



Hidalgo Medical Services Pharmacy Policies & Procedures

Updated: Oct. 25, 2006

Signed: *Mike Martin*
Mike Martin, HMS Board Chairman

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Policy: # PHARM-001

Date Effective: 08/24/05

Revision Date: 7/21/05

Department:Pharmacy

Approved By:

Title:

Consultant Pharmacist

Purpose:

To establish proper supervision and oversight responsibilities for Hidalgo Medical Services pharmacy services.

Policy:

1. The consultant Pharmacist of the clinic shall:
 - a. Assume overall responsibility for clinic pharmacy services, for clinic pharmacy supportive personnel and for procedures as outlined in the procedures manual, including all records of drugs procured, administered, transferred, distributed, packaged or dispensed from the clinic.
 - b. Assume responsibility for the destruction or removal of unwanted or outdated dangerous drugs, including controlled substances, as required by law and regulations.
 - c. Develop the pharmacy services procedures manual for the clinic establishing the system for control and accountability of pharmaceuticals.
 - d. Provide in-service education and training to clinic staff, as applicable.
 - e. Report in writing to the Board of Pharmacy within ten (10) days, any termination of services to the clinic. Report in writing to the Board of Pharmacy the names and places of employment of any pharmacy technicians under the supervision of the Consultant Pharmacist.
 - f. Comply with all other provisions of **16 NMAC 19.10, Limited Drug Clinics** that apply to the clinic.
 - g. The Consultant Pharmacist shall personally visit at least monthly to ensure that the clinic is following the established policies and procedures.

- h. The Consultant Pharmacist shall review the medical records of not less than 5% of the clinic patients who have received dangerous drugs (as determined by the dispensing or distribution records) since his/her last visit.
Such review shall be for the purpose of promoting therapeutic appropriateness, eliminating unnecessary drugs, and establishing the medical necessity of drug therapy, by identifying over-utilization or under-utilization, therapeutic duplication, drug-disease contraindications, drug-drug contraindications, incorrect drug dosage or duration of drug treatment, drug-allergy interactions, appropriate medication indication, and/or clinical abuse/misuse. Upon recognizing any of the above, the Consultant Pharmacist shall take appropriate steps to avoid or resolve the problem which shall, if necessary, include consultation with the prescriber and report to the medical director all concerns within 24 hours of the findings. The medical director is responsible for follow-up with the prescribing provider or other involved individuals and for informing Consultant Pharmacist of steps taken.
- i. The Consultant Pharmacist shall maintain a log or record of all visits and activities in the clinic. Such record shall include a log of all medical records reviewed, along with a record of all Consultant Pharmacist's interventions and/or consultations. This log or record shall be available for inspection by state drug inspectors upon request.
- j. Ensures that the procedures manual is reviewed as necessary to include any changes in the operation of the HMS Pharmacy, and changes affecting the policies and procedures at least once a year.
- k. The Consultant Pharmacist shall wear an identification badge listing their name and job title while on duty at the clinic.

Policy: # PHARM-010

Date Effective: 08/24/05

Revision Date: 7/21/05

Department: Pharmacy

Approved By: ***Arlene C. Thomas***

Title:
Clinic Objective

Purpose:

The purpose of this policy is to establish processes and protocols which will ensure that HMS clinics provide the highest quality of pharmaceutical care to patients that will most effectively impact the patient's identified health concerns.

Policy:

The following pharmaceutical procedures will apply to all HMS clinics:

Procedure: #PHARM-010a
Security

- a. Access to the drug storage area shall be limited to designated clinic Providers, the Pharmacist and supportive personnel who are performing pharmacy-related functions. [16 NMAC 19.10.19.5, 03-07-80...08-06-94]
- b. The drug storage area shall be locked when the above authorized Personnel are not in attendance.
- c. All controlled substances listed in Schedule II through V shall be stored in a secure locked, substantially constructed cabinet, located within the drug storage room.

Procedure: #**PHARM-010b**
Equipment

The following equipment and accessories will be available in the clinic:

- a. One waste receptacle
- b. One properly functioning refrigerator
- c. One fire extinguisher that meets applicable fire codes.
- d. One sink with hot and cold running water.
- e. All other equipment and accessories as needed for the clinic operation.

All items shall be maintained in usable condition and kept sanitary. Breakage or loss requires immediate replacement.

Procedure: #**PHARM-010c**
Sanitation

All equipment and supplies must be kept clean and sanitary.

