

# House Staff Orientation

## Department of Pharmacy

**Paul Nowierski, Senior Director of Pharmacy**  
**Nicholas Zerilli, Clinical Pharmacist Advanced Practice, BCPS**

**Lenox Hill Hospital**  
**Department of Pharmacy**  
**June 24, 2016**



## Department of Pharmacy Table of Organization

Director of Pharmacy Services - Paul Nowierski RPh - 1 FTE

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Adm. Support Associate	Asst. Director of Pharmacy	Pharmacy Specialist - Informatics	Clinical Pharmacists Advance Practice	Manager, Purchasing	Pharmacy Practice Residents	EETH - Pharmacy Asst. Direc	LHGV - Supervising Pharmacist
Elena Budkina Non-RPh - 1 FTE	Anh-Viet Le RPh - 1 FTE	Ven Gao Huang RPh - 1 FTE		Magda Vozny Non-RPh - 1 FTE		Kira Talisman RPh - 1 FTE	Avani Patel RPh - 1 FTE
Pharmacy Supervisor Day	Pharmacy Supervisor Eve.	Infusion Center Supervisor	Gabrielle Dunsky RPh - 1 FTE	Angela Burton-Henry Tech - 1 FTE	Claudia Rondon RPh - 1 FTE	Illuzi, A RPh - 1 FTE	Anna Mateo-Jerez RPh - PD
Melanie Brunner RPh - 1 FTE	Robert Raymond RPh - 1 FTE	Allan Krasnoff RPh - 1 FTE	Lori Nisangan RPh - 1 FTE	Sewdgal Girdhari Tech - 1 FTE	Ilga Krichavets RPh - 1 FTE	Williams, C RPh - 1 FTE	Patrick Kerr RPh - 0.5 FTE
Shift - Day/Variable	Shift - Eve/Night/Variable	Shift - Day/Overnight	Julia Slavin RPh - 1 FTE	Galina Grechanikova Tech - 1 FTE	Annette Piotrowski RPh - 1 FTE		Genevieve Laurent RPh - 0.5 FTE
Raisa Telis RPh - 1 FTE			Benjamin Wee RPh - 1 FTE	Abena Henewaa Tech - 1 FTE			Courtney Tam RPh - PD
Nicholas Zerilli RPh - 1 FTE				Yesna Hot Tech - 1 FTE			
Louis Dellafera RPh - 1 FTE	Geremy Carpenter RPh - 1 FTE	Kiran Bharwani RPh - 1 FTE		Alezandre Kachine Tech - 1 FTE			
Harold Eisenberg RPh - 1 FTE	William Delawski RPh - 1 FTE	Nicolette Doria RPh - 1 FTE		Mabel Kotoroka-Yiadom Tech - 1 FTE			
Diana Farino RPh - 1 FTE	Errol Grinion RPh - PD	Theodore Kudaga RPh - 1 FTE		Margie Padilla Tech - 1 FTE			
Michele Giordani RPh - 1 FTE	Margam Kogenova RPh - 1 FTE	Mohammad Riaz RPh - 1 FTE		Dhanmatee Pirman Tech - 1 FTE			
Julia Giuga RPh - 1 FTE	Olga Mironova RPh - 1 FTE	Stephen Sekgiamah RPh - 1 FTE		Robert Reyes Tech - 1 FTE			
Irina Hopkins RPh - 1 FTE	Armia Morcos RPh - PD	Anthonj Varagnolo RPh - 1 FTE		Svetlana Venglovskaya - 1 FTE			
Anna Kostyuchenko RPh - 1 FTE	Kenneth Schwarz RPh - 1 FTE	Jacques Yilus RPh - 1 FTE					
Sabah Lodi - RPh - 1 FTE		Shift - Variable					
Olga Simanova RPh - 1 FTE	Lunelle Francois Tech - 1 FTE	Gi-Song Chung RPh - PD					
Azmy Souweha RPh - 1 FTE		Latoga Davis RPh - PD					
	Tamara Antonio Intern - 1 FTE	Yelena Ginzburg RPh - PD					
Olavale Majekodunmi Tech - PD		Yiviana Holze RPh - PD					
Emmanuel Mbreyu Tech - 1 FTE		Rose Emris Lecorps Isaac RPh - PD					
Tandalam Palanivelu Tech - 1 FTE		Peter Nguyen RPh - PD					
Celina Phipps Tech - 1 FTE		Patricia Ngarko RPh - PD					
		Inyoung Oh RPh - PD					
Tigist Abetu Msg - 1 FTE		William Ruspantini RPh - PD					
Bibi Alli Msg - 0.4 FTE		Stanley Samuel RPh - PD					
Jonelle Rougier Msg - 0.4 FTE		Joyce Wu RPh - PD					
Makleen Shafiq Msg - 0.4 FTE		Hanna Yudchytz RPh - PD					
Vladimir Voloy Msg - 1 FTE							
Michelle Kaplun Intern - PD							
Kevin Von Intern - PD							
Tiffany Wong Intern - PD							



