

3.5.13 Rescue Medications

(a) Procedure Overview

- (1) All prescribed self-administered rescue medications shall be immediately available to patients at all times. Rescue medications shall be prescribed as Keep-On-Person (KOP) to all patients in outpatient housing areas including Administrative Segregation.
- (2) Inpatient medications shall not be kept at the patient's bedside, except for prescribed rescue medications on order of a licensed provider. The nursing staff shall be responsible for ensuring the patient is instructed in the proper use and storage of the medication. Nursing staff shall document the use of bedside medications.

(b) Purpose

To ensure the safety of patients who may need immediate access to rescue medications.

(c) Procedure

(1) Rescue Medications

Rescue medications shall be readily available at all times and include:

- (A) Nitroglycerin sublingual tablets: In original container and not to exceed 25 tablets. (Note: This medication cannot be repackaged.)
- (B) Rescue inhalers: One inhaler plus mouthpiece and spacer (if prescribed).
- (C) Oral glucose: One bottle of chewable tablets or one tube of oral gel.

(2) Inpatient Areas

- (A) Rescue medications are permitted to be kept at the patient's bedside.
- (B) Prior to prescribing any medication to be allowed at bedside, providers shall evaluate the patient's mental and physical capacity to self-administer medication.
 1. If the provider has any doubt about the patient's mental capacity to self-administer medication, bedside medication shall not be ordered until mental health services has been consulted and rendered a recommendation.
 2. If a patient is deemed unable to self-administer medication, bedside medication shall not be ordered.

(C) Nursing staff shall:

1. Instruct the patient on the proper use and storage of the medication and document in the health record.
2. Document the frequency of use since the last medication pass and the treatment response if the patient used the medication.
3. Ascertain the reason if the medication is used more or less than prescribed and, if appropriate, discuss with the patient the importance of adherence with prescribed use. Document the variance in the health record.
4. Notify the provider if the patient has not used the medication according to the instructions or is not getting expected results.
5. Document in the electronic Medication Administration Record whenever a new supply of bedside medication is provided.

(3) Outpatient Areas

- (A) Rescue medications shall be prescribed as KOP.
- (B) Providers or nursing staff shall instruct the patient on the proper use and storage of the medication at each chronic care clinic visit as indicated and upon request when the medication is provided to the patient.
- (C) At each clinic visit, providers or nursing staff shall assess and document rescue medication usage on the chronic care progress note; re-evaluate the patient's ability to self-administer rescue medication; refer to mental health services, as indicated; and adjust treatment accordingly.
- (D) Rescue medications may only be prescribed as nurse administered when a provider finds there is strong clinical justification to do so, e.g., physical and/or mental inability to self-administer or danger to self. The clinical justification shall be documented in the health record, and shall be based upon information contained in the health record and/or upon results from the formal mental health consultation addressing mental health barriers to self-administration of medication.

References

- California Code of Regulations, Title 15, Division 3, Chapter 2, Subchapter 3, Section 3999.381, Rescue Medications

CALIFORNIA DEPARTMENT OF CORRECTIONS AND REHABILITATION
CALIFORNIA CORRECTIONAL HEALTH CARE SERVICES
Health Care Department Operations Manual

- California Code of Regulations, Title 22, Division 5, Chapter 3, Article 3, Section 72357, Pharmaceutical Service – Labeling and Storage of Drugs
- California Code of Regulations, Title 22, Division 5, Chapter 12, Article 3, Section 79651, Pharmaceutical Service – Labeling and Storage of Drugs
- Health Care Department Operations Manual, Chapter 3, Article 2, Medication Management

Revision History

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