

HOSPITAL FORMULARY

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REASONS SOME SAY FOR TO HOSPITAL FORMULARY.....

NO

- Deprives the physician of his prerogative to prescribe and obtain the brand of his choice
- Permits pharmacist to act as the sole judge of which brand of drug to be purchased
- Allows for the purchase of inferior quality of drugs particularly in institutions where there is no staff pharmacist
- Does not reduce cost of drugs to patients

- **PTC**

Well formed committee assist in the selection of the most therapeutically beneficial drugs at the most economical cost to the hospital and the patient



- **Medicare**

will reimburse to the drugs administered or dispensed to the patients if the drug were approved and listed in specified compendia or the hospital's formulary

ASHP Guidelines



The hospital formulary system is an process whereby a hospital's medical staff working through its pharmacy and therapeutics committee (or its equivalent) evaluates and selects from among the numerous drug products available in the market place, those it considers to be most useful in patient care

- These products are then routinely available for use within the hospital
- Hospital formulary is a continually revised compilation of the drug products selected by the PTC, plus important ancillary information about use of those drugs and relevant pharmacy policies and procedures



Hospital Formulary

Should be

- Complete
- Concise
- Easy to use



Hospital Formulary

- **Information on what drug products have been approved for use by the PTC**
- **Basic therapeutic information about each approved item**
- **Information on hospital policies and procedures governing the use of drugs and**
- **Special information about drugs such as drug dosing rules, hospital- approved abbreviations, sodium content of various formulary items, etc.**

In accordance with the objectives the Formulary should consist of three main parts:

- I. INFORMATION ON HOSPITAL POLICIES AND PROCEDURES CONCERNING DRUGS**
- II. DRUG PRODUCTS LISTING AND**
- III. SPECIAL INFORMATION.**

Information on hospital policies and procedures concerning drugs

1. *Categorization of drugs*: e.g.: formulary drugs, therapeutic evaluation drugs, investigational drug, etc. and relevant considerations surrounding the use of each. Can include procedures for requesting that a drug be added to the formulary.

2. *Brief description* of the PTC, including membership, responsibilities and operation.

3. Hospital regulations governing prescribing, dispensing and administration of drugs

- **writing of drug orders and prescriptions**
- **controlled substances considerations**
- **generic and therapeutics equivalency policies**
- **automatic stop orders,**
- **verbal drug orders,**
- **patient's use of their own medications, self – administration of drugs by patients,**
- **Use of drug samples**
- **emergency drug order policy**
- **Use of floor- stock items**
- **standard drug administration times,**
- **reporting of adverse drug reactions and medication errors.**
- **Other topics if appropriate**

4. Pharmacy Operating procedures

- hours of service,
- outpatient prescription policies
- pharmacy charging systems
- prescription labeling and packaging practices
- inpatient drug distribution procedures
- handling drug information requests and
- specialized services of the pharmacy (e.g. patient education programs, pharmacy bulletin).

5. Information on using the formulary

includes

- ✓ How the formulary entries are arranged
- ✓ Procedure for looking up a given drug product
- ✓ Information contained in each entry
- ✓ References to sources of detailed information on formulary drugs.

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Drug Product Listing



- The section is called as the **heart** of the hospital formulary and consists of one or more descriptive entries for each formulary item plus one or more indexes to facilitate use of the formulary.

The item entries can either be arranged in the

- 1) alphabetical order of generic name and the brand names
- 2) alphabetically within therapeutic class; and
- 3) a combination of both the above system.

