MM.04.01.01

Medication orders are clear and accurate.

Elements of Performance (EPs) for MM.04.01.01

1. The organization follows a written policy that identifies the specific types of medication orders that it deems acceptable for use.
   Note: There are several different types of medication orders. Medication orders commonly used include the following:
   - As needed (PRN) orders: Orders acted on based on the occurrence of a specific indication or symptom
   - Standing orders: A prewritten medication order and specific instructions from the licensed independent practitioner to administer a medication to a person in clearly defined circumstances
   - Automatic stop orders: Orders that include a date or time to discontinue a medication
   - Titrating orders: Orders in which the dose is either progressively increased or decreased in response to the patient’s status
   - Taper orders: Orders in which the dose is decreased by a particular amount with each dosing interval
   - Range orders: Orders in which the dose or dosing interval varies over a prescribed range, depending on the situation or patient’s status
   - Signed and held orders: New prewritten (held) medication orders and specific instructions from a licensed independent practitioner to administer medication(s) to a patient in clearly defined circumstances that become active upon the release of the orders on a specific date(s) and time(s)
   - Orders for compounded drugs or drug mixtures not commercially available
   - Orders for medication-related devices (for example, nebulizers, catheters)
   - Orders for investigational medications
   - Orders for herbal products
   - Orders for medications at the end of an episode of care, or at discharge or transfer

2. The organization follows a written policy that defines the following:
   - The required elements of a complete medication order
   - When indication for use is required on a medication order
   - The precautions for ordering medications with look-alike or sound-alike names
   - Actions to take when medication orders are incomplete, illegible, or unclear

2. The organization follows a written policy that defines the following:
   - The minimum required elements of a complete medication order which must include medication name, medication dose, medication route, and medication frequency
   - For medication titration orders, required elements include the medication name, medication route, initial rate of infusion (dose/minute), incremental units to which the rate or dose can be increased or decreased, how often the rate or dose can be changed, the maximum rate or dose of infusion, and the objective clinical measure to be used to guide changes
   - When indication for use is required on a medication order
- The precautions for ordering medications with look-alike or sound-alike names
- Actions to take when medication orders are incomplete, illegible, or unclear

**Note:** Examples of objective clinical measures to be used to guide changes include blood pressure, Richmond Agitation–Sedation Scale (RASS), and the Confusion Assessment Method (CAM).

7. If the organization uses preprinted medication order sheets, it updates them based on current evidence and practice.

8. The organization prohibits summary (blanket) orders to resume previous medications.

12. For ambulatory surgical centers that elect to use The Joint Commission deemed status option: Orders given verbally for medications and biologicals are followed by a written order signed by the prescribing physician.

14. The organization requires an order from a doctor of medicine or osteopathy or, as permitted by law and regulation, organization-specific protocol(s) approved by a doctor of medicine or osteopathy to administer influenza and pneumococcal polysaccharide vaccines.

21. For organizations that elect The Joint Commission Primary Care Medical Home option: The primary care medical home has an electronic prescribing process.