- a. All counter top areas are to be kept clean at all times and clear of any Papers, boxes, bottles, etc.
- b. Food and beverages are not permitted in drug storage areas.
- c. Any prescription containers accidentally dropped on the floor are properly disposed of.
- d. All personnel must wash their hands before reporting for duty and upon returning from break or lunch periods.
- e. Clinic housekeeping personnel will maintain floors, trash containers and patient waiting areas. Any deficiencies should be reported immediately.

Procedure: #**PHARM-010d**
Licensing

The clinic must have the following current licenses:

- a. Limited Drug Permit issued by the New Mexico Board of Pharmacy.
- b. Federal Controlled Substance Registration issued by the Drug Enforcement Administration.
- c. State Controlled Substance Registration issued by the New Mexico Board of Pharmacy.

All licenses, permits, registrations of the clinic and each licensed medical provider, are to be kept current and displayed in a conspicuous place.

Procedure: #PHARM-010e

References

The clinic will maintain current, up-to-date editions of the following references:

- a. Physicians' Desk Reference OR USPDI with updates; printed, CD or Internet.
- b. New Mexico, "State Drug Laws and Regulations"
- c. A Poison Treatment Chart with the Regional Poison Control Center's telephone number.

Procedure: #PHARM-010f

Drug Storage

- a. The drug storage area will be a minimum of 48 square feet in size.
- b. All drugs will be stored under proper conditions of ventilation, lighting, temperature and security.
- c. All drugs are to be stored under clean, sanitary conditions.
- d. All controlled substances listed in Schedule II through V will be stored in a securely locked, substantially constructed cabinet, located within the drug storage room.
- e. All drug containers in the facility will be clearly and legibly labeled as required by law.
- f. Drugs will be purchased, stored and controlled in a manner that prevents having outdated, deteriorated, impure or improperly standardized drugs in the facility. The consultant pharmacist will inspect all drugs in the facility at least monthly to ensure their quality and integrity.
- g. Access to the drug storage area shall be limited to clinic Providers, the pharmacist and supportive personnel who are performing pharmacy-related functions.
- h. External drugs and preparations will be segregated from internal drugs.
- i.

Procedure: #PHARM-010g

Dispensing/Distributing

- a. Drugs will be dispensed or distributed only to clinic patients on the order of licensed Provider of the clinic.
- b. The clinic Provider will record the prescribed drug therapy on the patient medical record indicating name, strength, quantity and directions for use of the prescribed drug. This information will be initiated or signed by the Provider. A separate prescription form in addition to the medical record may be used.
- c. The prescription order will then be prepared by the Provider or pharmacist,

and a dispensing label affixed to each dispensing unit The following information will appear on the label affixed on the dispensing unit:

1. Name of patient
 2. Name of prescriber
 3. Date of dispensing
 4. Directions for use.
 5. Name strength and quantity of the drug.
 6. Expiration date.
 7. Names, address and phone number of the clinic.
 8. Prescription number if applicable.
- d. The pharmacist or Provider must then provide a final check of the dispensing unit and sign or initial the prescription or dispensing record.
- e. Refill prescription orders must also be entered on the patient's medical record and the dispensing record.
- f. If narcotics are prescribed for a patient and they are not available in the clinic, they are obtained through an outpatient pharmacy by prescription by the patient, or if needed immediately for patient care, by licensed personnel.
- g. LPN's administering medication shall be under the supervision of an RN or provider.
- h. Physician Assistants, Medical assistants may give medication only under the direct supervision of a licensed physician.
- i. Any controlled substance that is wasted will be witnessed by two (2) licensed personnel, as required by State and Federal Regulations, and documented on the clinic log.
- j. Documentation will include: name of medication, dose, amount, route time given response to medication.

Procedure: #PHARM-010h
Supervision

- a. The Consultant pharmacist assumes overall responsibility for clinic Pharmacy services for the clinic pharmacy supportive personnel and for procedures as outlined in the procedures manual, including all records of drugs procured, administered, transferred, distributed, re-packaged or dispensed from the clinic.
- b. The Consultant Pharmacist assumes responsibility for the destruction or removal of unwanted or outdated dangerous drugs, including controlled substances as required by law and regulations.
- c. The consultant Pharmacist shall personally visit the clinics as required by law to ensure that they are following the established policies and procedures.
- d. The Consultant Pharmacist shall review the medical records of not less than 5% of the annual total of the clinic patients who have received dangerous drugs (as determined by the dispensing or distribution records) since his/her last visit. Such review shall be for the purpose of promoting therapeutic appropriateness, eliminating unnecessary