Each entry must include:

- 1. Generic name; combination products may be listed in generic name,**
- 2. Trade name**
- 3. Dosage form, strength, packaging, size stocked by the pharmacy;**
- 4. Formulation**

Additional information which may be a part of the drug entries includes:

- 1. Usual adult dose or pediatric dose ranges or both**
- 2. Special cautions and notes such as “refrigerate” or “do not administer I.V”**
- 3. Controlled substances symbol and**
- 4. Cost information – generally useful in case therapeutic equivalency presented.**

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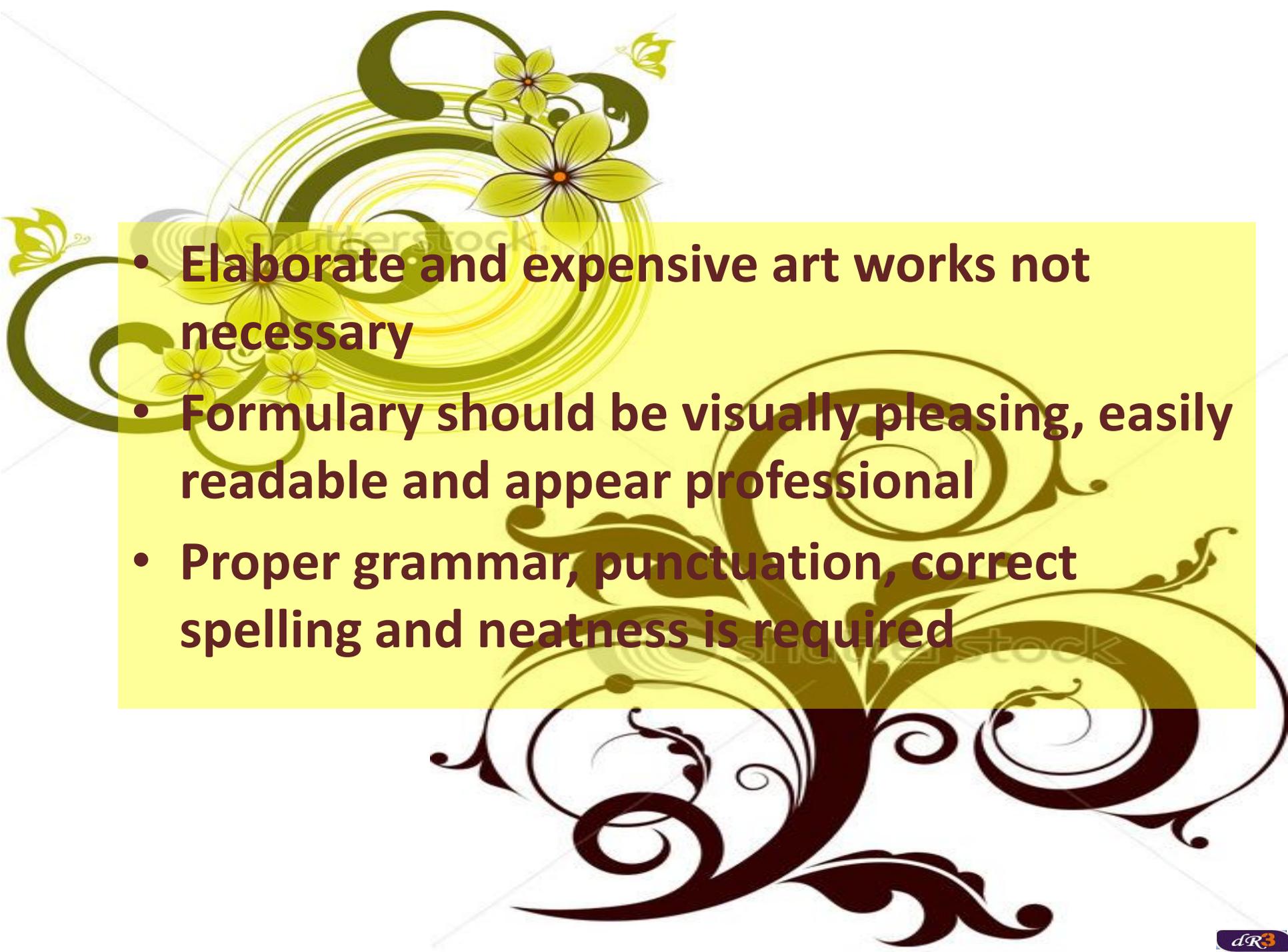
Special Information

