PRN Medications

General Discussion:

A PRN medication is a medication that is ordered by a practitioner to be administered on an “as needed” basis according to written parameters of the practitioner. This includes over-the-counter medications requested by the resident. The parameters must include the reason for administration, and the time or frequencies at which to administer the medication. If the PRN medication is written with a repeat order, clarification must be sought as to the number of times a repeat dose may be administered in a given time frame. PRN medication must be recorded on the medication administration record (MAR) with the time given, by whom, and the follow up effect. PRN medication(s) may be in any drug classification, and may include but are not limited to the following:

- Analgesics (medications used for pain – for example Oxycodone, Vicodin and Tylenol or Acetaminophen)
- Anti-inflammatory drugs (medications used for inflammation and pain – for example Ibuprofen, Advil or Aleve)
- Sedatives or hypnotics (medications used for sleep – for example Lorazepam, Ambien or Zolpidem)
- Antipsychotic medications (medications used for behaviors – for example Zyprexa or Risperdal)
- Respiratory tract drugs (medications used for breathing problems – for example Albuterol or Proventil)
- Gastrointestinal tract drugs (medications used for heartburn, constipation, etc. – for example Senna or Pepcid)

Any PRN medication that has been given regularly should be reported to the physician for reassessment for routine scheduled use.

Relevant regulations:

ADC: Although there is no specific regulation related to the use of PRN medications, you should consider best practices for the use of PRN medications to protect the health, safety and welfare of your residents.
FAMILY ADC: Although there is no specific regulation related to the use of PRN medications, you should consider best practices for the use of PRN medications to protect the health, safety and welfare of your residents.

AFH:

DHS 88.10(3)(n) *Freedom from seclusion and restraints.*

DHS 88.10(3)(n)1. Except as provided in subd. 2., to be free from seclusion and from all physical and chemical restraints, including the use of an as-necessary (PRN) order for controlling acute, episodic behavior.

RCAC: Although there is no specific regulation related to the use of PRN medications, you should consider best practices for the use of PRN medications to protect the health, safety and welfare of your tenants.

CBRF:

DHS 83.02(15) "Chemical restraint" means a psychotropic medication used for discipline or convenience, and not required to treat medical symptoms.

In addition to the rights under s. 50.09, Stats., each resident shall have all of the following rights:

DHS 83.32(3)(f) Be free from all chemical restraints.

DHS 83.37(1)(i) When a psychotropic medication is prescribed on an as needed basis for a resident, the CBRF shall do all of the following:

DHS 83.37(1)(i)1. The resident's individual service plan shall include the rationale for use and a detailed description of the behaviors which indicate the need for administration of PRN psychotropic medication.

DHS 83.37(1)(i)2. The administrator or qualified designee shall monitor at least monthly for the inappropriate use of PRN psychotropic medication, including but not limited to, use contrary to the individual service plan, presence of significant adverse side effects, use for discipline or staff convenience, or contrary to the intended use.

DHS 83.37(1)(i)3. Documentation in the resident's record shall include the rationale for use, description of behaviors requiring the PRN psychotropic medication, the effectiveness of the medication, the presence of any side effects, and monitoring for inappropriate use for each PRN psychotropic medication given.
DHS 83.37(2)(d) As required under s. DHS 83.42 (1) (o), at the time of medication administration, the person administering the medication or treatment shall document in the resident record the name, dosage, date and time of medication taken or treatments performed and initial the medication administration record. Any side effects observed by the employee or symptoms reported by the resident shall be documented. The need for any PRN medication and the resident's response shall be documented.

Relevant DQA Memos:

DQA Memo 07-012 Administration of Psychotropic Medication:
Statutory Requirements, Rules and Reporting

BQA Memo 04-026 Physician Orders and Medications

Other Resources:

Pain Management in Assisted Living Facilities (ALFs), American Medical Directors Association

American Geriatrics Society, Guideline on Management of Persistent Pain

Annals of Long-Term Care, Assessing Pain in Older Adults with Dementia

“Wide Awake in Assisted Living”, Assisted Living Consult

Best Practice, Tools & Forms:

Disclaimer: Inclusion of resources on this website does not constitute an endorsement by the department/DQA, and the department/DQA does not guarantee that the information is up-to-date or accurate.