- drugs and establishing the medical necessity of drug therapy, by identifying over-utilization or under-utilization, therapeutic duplication, drug disease contraindications, drug-drug contraindications, incorrect drug dosage or duration of drug treatment, drug allergy interactions, appropriate medication indication, and/or clinical abuse/misuse. Upon recognizing any of the above, the Consultant Pharmacist shall take appropriate steps to avoid or resolve the problem that shall, if necessary, include consultation with the prescriber. See previous notes about involvement of the Medical Director.
- e. In the absence of the Consultant Pharmacist, pharmaceutical services are under the supervision of a licensed Provider.

Procedure: #PHARM-010i

Labeling and Re-labeling

- a. The act of affixing, applying, or attaching a display of written, printed or graphic matter upon or in the immediate container of any human use drug, repackaging or dispensed on the order of a Provider shall be defined as, “labeling” or “to label” and is a function that is
RESTRICTED TO REGISTERED PHARMACISTS AND SUPPORTIVE PERSONNEL
APPROVED BY THE CONSULTANT PHARMACIST.
- b. For specific information required on labels and labeling see policy and Procedure “packaging and repackaging” and “dispensing/distributing”.

Procedure: #PHARM-010k

Sample Drugs

Handling of Sample Drugs:

The acquisition, storage and distribution of manufacturer’s sample drugs will be Permitted as long as the record keeping and distribution of those products usage is maintained according to the HMS policy and procedure regarding record keeping and patient counseling. No. “sample drug” unit of a dangerous drug category may leave the clinic unless the following criteria have been met:

- a. Once a legal drug order has been made, the designated drug and quantity may be obtained after a complete entry has been made on the corresponding inventory control sheet.
- b. The following information must then be recorded on each original Dispensing container of that product (either written directly on each container or on an adhesive backed label) provided in the drug room each listing:
 1. Name and location of person dispensing
 2. Name of patient
 3. date of dispensing
 4. Name and strength of drug
 5. Expiration date
 6. Adequate direction for use.

Samples of medication that are a legend drug or that have been restricted to the sale on prescription by the New Mexico Board of Pharmacy are subject to all the record keeping, storage and labeling requirements for prescription drugs as defined by NMSA 26-1-16, and other applicable state and federal laws regardless of source. [16 NMAC 19.10.18.1, 03-07-80...05-15-96]

Procedure: #PHARM-010j
Drug Destruction and Returns

- a. The Consultant Pharmacist shall be responsible for the removal of all Recalled, outdated, unwanted or otherwise unusable drugs from the clinic Inventory.
- b. Disposal will be accomplished by:
 1. When possible, drugs will be returned to the wholesaler or manufacturer (the legitimate source of supply) for credit OR
 2. Unwanted or unusable drugs will be returned to the Consultant Pharmacist's pharmacy for proper disposition.
- c. Controlled Substances
 1. In accordance with State and Federal regulations, all unused doses of narcotics must be wasted with two (2) licensed personnel present.
 2. One practitioner must be the person who removed the narcotic from the narcotic box.
 3. A log must be maintained of all wasted narcotics with the two (2) licensed personnel's signatures.
 4. A monthly audit of the clinic will be conducted by the Consulting Pharmacist.
 5. Any discrepancies will be reported to local authorities.

Procedure: #PHARM-010l

Procurement or Receipt of Dangerous Drugs

The system of procurement of all drugs shall be the responsibility of the pharmacist.

- a. Ordered medication, which has been ordered by specifically designated personnel, is delivered, by duly licensed wholesalers, to the clinic...
- b. The order is checked and compared with what was ordered to ensure Accuracy.
- c. Copies of the received documentation of all medications are to be readily available to the pharmacist.
- d. Upon receipt at the clinic, authorized personnel verify that accuracy of medications received.
- e. Credits are processed monthly.
- f. Records of receipt of dangerous drugs and inventories of controlled substances shall be maintained as required by the Drug, Device and Cosmetic Act 26-1-16 and the Controlled

Substances Act 30-31-16 and the Board of Pharmacy 16 NMAC 19.20.(See policy/procedure “record keeping”).

