

OREGON STATE HOSPITAL

POLICIES AND PROCEDURES

Executive Summary of Policy Changes

Contact the person noted below with questions about the policy or related procedures.

POLICY:	10.004, “OVERRIDE PROCESS FOR MEDICATIONS IN EMERGENCY SITUATIONS”		
CONTACT:	Director of Pharmacy	EFFECTIVE DATE:	SEPTEMBER 14, 2026

PURPOSE OF THIS POLICY:

To ensure medications are readily and safely available for use at Oregon State Hospital (OSH), this policy:

1. Explains when staff can obtain and administer emergency medications from Automated Dispensing Cabinets (ADCs) or Emergency Kits (E-Kits) without following the usual steps.
2. Explains how staff should obtain and administer these medications during an emergency.
3. Lists the medications that can be administered this way.

SUMMARY OF CONTENT CHANGE(S):

- Clarified the criteria for when emergency medications may be obtained through the override process from ADCs and E-Kits.
- Clarified that emergencies warrant bypassing pharmacist review and that urgent, non-emergency situations require pharmacy verification.
- Added requirements for practitioner determination and documentation when bypassing pharmacy review.
- Clarified pharmacy responsibilities for post-administration review of override medications.
- Updated staff responsibilities for incident reporting and medication variance reporting following emergency medication administration.
- Updated related policy and protocol references, as applicable.

REASON FOR CHANGE(S):

Clarify the requirements and responsibilities for the emergency medication override process, strengthen documentation and oversight expectations, ensure medications obtained through the override process are used in appropriate emergency situations, and maintain alignment with

current pharmacy operations, regulatory requirements, and accreditation standards.

Required action/Specified Staff:

Tier 0 – all staff read the updated policy; no follow-up action is required.

WORKGROUP PARTICIPANTS AND VALIDATORS:

Dept	Individual Rep's Name
Pharmacy	Kevin Haley
	Amber Lorenzen

NOTE: OSH personnel are responsible to know and abide by all applicable policies as indicated in [OSH Policy and Procedure 1.001, "Policy System at OSH"](#).

Current documents may be found in [I:\OSH Policies & Procedures](#) and on the [OSH Policies and Procedures intranet](#) page.

Email questions to "[OSH Policies and Procedures](#)".