

OREGON STATE HOSPITAL

POLICIES AND PROCEDURES

SECTION 10: Medications

POLICY: 10.003

SUBJECT: Medication Crush

POINT PERSON: CHIEF MEDICAL OFFICER

APPROVED: DOLORES MATTEUCCI
SUPERINTENDENT

DATE: JULY 16, 2020

I. POLICY

- A. Oregon State Hospital (OSH) has the responsibility to provide safe care to patients. According to accepted standards of medication management practices, OSH will require crushing of medications that have moderate to high risk for abuse in order to minimize the potential for diversion. This policy applies to all OSH programs.
- B. All medications listed in this policy must be crushed unless specifically labeled or noted by the Pharmacy Department as DO NOT CRUSH (*e.g.*, sustained release, special formulations) or if a physician/nurse practitioner writes an order specifically exempting the process (*e.g.*, DO NOT CRUSH).
 1. All immediate-release opioid analgesics which include, but are not limited to:
 - Oxycodone products (Percocet, Tylox, Roxicet)
 - Hydromorphone products (Dilaudid)
 - Morphine products
 - Hydrocodone/acetaminophen (Vicodin, Lorcet, Lortab, Norco)
 - Codeine products, including Tylenol #3
 - Methadone
 - Oxymorphone (Numorphan)
 - Tramadol (Ultram)
 - Meperidine (Demerol)
 2. All benzodiazepines including, but not limited to:
 - Diazepam (Valium)
 - Lorazepam (Ativan)
 - Alprazolam (Xanax)

- Clonazepam (Klonopin)
- Chlordiazepoxide (Librium)
- Oxazepam (Serax)
- Temazepam (Restoril)
- 3. Stimulants (immediate release) including, but not limited to:
 - Modafinil (Provigil)
 - Dextroamphetamine (Dexedrine)
 - Amphetamine products (Adderall)
 - Methylphenidate products (Ritalin, Metadate, Methylin)
- 4. Miscellaneous (immediate release) drugs with abuse potential at OSH including, but not limited to:
 - Quetiapine (Seroquel)
 - Bupropion (Wellbutrin, Zyban)
 - Gabapentin
- C. Physicians and nurse practitioners may write orders to crush other medications not included on the list above as appropriate (e.g., “Crush Acetaminophen”).
- D. Based upon an individualized evaluation of a patient and considering the overall environment and potential for diversion, a physician/nurse practitioner may write an order that instructs nursing staff to NOT CRUSH any of the medications listed in this policy.

Nursing staff must perform careful mouth checks for those patients that have exceptions and immediately report any behaviors of concern to the physician/nurse practitioner and interdisciplinary treatment team.
- E. This policy applies to all staff, including employees, volunteers, trainees, interns, contractors, vendors, and other state employees assigned to work at OSH. Staff who fail to comply with this policy or related procedures may be subject to disciplinary action, up to and including dismissal.
- F. OSH follows all applicable regulations, including federal and state statutes and rules; Oregon Department of Administrative Services, Shared Services, and Oregon Health Authority policies; and relevant accreditation standards. Such regulations supersede the provisions of this policy unless this policy is more restrictive.

II. REFERENCES

- Oregon State Hospital Nursing Services Department. *Medication administration*, 2.060.
- Oregon State Hospital Policy and Procedure Manual. *Medication management*, 6.055.