Adult Primary Care Prescription Refill Guidelines for Ambulatory Services

- The goal is to complete/reply to refill requests within 48 hours or receipt, regardless of the form of the request, i.e. fax, phone or pharmacy.
- If there is a discrepancy between the patient's desires and the refill policy,
  - The Access Center or clinic nurse is to create an encounter and forward to the PCP or the PCP's nursing pool.
  - Clinic nursing staff will work with the PCP or physician on duty to resolve the discrepancy and refill the medication accordingly.
- Physicians are to address all Patient Call messages as a priority of Epic In-basket management each day.
- If PCP is not available, urgent refill requests should be directed to the faculty on duty.

REFILLS TO BE PROVIDED BY THE ACCESS CENTER OR NURSING STAFF

- Antihypertensive medications
- Diabetes medications
- Cardiac medications
- Hormonal medications
- Thyroid medications
- Headache medications
- Antidepressant (non-controlled substances) medications
- Gastritis or GERD medications
- Seizure medications

Request #	Supply may Rx	Refills	Comments
1st request	30 days	0	make appointment w/in 30 days
2nd request	15 days	0	make appointment w/in 15 days
3rd request	7 days	0	make appointment w/in 7 days

Medications can be refilled via phone or fax to the patient's pharmacy of choice, using the PCP as the authorizing provider. Please verify the PCP by chart review.
* Clinic nursing staff will work with the PCP to see when additional refills are appropriate*

REFILLS TO BE PROVIDED BY PCP OR PHYSICIAN ON DUTY

- Controlled substances (anxiolytic, muscle relaxant, narcotic or sleeping aid) Includes triplicate prescriptions
- Antibiotic medications
- Anti-fungal medications
- Anti-viral medications
- Anti-emetic medications

ADDITIONAL PRESCRIPTION POLICY PROCEDURES:

- Mail off prescription request is to be authorized by the PCP or partner, therefore send requests through the Epic encounter refill request.
- Clinic nurse assigned to refill prescriptions is to check Epic prescription pool messages very 2 hours at minimum.
- Clinic nurse will notify the patient when the controlled medication refills have been authorized.

- Hormone Replacement Therapy (HRT) & Over the Counter Prescriptions (OCP) may be filled for up to 13 months after last Well Women Exam.

REFILL PRESCRIPTION NURSE IS TO DOCUMENT IN EPIC ENCOUNTER:

- The next scheduled appointment date and time.
- The date of the last office visit and date of last prescription written for requested medication.
- The date of the last well women exam for HRT or OCP requests.
- The date and level of last TSH for thyroid medication requests.
- The date and level of last digoxin level for digoxin refill request.
- The date and level of last phenytoin level for phenytoin refill request.
- The date and level of last carbamazepine level for carbamazepine refill request.
- The date and level of last valporic acid level for valporic acid refill request.

Pediatric Primary Care Prescription Refill Guidelines for Ambulatory Services

1. **Urgent Medications**:
   - Antiepileptic
   - Antihypertensive
   - Asthma medications (no oral steroids, provider must be called for those)
   - Diabetes

Request #	Supply may Rx	Refills	Comments
1st request	30 days		make appointment
2nd request	15 days		make appointment
3rd request	7 days		make appointment
4th request	none		make appointment

2. **Non-Urgent Medications**:
   - Acne medications
   - Allergy medications
   - Contraceptives
   - Headache/Migraine medications (no narcotics)
   - GERD medications
   - Thyroid medications
   - Atopic dermatitis medications (topical steroids, etc)

Request #	Supply may Rx	Refills	Comments
1st request	30 days		make appointment
2nd request	none		make appointment

3. **Non-Urgent Medications, provider Approval Only**:
   - Antibiotics
   - Anti-emetic medications
   - Anti-fungal medications
   - Behavioral medications including antidepressants, etc
   - Cold/cough products
   - Pain medications
   - Oral Steroid medication

*****Provider must be called for refills.

Cardiology Prescription Refill Guidelines for Ambulatory Services

- All requests for cardiac medication refills are to be documented in the EPIC encounter.
- The nurse will refill the patient medications as indicated in the EPIC encounter within 48 hours of receipt.
- Controlled substances will not be filled and the patient will be referred to their Primary Care Provider (PCP).
- Before refilling the request on EPIC encounter, the nurse must confirm:
    - The patient is a Cardiology patient and on EPIC.
    - The patient was seen within 6 months of the phone call. If the patient has an appointment with one of the Cardiology faculty within 2 weeks, the nurse can give enough medication to last until the appointment.
    - Occasionally, patients are instructed to return to clinic in a year. In this case, the nurse may refill the medications as long as the patient was seen within 12 months of the phone call.
    - The patient does not verbalize any new concerns, signs or symptoms.
    - The patient has not had any major medical illnesses since the time of the last visit.
    - The requested medication is on his/her EPIC medication list.

- When the above is achieved, the nurse can refill the request.
- All other refill requests shall be forwarded to the physicians for authorization.

UTMB Family Medicine Clinic

IHOP policy C51- Prescription refill management guidelines for ambulatory services.
Policy for clinical nursing staff and access center

Refill request(s) will be addressed within 48 hours.

- Discrepancies concerning refill(s) can be addressed with the prescribing physician or faculty on duty (GT).
- Urgent requests can be directed to the faculty on duty.
- Time Sensitive calls and messages not addressed by physician in EPIC within 48 hours will be redirected to GT on duty.

Requirements for refilling prescriptions

- Medication was originally prescribed by this office in the last 12 months.
- Patient's visit over 12 months may have 30 day supply without refills.
- Appropriate labs were done within the last year. If labs greater than 1 year, 30 day supply without refills.
- Diagnosis for this medication was addressed during prior visits.

Medication	Labs/info needed	Refill approved
Hypertension (Lisinopril, propranolol, HCTZ)	BMP (Normal K+)	90 days + 1 refill
Cholesterol (statins)	LFT	90 days + 1 refill
Cardiac (digoxin, isordil)	Digoxin level, BMP	90 days + 1 refill
Diabetic (metformin, insulin, glipizide, Actos)	BMP (Normal Cr), A1C	90 days + 1 refill
Thyroid (armour, synthroid)	TSH	90 days + 1 refill
BPH (Flomax, proscar)	PSA	90 days + 1 refill
Bisphosphonate (Fosamax, Actonel)	BMP	90 days + 1 refill
OCP/HRT	WWE, mammogram	90 days + 1 refill
GERD, Ulcers (Pantoprazole, nexium, Pepcid, ranitidine)	No worsening of symptoms	90 days + 1 refill
Asthma/COPD/inhalers (advair, ventolin, atrovent)	No worsening of symptoms, no >than 1 inhaler per month	90 days + 1 refill
Depression (Zoloft, paxil, wellbutrin)	No change in dose in last 3 months	90 days + 1 refill
NSAIDs (naproxen, ibuprofen)	BMP (WNL Cr)	30 days + 0 refills
Seizure (Dilantin, valproate, keppra)	Levels WNL in last 3 months	30 days + 0 refills
Migraine (imitrex, maxalt, zomig)	None	30 days + 0 refills
Antibiotics **Antifungals** **Anxiolytics** **Muscle relaxants** **Narcotics / opioids** **Sleeping aids** **Anti-Coagulation**	Send message to prescribing physician or PCP	Await instructions from Physician