Procedure: #PHARM-010m

Record Keeping

- a. Records of all dangerous drugs, their receipt, withdrawal from stock and use of other disposal will be maintained for a period of three years.
- b. A record of all dangerous drugs dispensed indicating the date the drug was dispensed, name and address of the patient, name of the prescriber, and the quantity and strength of the drug dispensed. The individual recording the information and the pharmacist or clinic provider who is responsible for dispensing the medication shall initial the record.
- c. Records for controlled substances under Schedule II shall be kept separate from other records.
- d. Records of all Schedule II drugs and narcotic controlled substances listed in Schedule III, IV and V shall be maintained separately from other prescription drugs.
- e. Records and prescriptions for non –narcotic controlled substances under Schedule II, III, IV and V shall be marked (in a manner meeting Board requirements) so as to be “readily retrievable” from records or prescriptions for other dangerous drugs.
- f. Records of Patient counseling performed.
- g. Policy and procedure manual meeting Board of Pharmacy requirements and reviewed annually (must be maintained current at all times).
- h. Copy of most recent Board of Pharmacy inspection report (conspicuously displayed).
- i. Copy of the Consultant’s Pharmacist License (current copy must be maintained at all times.)
- j. Annual inventory of all controlled substances.

*** All records, unless otherwise noted, are maintained for a minimum of three years and are available for State Drug inspectors to review.

Procedure: #PHARM-010n

Scope of Service

The clinic prescribes medications when necessary for the welfare and benefit of the patients. HMS may occasionally prescribe medication for nervousness or insomnia or controlled substances for routine aches, pains or headaches.

Medications in stock are limited to those found on the approved Drug formulary that is updated at least annually.

Only those licensed Providers with approved staff privileges may prescribe medication for the patients.

Procedure: #PHARM-010o

Patient Counseling

- a. Providers will provide patient counseling when administering drugs, as appropriate.
- b. On those occasions when a medication (prescription) is dispensed for Later administration by the patient, the following will apply:
 1. When the Consultant Pharmacist is available at the time of dispensing or distribution of a prescription, he/she shall personally offer to orally discuss matters that will enhance or optimize drug therapy with each patient or patient's agent.
Such oral discussion will be in person whenever applicable or by telephone and shall include appropriate elements of patient counseling. At a minimum this counseling will meet the requirement of Board of Pharmacy Regulation Part 4, Section 17, Paragraph 5. [16 NMAC 19.10.16.1, 03-03-08...08-06.90.]
 2. The pharmacist shall document in the patient record the prescription was processed and the date the counseling occurred, if other than the date processed. Failure to accept the pharmacists' offer to counsel shall be documented in the prescription signature log.
 3. If the consultant Pharmacist is absent at the time of dispensing or distribution of a prescription from clinic drug stock to a clinic patient, the patient shall be provided written information when appropriate on side effects, interactions and precautions concerning the drug or device provided. The clinic shall make the consultant Pharmacist's phone number available to patients for consultation on drugs provided by the clinic.

Procedure: #PHARM-010p
Prescription Refills

The purpose of a prescription refill is to provide patients with an adequate amount of medication.

- a. Patients who currently have the clinic as their primary care giver may obtain scripts for prescription refills at the clinic center, if deemed necessary by the provider on duty. Prescriptions are to be filled at any outside pharmacy. Patients are encouraged to present to clinic for refills on a day that their caregiver has clinic to provide for continuity of care.
- b. Any patient who presents to the clinic requesting a refill for any Medication used to treat infections, diabetes mellitus, or hypertension will be triaged as appropriate.
- c. If the patient does not bring in his/her prescription bottles, their medical Record will be reviewed.
- d. All patients will receive instructions on the purpose, actions and side effects of their prescribed medications.

Procedure: #PHARM-010q
Pharmacy Formulary/Personnel List with access to Pharmacy

a. Bayard Community Health Center Pharmacy Formulary

Injectables		Other
Benadryl	50 mg	Tylenol
Solu Medrol		Tylenol Infant
Decadron		Tums
Rocephin	500 mg	Tussi DM Elixir
Lincocin	300 mg	Clonidine/.1 mg
Depo Medrol		Zithromax 1 gm
Depo Provera		Mylanta
Cyanobalamin		Belladonna Elixir
Epinephrine	1:1000	
Kenalog	40 mg	
Nitrostat		
Phenergan	25 mg	
Imitrex		
Ketorolac	60 mg	
Nalbuphine		

