

Clozaril Medication Order Review and Monitoring Process Improvement

Problem

All patients on Clozaril (clozapine) must be registered with the Clozaril National Registry (CNR) and monitored on an ongoing basis to prevent drug-induced neutropenia. Physicians prescribing Clozaril also must be registered with the CNR. The Department of Pharmacy staff was responsible for verifying that the prescriber and the patient are registered and for submitting white blood cell (WBC) and absolute neutrophil count (ANC) documentation. Clinicians specializing in Psychiatry diligently followed these CNR guidelines. Patients admitted on Clozaril, but not admitted to Psychiatry service were less likely to become registered, obtain a challenge number, and to follow patient parameters for myelosuppression during the admission. It was not unusual for the first dose of Clozaril to be dispensed without obtaining a challenge number from the CNR to prevent interruption of therapy.

Aim/Goal

Improve the process for Clozaril medication order review and documentation.

Team

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Interventions

- The Clozaril medication order review, documentation, and monitoring process is clearly described in a Pharmacy Clozaril Policy and Procedure #03-03-06.
- A Medical Director was identified to oversee the registration and monitoring process.
- The Pharmacy staff was educated on the new process for Clozaril order review, documentation, and monitoring through formal in-service presentations. A competency exam was also administered to the pharmacists processing Clozaril orders.

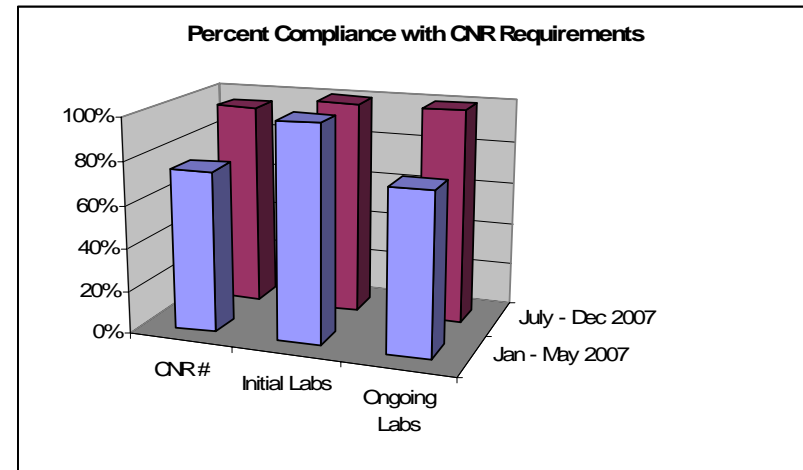
Results

The pharmacists systematically reviewed Clozaril orders for documented indication, duration of therapy, allergy history, and drug interactions along with the Clozaril dose and frequency prior to contacting the CNR for a challenge number.

The patient's CNR Challenge Number, WBC, and ANC were documented in the BIMC Pharmacy Intervention System and prospectively monitored.

If the WBC or ANC was abnormal based on the Clozaril National Registry (CNR) standards, both the registered Medical Director and prescriber were contacted. (The WBC must be greater than or equal to 3.5K/uL and ANC greater than or equal to 2.0 K/uL to initiate Clozaril therapy.)

This prospective monitoring prompted pharmacy interventions with medical staff when the patient's ANC significantly decreases. This has resulted in thoughtful communication between Psychiatry and the patient's primary care team about patient's therapeutic management.

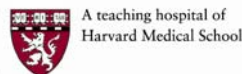


Next Step

Continue ongoing QA of Clozaril medication order review and monitoring through an enhancement in the Pharmacy QA documentation system.



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