



# Critical Adherence

## MEDICATION LIST

Adherence is important for all medications. Missing a single dose of some medications may pose a greater health risk to the patient or to public health.

Response to non-adherence for these selected medications on the Critical Adherence List shall follow the guidelines established here.

The Systemwide Pharmacy and Therapeutics Committee, in collaboration with the Patient Safety Committee, shall review and amend this list annually. Any changes shall be communicated to Quality Management for updates to the electronic health record system.

| Missed a dose of:   | Refer to __ <b>verbally and in writing immediately</b> per institution policy | Response:  |
|---|---|--|
| <b>Active tuberculosis (TB) disease medications (not prophylaxis)</b> | Primary Care Team   | Patient shall be seen by licensed health care staff from the Primary Care Team or a Psychiatrist or Psychiatric Nurse Practitioner from the Psychiatry Team within 24 hours from receipt of the notification of medication non-adherence |
| <b>Anti-rejection medication post-transplant</b>                      | Primary Care Team   |  |
| <b>Hepatitis C antiretrovirals</b>                                    | Primary Care Team   |  |
| <b>Clozapine</b>  | Psychiatry Team   |  |
| <b>Long-acting injectable anti-psychotics</b>                         | Psychiatry Team   |  |
| <b>PC 2602 medications</b>  | Psychiatry Team   |  |
| <b>PC 2604 medications</b>  | Primary Care Team   |  |
| <b>Buprenorphine long-acting injectable (Sublocade®)</b>              | Prescriber  |  |
| <b>Cabotegravir/rilpivirine long-acting injectable (Cabenuva®)</b>    | Prescriber  |  |