HMS Bayard Community Health Center personnel access to Pharmacy:
 Angela Gallegos, MD
 Marlene Baska, PA-C

b. Cobre Health Clinic Pharmacy Formulary

Injectables		Other
Benadryl	50 mg	Tylenol
Solu Medrol		Tylenol Infant
Decadron		Tums
Rocephin	500 mg	Tussi DM Elixir
Lincocin	300 mg	Clonidine/.1 mg
Depo Medrol		Zithromax 1 gm
Depo Provera		Mylanta
Cyanobalamin		Belladonna Elixir
Epinephrine	1:1000	
Kenalog	40 mg	
Nitrostat		
Phenergan	25 mg	
Imitrex		
Ketorolac	60 mg	
Nalbuphine		

HMS Cobre personnel access to pharmacy:
 Marlene Baska, PA-C
 Suki Padilla, Medical Assistant

c. HMS Cliff/Gila Community Health Center
 Pharmacy Formulary

Injectables

Benadryl	50 mg
Solu Medrol	
Decadron	
Rocephin	500 mg
Lincocin	300 mg
Depo Medrol	
Depo Provera	
Cyanobalamin	
Epinephrine	1:1000
Kenalog	40 mg
Nitrostat	
Phenergan	25 mg
Imitrex	
Ketorolac	60 mg
Nalbuphine	

Other

Tylenol
 Tylenol Infant
 Tums
 Tussi DM Elixir
 Clonidine/.1 mg
 Zithromax 1 gm
 Mylanta
 Belladonna Elixir

Cliff personnel access to pharmacy:
 Michael C. Sergeant, MD
 Jill Steidl, PA-C
Fawn Drozda, Medical Assistant

d. HMS Lordsburg Pharmacy Formulary

Injectables

Deprovera 150mg	Lidocaine Bolus 100mg
Rocephine 500mg	Lidocaine drip 4mg/ml
Rocephine 1gm	Lovenox 30mg
Toradol 30mg	Lopressor 5mg
Toradol 60mg	Narcan 0.4%
Benadryl 50mg	Procainamide 100mg
Phenergan 25mg	Sodium Bicarb 50mEq
Marcaine 0.5%	Thiamine HCL 100mg
Lidocaine 1%	Vasotec 1.25mg
Lidocaine 2%	

Kenalog 40mg
Imatrex 6mg
Vit. B12 1000mcg
Delestrogen 40mg
Dexamethasone 4mg
Solucortef 100mg
Depromedrol 80mg
Solumedrol 100mg
Xylocaine with Epi
Pneumovax
Tubersol
Humulin R
Lorazepam 2mg
Diazepam 10mg
Bicillin LA 1.2
Lasix 40mg
Demerol 50mg
Morphine 10mg
Epinephrine 1:1000
Visteral 100mg
Adenocard 6mg
Aminophylline 500mg
Atropine 1mg
Calcium Chloride 100mg
Cardizem 25mg
Dexamethazone 10mg
50% Dextrose
Dopamine 200mg
Epinephrine 1:10,000
Heparin 100u
Lanoxin 0.5mg
Lidocaine 100mg

OTHER
Children's Chewable Tylenol
Nitro Tabs 0.4mg
Ipecac syrup
Silvadine Cream
Viscous Lidocaine 2%
Albuterol 2.5%
Atrovent 0.02%
Sodium Chloride 0.9%
Accuzyme
Phenergan Sup. 12.5mg
Phenergan Sup. 25mg
Tylenol Sup. 120mg
Tetracaine Ophthalmic
Phenylephrine Ophthalmic
Proparacaine HCL
Tropicamide
ASA 81mg
ASA 325mg
Tylenol 500mg
Ibuprofen 200mg
Mylanta
Clonidine 0.1mg
Fleets enema
Gentamycin ophthalmic oint.
Thera ear
Benadryl Liquid Children
Benadryl 25mg caps
Infant Ibuprofen
Infant Tylenol
Children's Ibuprofen
Children's Tylenol

HMS Lordsburg Clinic Pharmacy Access Personnel List:

