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

<table>
<thead>
<tr>
<th>Position</th>
<th>Name</th>
<th>FTE</th>
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<tr>
<td>Admin Support Associate</td>
<td>Elena Rudina</td>
<td>Non-RPh - 1 FTE</td>
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<td>Asst. Director of Pharmacy</td>
<td>Ash-Viet Le</td>
<td>RPh - 1 FTE</td>
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<td>Pharmacy Specialist - Information</td>
<td>Ven Quoc Huang</td>
<td>RPh - 1 FTE</td>
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<td>Clinical Pharmacists Advance Practice</td>
<td>Magda Wong</td>
<td>Non-RPh - 1 FTE</td>
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<td>Pharmacy Practice Residents</td>
<td>Kira Taillam</td>
<td>RPh - 1 FTE</td>
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<td>Pharmacy Practice Residents</td>
<td>Anna Patil</td>
<td>RPh - 1 FTE</td>
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<td>Pharmacy Supervisor Day</td>
<td>Melanie Drummer</td>
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<td>Pharmacy Supervisor Eve</td>
<td>Robert Raymond</td>
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<td>Infusion Center Supervisor</td>
<td>Allan Kramotni</td>
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<td>Galvita Dussky</td>
<td>Galiela Riz RPh - 1 FTE</td>
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<td>Lori Nisangan</td>
<td>Dina Stavis RPh - 1 FTE</td>
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<td>Raica Telis</td>
<td>Nicholas Zenilli RPh - 1 FTE</td>
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<td>Benjamin Vee</td>
<td>Angela Burton-Henry Tech - 1 FTE</td>
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<td>Angela Riz</td>
<td>Gregal Girdhar Tech - 1 FTE</td>
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<td>Claudia Rondam</td>
<td>Alena Hennwa Tech - 1 FTE</td>
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<td>Clauda Rondam</td>
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<td>Claudia Rendom</td>
<td>Alejandro Kachin Tech - 1 FTE</td>
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<td>Olavale Najekoomini Tech - PD</td>
<td>Mabel Kotokoiva Visdom Tech - 1 FTE</td>
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<td>Emmanuel Miretu Tech - 1 FTE</td>
<td>Margie Padilla Tech - 1 FTE</td>
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<td>Tandaram Palamivelu Tech - 1 FTE</td>
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<td>Celina Phipps Tech - 1 FTE</td>
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<td>Sabah Mok - RPh - 1 FTE</td>
<td>Louis Dellalera</td>
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<td>Harold Elsenberg RPh - 1 FTE</td>
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<td>Michele Giordani RPh - 1 FTE</td>
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<td>Anna Hopkins RPh - 1 FTE</td>
<td>Olga Mironova RPh - 1 FTE</td>
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<td>Anna Kostkovalek RPh - 1 FTE</td>
<td>Annia Murecno RPh - PD</td>
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<td>Lelina Francisco Tech - 1 FTE</td>
<td>Konmee Schwarz RPh - PD</td>
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<td>Tamara Antonio Intern - 1 FTE</td>
<td>Gi-Song Cheng RPh - PD</td>
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<td>Tigrisk Abeto Mesg - 1 FTE</td>
<td>Loteia Davis RPh - PD</td>
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<td>Bibi Ali Mesg - 0.4 FTE</td>
<td>Yolica Gintberg RPh - PD</td>
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<td>Jonelle Founse Mesg - 0.4 FTE</td>
<td>Yiriana Holz RPh - PD</td>
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<td>Maleene Shala Mesg - 0.4 FTE</td>
<td>Rose Emisi LeCorgny RPh - PD</td>
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<td>Vladimir Yoleq Mesg - 1 FTE</td>
<td>Peter Nguyen RPh - PD</td>
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<td>Michelle Kaplan Intern - PD</td>
<td>Patricia Ngapo RPh - PD</td>
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<td>Kevin Von Intern - PD</td>
<td>Inigo Oo RPh - PD</td>
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<td>Tiffany Vong Intern - PD</td>
<td>William Ruspinetti RPh - PD</td>
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<td>Michelle Kaplan Intern - PD</td>
<td>Stanley Samuel RPh - PD</td>
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<td>Shelly Vong Intern - PD</td>
<td>Joyce Wu RPh - PD</td>
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<td>Hanno Yodehgs RPh - PD</td>
<td>Wenbo Wu RPh - PD</td>
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**Department of Pharmacy**

North Shore LIJ Lenox Hill Hospital

12/5/2015
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: 6th Tier**
  - 4-2530
  - Mobile: (347) 573-1473
- **Raisa Telis, PharmD: 5th Tier**
  - 4-3185
  - Mobile: (347) 638-4915
- **Nicholas Zerilli, PharmD: 9th Tier**
  - 4-2192
  - Mobile: (347) 638-3453
- **Lori Nisanyan, PharmD: Emergency Medicine**
  - 4-3183
  - Mobile: (646) 254-2639
- **Gabrielle Dunsky, PharmD: 7th Tier**
  - 4-3708
  - Mobile: (646-648-2006)
- **Benjamin Wee, PharmD: 8th 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?