



# CALIFORNIA CORRECTIONAL HEALTH CARE SERVICES

<b>VOLUME 9: PHARMACY SERVICES</b>	Effective Date: 2/08
<b>CHAPTER 13</b>	Revision Date: 1/14
<b>9.13 USE OF PHYSICIAN'S ORDERS FORMS</b>	Attachments: Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>

## I. PROCEDURE OVERVIEW

All orders/prescriptions for medication shall be written on the four-part California Department of Corrections and Rehabilitation (CDCR) CDC 7221, Physician's Orders or a Guardian Rx Medication Reconciliation Form, unless otherwise required by state or federal law.

## II. PURPOSE

To standardize the medication order/prescription form and processes.

## III. PROCEDURE

### A. Written Orders/Prescriptions

1. Prescribers are responsible for ensuring all medication orders are written legibly and include the following prescription elements:
  - a. Drug name
  - b. Dosage
  - c. Specific directions for use
  - d. Route of administration
  - e. Frequency of administration
  - f. Duration of therapy in days or months
  - g. Administration status as either KOP (Keep-On-Person), DOT (Directly Observed Therapy) or NA (Nurse Administered)
  - h. Time and date of order
  - i. Drug allergies
  - j. Prescriber's signature and prescriber's printed name or personal rubber stamp
  - k. Patient-inmate's complete name
  - l. CDCR number
  - m. Current housing
  - n. Language required (if other than English)
  - o. Indication for use when medication is ordered as needed (PRN) or where formulary restrictions require the indication to be provided on the order
2. The prescriber shall check the order for completeness prior to submission.
3. The Pharmacist-in-Charge or designee shall be responsible for ensuring all orders that are incomplete or missing required prescription elements are complete and accurate.
4. Medication orders may be faxed to the pharmacy. Faxed orders shall be marked "Faxed" on the copy sent to the pharmacy. The notation should include the time and date faxed.

### B. Verbal Orders

1. Verbal orders received by a Registered Nurse/Licensed Vocational Nurse/Psychiatric Technician shall be written on a CDC 7221, Physician's Orders, by the receiving nurse indicating telephone order (T.O.) or verbal order (V.O.) and name of the prescriber. The receiving nurse shall ensure that all prescription elements are contained in the order.
2. If the verbal order is received by a pharmacist, the pharmacist shall complete a CDC 7221 noting T.O. or V.O. and the name of the prescriber. The pharmacist shall send a

## CALIFORNIA CORRECTIONAL HEALTH CARE SERVICES

copy of the CDC 7221 to the nursing unit for the record and send the original to Medical Records to be placed in the patient-inmate's Unit Health Record.

3. All verbal orders shall be countersigned by the prescriber or another primary care provider (physician, mid-level, psychiatrist or dentist) as designated by the prescriber or Chief Medical Executive/Chief or Senior Psychiatrist/Supervising Dentist or designee within 48 hours, excluding weekends and holidays.