

# PHARMACY NEWSCAPSULE

DEPARTMENT OF HEALTH SERVICES / DIVISION OF QUALITY ASSURANCE

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## APP FOR THAT

As the new year arrives, many people look to make changes. And, there are many apps that can help you reach your goals. One to check out is “MyPlate,” an app that can help you track diet and exercise.

You can track your daily water intake; use the bar code scanner to track food; review daily intake of protein, fat, carbohydrates, and more.

There are many other diet tracking apps. What’s your favorite?



## RESPIMAT®: NEW INHALER DELIVERY DEVICE



Respimat® is a new inhaler delivery system that generates a soft mist of medication for individuals to inhale. Studies indicate that using this delivery mechanism can deliver more medication into the lungs where it is intended to work.

Surveyors should be aware of a few things when observing these types of inhalers during investigations. The following standards are, generally, for the administration, priming, and storage for a Respimat® inhaler. However, individual medications may have different instructions.

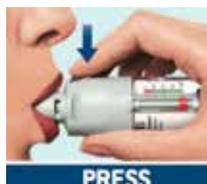
### *Medication Administration*



- 1. “Turn”**  
Hold the inhaler upright with the cap closed. Turn base in direction of the arrows on label until you hear a click.



- 2. “Open”**  
Flip can OPEN until it clicks into open position.



### 3. “Press”

- Close your lips around the mouthpiece end.
- While taking in a slow, deep breath, keep breathing in slowly.
- Close cap.
- Repeat—Turn, Open, Press.

The inhaler does not need to be shaken.

### *Priming*

Proper priming of the inhaler is important to make sure that the correct amount of medicine is delivered.

1. Hold the inhaler upright with the cap closed to avoid accidental release of dose.
2. Flip the cap until it snaps fully open.
3. Point your Respimat® inhaler toward the ground (away from your face). Press the dose-release button. Close the cap.

When the Respimat® inhaler has not been used for more than three days, spray one puff toward the ground to prepare the inhaler for use. If your Respimat® inhaler has not been used for more than 21 days, repeat steps 1, 2, and 3 until a spray is visible.

### *Storage*

A Respimat® inhaler should be stored at room temperature. Once the inhaler is set up, the inhaler is good for 90 days.

In conclusion, Respimat® is a type of inhaler. Each drug that uses this delivery method will have its own specific instructions. In most cases, videos and written instructions can be found online. The following are two examples:

SPIRIVA RESPIMAT: <https://www.spiriva.com/using-spiriva/how-to-use-spiriva-respimat>

COMBIVENT RESPIMAT: <https://www.combivent.com/how-to-use/video>

### *Medication Administration Resource*

As a surveyor, you may occasionally need a resource that provides a general explanation as to how a medication should be given. The American Society of Health-System Pharmacists (ASHP) SafeMedication web site, <http://www.safemedication.com/>, provides a link with written instructions, including images, for each route of drug administration.

Newer medication will often have dedicated websites that can easily be found through an internet search engine by typing in the brand name of the medication. Once at the web site, you may find videos (like for Respimat® inhalers), pictorials, and written instructions on how to give or take a medication.

Lastly, many medications now require Food and Drug Administration (FDA) approved medication guides that can provide information on the proper administration of a medication. Medication guides can be found at <http://www.fda.gov/Drugs/DrugSafety/ucm085729.htm> .

## CONSULTANT CORNER

by Doug Englebert, R.Ph.



***Is a card-locked unit sufficient for one of the double locks needed for narcotics in a critical access hospital (CAH)?***

There is no federal requirement for a double lock of controlled substances in the CAH regulations. The state hospital regulation, Wis. Admin. Code § DHS 124.15(4)(b)3, states that drugs must be locked. However, federal CAH regulations do not specifically state that medications must be locked; but that they must be stored according to standards of practice.

CAHs may be a Drug Enforcement Administration (DEA) registrant and, as such, they must follow controlled substance federal law, which would require locking. In addition, standards of practice and DEA laws require inventory of controlled substances and reporting of losses.

As a practical matter, facilities often adopt secondary security on controlled substances in order to limit access and to more easily comply with inventory management and loss reporting requirements. For example, in an automated dispensing unit, only certain people are allowed access codes, key codes, keys, etc., which allow them to access controlled substance storage areas. When facilities do this, the result is often a “double lock,” which is not specifically required by regulation in a CAH, but may be a good idea.

Federally certified hospitals that are not CAHs have this code:

§ 482.25(b)(2)(ii) – Drugs listed in Schedules II, III, IV, and V of the Comprehensive Drug Abuse Prevention and Control Act of 1970 must be kept locked within a secure area.

In this case, the drugs must be locked and then placed in a secured area, which would be considered the double lock and the key card would be sufficient.