Department of Pharmacy

12/15/2015

# Pharmacy Phone Numbers

- Inpatient Pharmacy Department (IPD)

- 4-3226, 4-5731, 4-5730

- IV Room: 4-5507

- TPN: 4-5383

- Chemotherapy: 4-3181

- Allan Krasnoff, PharmD

- IT: 4-3261

- Wen Gao Huang, PharmD

- Clinical Pharmacists Advanced Practice

- Julia Slavin, PharmD: 6<sup>th</sup> Tier

- 4-2530
- Mobile: (347) 573-1473

- Raisa Telis, PharmD: 5<sup>th</sup> Tier

- 4-3185
- Mobile: (347) 638-4915

- Nicholas Zerilli, PharmD: 9<sup>th</sup> Tier

- 4-2192
- Mobile: (347) 638-3453

- Lori Nisanyan, PharmD: Emergency Medicine

- 4-3183
- Mobile: (646) 254-2639

- Gabrielle Dunsky, PharmD: 7<sup>th</sup> Tier

- 4-3708
- Mobile : (646-648-2006 )

- Benjamin Wee, PharmD: 8<sup>th</sup> Tier

- 4-3193
- Mobile: (347) 638-3323

- Ilya Krichavets, PharmD: Antimicrobial Stewardship

- 4-3706
- Mobile: (347) 714-2910

# Pharmacy Residency Program

- Goal: develop a pharmacist into a more highly trained, competent, and confident health system practitioner
- Three pharmacy residents: one year program consisting of core rotations
- Rotations include internal medicine, cardiology, medical, surgical, & neonatal intensive care, emergency medicine, infectious disease, informatics, hematology/oncology, & administration
- Precepted by Clinical Pharmacists-Advanced Practice
- Work with members of an inter-disciplinary team to achieve optimal patient outcomes

# College of Pharmacy Affiliation

*Arnold & Marie Schwartz College of Pharmacy – LIU;  
University of Saint Joseph School of Pharmacy;  
Creighton University School of Pharmacy;  
University of Pittsburgh School of Pharmacy*

- Pharmacists precept pharmacy students for various types of experiences
- Medical residents are asked to take pharmacy students on their medicine teams
- No more than 1 pharmacy student will be assigned to each medicine team; 4-6 week rotations

# College of Pharmacy Affiliation

- Your responsibilities:
  - Let the students know when and where rounds are or how you can be reached to join the team
  - Provide the students with the names of the patients that the team is following
- Pharmacy students:
  - Make recommendations to optimize a patient's drug therapy
  - Serve as a resource for drug information questions
  - Can perform discharge counseling if needed

# LHH Formulary

- **Formulary**: list of approved medications that are regularly stocked and available for use at the hospital
- The formulary is reviewed and updated by the Pharmacy & Therapeutics Committee (P&T) on a continual basis
- Only drugs approved by P&T shall be used in the treatment of patients with the following exceptions:
  - The appropriate non-formulary process has been completed (policy discussed later)
  - The patient provides their own medication (policy discussed later)
  - The drugs have been approved for clinical investigations at LHH

# Non-Formulary Drug Policy

- Non-formulary: medications that are not on the LHH formulary and are not routinely stocked by the pharmacy
- Most non-formulary items CANNOT be entered into the CPOE (Computerized Prescriber Order Entry) system by prescribers and pharmacy must be contacted to order these items
- Prior to requesting a non-formulary agent, consider other formulary alternatives in the same therapeutic class