- 1. Tables of equivalent dosages of similar drugs.**
- 2. List hospital approved abbreviations.**
- 3. Calculation of pediatric dosages.**
- 4. List of contents of emergency carts.**
- 5. List of sugar free drug products**
- 6. List of items available from central supply**
- 7. Table of sodium content of antacids**
- 8. List of dialyzable poisons.**
- 9. Dosing guide for patients with impaired renal function.**
- 10. Poison antidote chart.**
- 11. Table of drug interactions, drug interferences with the diagnostic tests and parenteral drug incompatibilities.**
- 12. Prescription blank, ADR report form blank, and formulary inclusion request form blank.**

Format and Appearance of Formulary

A typical formulary must have the following composition

1. Title page
2. Names and titles of the members of PTC
3. Table of contents
4. Information on hospital policies and procedures concerning drugs
5. Products accepted for use at the hospital
 - Items added *and deleted* since the previous edition
 - Generic– brand name cross reference list; index, and relative cost codes
6. Appendix:
 - Special information

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- **Elaborate and expensive art works not necessary**
 - **Formulary should be visually pleasing, easily readable and appear professional**
 - **Proper grammar, punctuation, correct spelling and neatness is required**

Several techniques to improve the appearance and ease of use of the formulary

- Using different color paper for each section
- Using edge index
- Pocket size ($\approx 4 \times 7''$) and
- Generic name in bold

1. Distribution of the formulary

- **Each patient care unit, including clinics and other patients care areas such as emergency care areas.**
- **Each division of pharmacy – inpatient dispensing, outpatient dispensing, drug information service, etc.**
- **Head of Dept. providing direct patient care and each member of medical staff.**
- **Enough formularies to replace the lost or worn copies.**

2. Revision of the formulary

- **Generally revised annually**
 - **additions or deletion to the formulary**
 - **changes in drug products**
 - **removal of drugs from the market place**
 - **changes in hospital policies and procedures**
- **In between revision can attach formulary supplement sheets to the inside back covers.**

3. Legal aspects of formulary system

A written and signed prescription or a written and signed medication order in the doctor's order book constitutes the only legal permit to dispense or administer a prescription drug.

When a generic name is written by the physician in the prescription the pharmacist may then dispense the brand which in his professional judgment meets the therapeutic needs.

3. Legal aspects of formulary system

In many instance through habit the physician may mention trade name. In case if there was an agreed consent for policy for generic acceptance the pharmacist can dispense as mentioned above.

- ***“Generic Equivalent Permitted”*** can be imprinted in the prescription form. The physician can either put tick mark in the *Yes* or *No* check box.
- Or the physicians signature in the consent form for the hospital formulary system operation.

Preparation of the Formulary

Prime responsibility of the PTC rests on the hands of Pharmacist – in – Chief.

Some decision which must be reached by this committee concern themselves with the following:

- a) What type of publication with best suit the needs of the hospital?**
- A hospital owned formulary?**
 - A simple drug list or drug catalogue?**
 - A purchased formulary service?**

Preparation of the Formulary

- b) Prepare set of rules or guides which the committee may use to evaluate drugs for admission to the formulary or drug list.**
- c) If the selected publication is formulary, decisions on the contents other than the sections on various therapeutic agents should be made:**

Prescription writing, use of drugs, laboratory values, dose calculations, pharmacological index

- d) Format of the formulary: Size, Loose leaf or bound, printed or mimeographed and indexing style.**

Once the above mentioned factors are decided the Pharmacist – in – chief prepares the hospital formulary

Formulary vs Drug Catalogue or Drug List

A formulary consists of a listing of therapeutics agents by their generic names followed by information on strength, form, posology, toxicology, use, and recommended quantity to be dispensed.

More informative and useful in educational aspects of drug therapy especially in hospitals with interns and training programs for healthcare personnel.

Formulary vs Drug Catalogue or Drug List

A drug list or drug catalogue consists of a listing of therapeutic agents by their generic names followed by data on strength and form. There may or may not be any additional information although some drug lists may provide the prescriber with recommended quantities to be dispensed.