Michael Johnson, MD

Mary Jane Gallagher, PA-C

JoAnne Marsh, FNP

Donna Mason, RN

Cindy Gonzalez, MA

Pam Bingham, MA

Steve Tecca, Radiology Tech

e. HMS Med Square Pharmacy Formulary

Accolate starter kit	20mg	Accuprill	20mg
Adalate cc	60mg	Aldara cream	5%
Alesse mini pack	(28)	Altace	2.5mg
Altace	5mg	Aricept	5mg
Augmentin	50mg	Autmentin	875mg
Avapro	150mg	Bactroban cream	.05%
Cardizem CD	120mg	Cardizem CD	180mg
Cardizem	240mg	Cardizem	300mg
Ceftin tab	250mg	Cipro	500mg
Covera HS	180mg	Cozaar	50mg
Nascobal	500mg/0.1ml	Demadex	20mg
(cyanocobalamin nasal spray)		Diflucan	10mg/ml
Diflucan	40mg/ml	Diovan	80mg
Diovan	160mg	Diovan HCT	80mg/12.5mg
Effexor XR Starter kits	37.5 mg/75mg	Fosamax	5mg
Fosamax	10mg	Hemocyte F Elixir	
Hemocyte tab		Hemocyte F Tablets	
Hemocyte Plus		Hyzaar	50/12.5mg
Flovent	110mg	Cyanocobalmin	1000mcg/ml
Haldol	50mg/ml	Diphenhydramine	50mg/ml
Prochlorperazine	50mg/ml	Claforan	1g
Unasyn	1.5g	Methylprednisalone acetate	40mg/ml
Blephamicle Opthaimic Oint	3.5g	Dexamethasone	8mg/ml-10mg/ml
Triamcinolane	40mg/ml	Lincocin	300mg/ml
Rocephin	1g	Toradol	30-60mg
Estradiol Valerate	20mg/ml	Depo-estradiol	5mg/ml
Depo-testosterone	200mg/ml	Pramethazine	25mg
Meperidine	50mg/ml	Morphine	10mg
Diazepam	5mg/ml	Unutrex Inj	6mg
Imitrex nasal	20mg	Imitrex tablets	50mg
Lescol	20mg	Lescol	40mg
Levaquin	500mg	Levbid	0.375mg
Levsin SL	0.125mg	Lexxel	5-5mg
Lotensin	5-6.25mg	Lotensin	10mg
Lotensin	20mg	Lotrel	2.5/10mg
Lotrel	20mg	Lotrel	5/10mg
Lo Ovrал	28	Magsal	
Metrogel		Niferex Forte	150
Neferex	150	Pepcid	20mg 40mg
Plendil	205mg 5mg	Presoce Starter kit	
Pravachol	10mg,20mg,40mg	Prempro	0.625mg/205mg
Permarin	0.625mg	Prinivil S	10mg
Raxar	200mg	Relafin	500mg, 700mg
Serevent nasal		Singulair	5mg, 10mg
Sular	10mg, 20mg	Ticlid	

Triphasil	28	Trovan	100mg/200mg
Infants Tylenol		Ultram	50mg
Univasc	15mg, 7.5mg	Valtrex	500mg
Vanfin	200mg	Voltaren XR	100mg
Vasotec	5mg	Zestril	5mg, 20mg
Zocor	10mg, 20mg, 40mg, 80mg	Zoloft Starter Kit	50mg
Zomig	5mg		

Under Refrigeration

Albuterol Sulphate Solution		Pneumococcol	
PPD		Wycillin	1,200,000 units
Phenegan suppositories	12-5mg, 25mg	Bicillin	1,200,000 units
Tetnus & Diphtheria		Humalog	
Sodium Chloride	0.9%	Water for injection	
Xylocaine	1%, 2%	Lidocaine	1%, 2%
Lidocaine with epi	1%, 2%		

HMS Med Square Clinic Pharmacy Access Personnel List:

Michael C. Sergeant, MD
 Santiago Macias, MD
 Angela Gallegos, MD
 Meredith Heidenfeld, PA-C
 Teresa Munoz, CNP
 Paul DeMarco, RN
 Delbert Baska, LPN
 Melissa Dietz, Medical Assistant
 Amy Montoya, Medical Assistant

f. HMS Mimbres Valley Clinic Pharmacy Formulary

Injectables		Other
Benadryl	50 mg	Tylenol
Solu Medrol		Tylenol Infant
Decadron		Tums
Rocephin	500 mg	Tussi DM Elixir
Lincocin	300 mg	Clonidine/.1 mg
Depo Medrol		Zithromax 1 gm

Depo Provera
Cyanobalamin
Epinephrine 1:1000
Kenalog 40 mg
Nitrostat
Phenergan 25 mg
Imitrex
Ketorolac 60 mg
Nalbuphine

Mylanta
Belladonna Elixir

Mimbres personnel access to Pharmacy:

Mary Sinden, FNP

Michael Sergeant, MD

Maria Clyburn, LPN

Procedure: #PHARM-010s

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