# Requesting a Non-Formulary Agent

- To place an order for a non-formulary item:
  - Call pharmacy (4-3226)
  - Notify the pharmacist which drug you are requesting and the reason for using the non-formulary agent
  - The pharmacist and pharmacy supervisor or clinical pharmacist advanced practice will review the request
  - If approved, receipt of non-formulary items can take up to 72 hours
  - If a delay is anticipated beyond 72 hours, the physician and nurse will be notified

# Antimicrobial Stewardship

- Purpose

- To prevent the development of resistant organisms, control drug cost, and to prevent the indiscriminate use of antimicrobial agents when alternate treatments are formulary based

- Formulary Unrestricted

- Agents generally available to all members of the medical staff to order for the prophylaxis and treatment of infectious diseases

- Formulary with Guidelines

- Require approval by a Clinical Pharmacist Advanced Practice or an Infectious Disease (ID) Physician if used outside of the approved guidelines for use

# Antimicrobial Stewardship

- Formulary Restricted to Infectious Diseases Physicians
  - Antimicrobial agents that can only be ordered directly by an ID physician; alert in CPOE that will notify of this restriction
  - Stocked by the pharmacy
- Non-Formulary Antimicrobials
  - Designated as any other antimicrobial agent available in the United States but not on formulary
  - These agents will NOT be stocked by the pharmacy and would require special ordering that may delay treatment
  - Please contact the Infectious Disease Attending on-call

# Anticoagulation

- Anticoagulants are considered “High-Alert Medications” due to the risk of patient harm when used inappropriately
- LHH has developed policies and procedures for the safe use of these medications

– On every desktop:

Intranet → Policies → LHH → Medication Management

- Unfractionated heparin, enoxaparin, direct thrombin inhibitors (IV and po), and warfarin
- Clearly specifying indication for use, therapeutic goals, and appropriate documentation is essential for providing safe and effective therapy

# Patient's Own Medications

- When a patient arrives at LHH with their own medication, the nurse will reconcile the medications presented.
- The physician will determine the medications that the patient will continue while hospitalized
- If a medication is available at LHH, the patient is **not** permitted to use his/her own medication, including nutritional supplements and herbal products
- The patient's own medications should be returned to the family or guardian whenever possible

# Patient Own Medications

- In the situation where the medication(s) is/are not available from the Pharmacy, the patient may take his/her own medication(s)
  - Appropriate instances include:
    - Oral contraceptives
    - Investigational drugs and/or
    - Non-formulary medications not routinely stocked by LHH Pharmacy
  - The patient's own medication must be sent to the pharmacy department to be identified, labeled, and returned to the nursing unit
  - Pharmacy will only verify medications in either the original labeled container or prescription bottle. Unlabeled medications (i.e. loose medications in pill boxes) will not be accepted
  - Remaining medication must be returned to the patient upon discharge
- In the event the patient's medication is a controlled substance, the medication will be assigned a drawer in the Omnicell by Pharmacy

# Automatic Stop Order Policy

- Orders placed for medications will be reviewed and renewed if needed based on the following automatic stop order dates defined on a Northwell system level:
  - Majority of medications will have an automatic stop after 333 days
    - Includes antimicrobials, IV fluids, IV drips
  - Remember to define duration of use when ordering antimicrobials or if expected duration of treatment is known
  - Exceptions:
    - Parenteral Nutrition- 24 hours
    - Controlled Substances- 7 days

# Automatic Stop Order

- Controlled substances – up to 7 days
  - At no time can dosage ranges or multiple routes of administration be written (i.e. Percocet-5, 1 - 2 tablets po q4h prn pain OR fentanyl 25 mcg IM x 1 [give IV] )
  - If an order is written for prn use, the reason for administration must be specified
  - Multiple orders for same prn indication not acceptable; (i.e morphine and ketorolac both ordered for moderate pain)
- The physician is responsible for reviewing medications and determining if the medication(s) is to be renewed, changed, or discontinued. If the physician does not reorder drugs designated for automatic stop, they will be dropped out of the system at the specified time



# IV to PO Automatic Conversion

- The following agents will be automatically converted from IV to PO form by a Clinical Pharmacist-Advanced Practice if criteria set forth by the P&T are met.
  - Famotidine
  - Pantoprazole
  - Ciprofloxacin
  - Levofloxacin
  - Fluconazole
  - Voriconazole
  - Metronidazole
  - Linezolid

# Questions?