

PROTOCOL FOR: Advanced Practice Registered Nurse (APRN): Prescriptive Practices and Authority for Psychiatric Patients

- POLICY:**
1. The APRN is authorized to prescribe medication to psychiatric patients in collaboration with physicians and in accordance with state regulations and medical staff by-laws.
 2. The categories of medical therapeutics, corrective measures, laboratory tests and other diagnostic procedures that may be prescribed, dispensed, or administered by the APRN include, but are not limited to, antidepressants, antipsychotics, anxiolytics, mood stabilizers, antiparkinsonian drugs, antihistamines, beta blockers, sedatives/hypnotics, stimulants, laxatives, antacids, aspirin, acetaminophen, over the counter medications and other medications as clinically indicated.
 3. The APRN will order laboratory and diagnostic tests as clinically indicated.
 4. The physician will inform the APRN when he/she will be unavailable for more than a weekend and will provide the name of the covering physician.
 5. The APRN will consult with, refer to or communicate with other health care providers as clinically, medically or legally indicated.
 6. Peer review with periodic chart audits will be conducted by the APRN and physician to ascertain compliance with protocol.
 7. Prescription forms used by APRN will contain the name, address, and telephone number(s) of the APRN.

DESIRED

- OUTCOMES:**
1. Practice relationship is clearly defined according to established APRN guidelines.

IMPLEMENTATION

- PROCESS:**
1. The APRN will prescribe medications for psychiatric patients using the following basic principles:
 - a. Refer patient for a physical examination if not done in the last year or if this is the patient's first episode.
 - b. Order routine labs (CBC with differential, LFTs, Chem 7, TSH) on a yearly basis at minimum.
 - c. Order other laboratory / diagnostic tests as required by specific medications / clinically indicated, to rule out medical conditions that may present as or contribute to psychiatric illness.
 - d. Review contraindication (eg, pregnancy) and precautions for medications and drug to drug interactions.
 - e. Monitor vital signs / weight at baseline and as clinically indicated.
 - f. Educate patient regarding rationale, risks, benefits and monitoring needed for medication.

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- g. Monitor patient for side effects and adverse reactions.
 - h. Order quantity of a medication based on the patient's clinical presentation and the medication being prescribed.
 - i. Address issues of patient non-compliance with appropriate interventions for that patient.
2. Consultation with the physician will occur as clinically indicated.
 3. Increases in medications to therapeutic levels will be done using available resources, such as Physician's Desk Reference (PDR), Micromedex and accepted psychiatric prescribing practices, and will be consistent with the patient's clinical condition and response.
 4. The physician will be informed if the desired effect is not achieved or if an untoward effect occurs.
 5. In situations where the desired effect is being achieved and there are no untoward effects, the medication regime will be reviewed by the physician as clinically indicated.
 6. There will be documentation of all medications prescribed and all tests ordered in the chart and documentation of clinical responses and reasons for changes.

- DOCUMENTATION:**
1. Document all medications prescribed in the chart.
 2. Document all tests ordered in the chart.
 3. Document clinical responses and reasons for changes.
 4. Document all medication teaching.

REFERENCES: General Statutes of Connecticut Title 20, Chapter 378 Nursing Section 20-87b

Physician's Desk Reference (PDR), current edition

Micromedex - UCONN Health Center online resource

Drug Information Handbook for Psychiatry, current edition; Fuller, Matthew, PharmD, Sajotovic, Martha, MD; Lexi-Comp, Inc., Cleveland, OH

Nurse Practitioner's Drug Handbook, current edition; Springhouse Corporation, Springhouse Pennsylvania

Handbook of Psychiatric Drug Therapy, current edition; Arana, George W. MD, Hyman, Steven E. MD; Little, Brown and Company; Boston/Toronto/London

Harrison's Book of Internal Medicine

American Nurses Association (ANA):

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Scope and Standards of Psychiatric-Mental Health Nursing Practice
(2000)

Scope and Standards of Addictions Nursing Practice (2004)

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General Prescribing Practices for Psychiatric Patients)

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