - a) Patients will not receive an agent that has been identified as causing or likely to cause an allergic reaction if administered or applied.


REFERENCES:

1. Accreditation Canada Qmentum International Standards "Medication Management"
2. CBAHI standards, Medication Management
3. JCAHO Standards for Medication Management


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APPROVAL:








	Name/Title	Signature	Date
Prepared by:	MA. MADELYN N. LACSON, RPh., RN Inpatient Pharmacy Supervisor		2/17/2022
Verified:	STEPHANIE CAMILLE O. SAMONTE, RPh. Inpatient Clinical Pharmacist		2/17/22
	MIRIAM HOPE D. BRAVO, RPh. Inpatient Pharmacy Manager		2/18/22
Reviewed by:	DENNIS C. ESCALONA, MN, FPCHA, FPSQua Quality Assurance Supervisor		2/18/2022
Recommending Approval:	PRINCESS M. ABELLON, MBA Pharmacy Division Officer		2/23/22
	HENRY F. ALAVAREN, MD, FPSMID, FPSQua Total Quality Division Officer		3/3/2022
Approved:	GENESIS GOLDI D. GOLINGAN President and CEO		3/3/22

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KEY TASKS	PERSON RESPONSIBLE
1. Interviews each patient (or care giver) about the patient's allergy status on admission.	Admitting Physician/ Pharmacist/ Nurse
2. Enters the data (allergy status) in the computer system or patient to be accessible to staff.	Admitting Physician
3. Records the names of the drugs and/or other agents plus the details of the reactions on the paper-based and/or e-Physician Admission Assessment and Medication Reconciliation Form if an allergy is claimed.	Admitting Physician
4. Records the names of the drugs or other agents on the patient medication Chart, progress notes, Emergency Department and Intensive Care Unit flowcharts, nursing care plans and also on the first prescription delivered to the pharmacy.	Pharmacist/ Nurse
5. Documents all allergies on the allergy record sheet to be kept at the front of the active e-medical record.	Nurse
6. Enters the data in the computer system to be accessible to pharmacy staff.	Admitting Physician

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APPROVAL:

	Name/Title	Signature	Date
Prepared by:	MA. MADELYN N. LACSON, RPh., RN Inpatient Pharmacy Supervisor		6/1/22
Verified:	STEPHANIE CAMILLE O. SAMONTE, RPh. Inpatient Clinical Pharmacist		6/2/22
	MIRIAM HOPE D. BRAVO, RPh. Inpatient Pharmacy Manager		6/2/22
Reviewed by:	DENNIS C. ESCALONA, MN, FPCHA, FPSQua Quality Assurance Supervisor		6/19/2022
Recommending Approval:	PRINCESS M. ABELLON, MBA Pharmacy Division Officer		6/28/2022
	FREDERIC IVAN L. TING, MD OIC-Total Quality Division		6/27/22
Approved:	GENESIS GOLDI D. GOLINGAN President and CEO		7/1/22

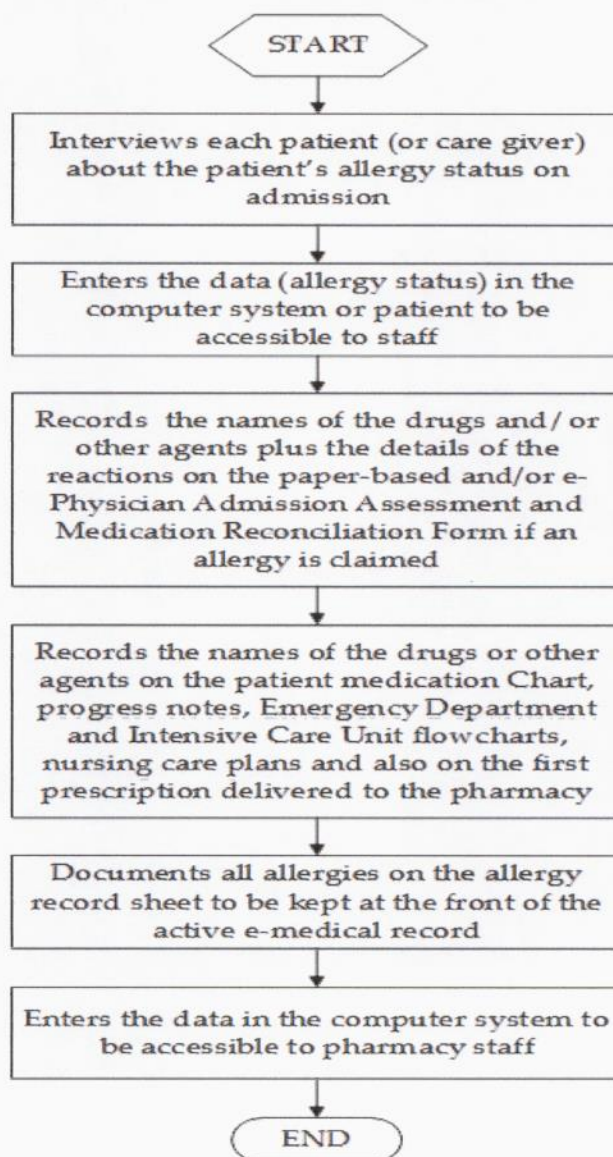



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FLOWCHART



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APPROVAL:

	Name/Title	Signature	Date
Prepared by:	MA. MADELYN N. LACSON, RPh., RN Inpatient Pharmacy Supervisor		6/2/22
Verified:	STEPHANIE CAMILLE O. SAMONTE, RPh. Inpatient Clinical Pharmacist		6/2/22
	MIRIAM HOPE D. BRAVO, RPh. Inpatient Pharmacy Manager		6/2/22
Reviewed:	DENNIS C. ESCALONA, MN, FPCHA, FPSQua Quality Assurance Supervisor		6/17/2022
Recommending Approval:	PRINCESS M. ABELLON, MBA Pharmacy Division Officer		6/17/22
	FREDERIC IVAN L. TING, MD OIC-Total Quality Division		6/27/22
Approved:	GENESIS GOLDI D. GOLINGAN President and CEO		7/1/22

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PURPOSE:

1. To establish a mechanism for handling drug allergies including identification, communication and documentation of incidences and allowing for pharmacy intervention when necessary in order to avoid and/or prevent future incidents from occurring.
2. To ensure that all patients have an allergy status documented and accessible to pharmacy staff.

SCOPE:

All Physicians, Nurse, Pharmacists and other Healthcare Professionals of Riverside Medical Center, Inc.

PERSON RESPONSIBLE:

Pharmacy Manager, Physicians, Pharmacists and Staff Nurses

GENERAL GUIDELINES:

1. Physicians and nurses shall identify any drug allergy for the patient by history and monitor patient's drug administration.
2. Any discovered drug allergy should be documented in the patient medical record and reported directly to the pharmacy.
3. The physician should not prescribe, the nurse should not administer, and the pharmacist should not dispense medications if the allergy status of the patient is not documented (unless in an emergency).