Attachment 10

ADDS QUESTIONNAIRE

Vendor name Consultant Pharmacist for Ambulatory Surgery Centers

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1. In what specific patient care settings would this ADD be used? What are the security requirements for the remote location to ensure that medication access is limited only to authorized providers?

We use ADDs in ambulatory surgery centers for controlled substances real time accountibility and security. All ADD are located within the secure area of the surgery center in very close proximity to the procedure rooms, ORs and PACUs (recovery areas). Each ADD is located in a secured area that has no public access.

2. How will the pharmacist review medication orders? Is there an interface or other method that allows for prospective review, or is review only retrospective?

Consultant pharmacist audits a select number of transactions monthly so there is only retrospective review. Medications are administered by orders given by anesthesiologist and/or surgeon. All medications given must have an order in the EHR.

- 3. What specific features are available through the technology to ensure that the correct medication was removed per the provider's medication order?
- Only nurses and pharmacists have access to ADDs. RN pulls orders under anesthesiologist or surgeon's name and transcribes meds onto a controlled drug record (CDR)which records the amount received, patient's name, med and amount administered, cosigns wastage and intact amount returned to ADD. RN and MD sign for receipt, utilization, waste and return of unused meds. All CDRs are kept on file. The consultant pharmacist audits ADD report CDRs and EHR.
- 4. What are the security features of the technology? How is user access maintained and by whom? Who has the ability to remove medications?

Console privileges(management of ADD users and functions) are limited to nurse administrators and pharmacists. Only RNs and pharmacists have access to ADD (medstation). Privileges are granted by administrator. Access to AD is obtained via logon and bioID. Password is only used if person's bioID fails to register on device. Privileges are given and removed based upon employment term.

- 5. How are remote devices restocked? If the medication is transported after being checked by the pharmacist, what features are available that provide for detection of a tampered container? The ADD is located in very close promimity to the OR suites. The ADD is restocked by an administrative RN. All transactions are recorded in real time and cannot be altered. Each access requires an inventory account and discrepancies must be explained and resolved. All ADD transactions are audited by the consultant pharmacist. Medication is administered to the patient either by the anesthesiologist or the RN working under the surgeon's direction to provide moderate sedation. Pharmacological effect is monitored constantly during the procedure.
- 6. Can controlled substances be stocked? If so, what additional security features are available?

 The ADD is currently only used for controlled substances. The security features are described above.

7. How would patient consultation occur? No patient consultation occurs because meds are administered to patient during procedure where MD is present
8. How would the ADDS remote user interact with the pharmacist? What technology options exist? The pharmacist audits transactions on the ADD monthly
 How would the pharmacist detect drug diversion for medications stocked in the ADDS? What reports are available to allow the pharmacist to monitor safe use of ADDS technology? Please provide an example of these reports. One method of detecting diversion is via audits. Discrepancy reports are reviewed. Transactions from the ADD are compared to the CDR and the patient's EHR.
10. What specific law changes are recommended to support the use of this remote ADDS technology? Laws should take into account the electronic recording of controlled substance transactions. Laws pertaining to inventory and auditing processes should reflect the widespread utiliaztion of electronic recording.
Please submit completed questionnaire to Debbie Damoth by fax at (916) 574-8618 or by email at debbie.damoth@dca.ca.gov by 5 p.m. Feb. 10.