



Emergency Orders & Verbal Orders (For Medication) Procedure

Procedure Number

WCDHB-PN-0012

Version Nos:

7

1. Purpose

This Procedure is performed as a means of ensuring the safe administration of therapeutic medication to patients in accordance with all legislative and regulatory requirements.

2. Application

This Procedure is to be followed by all nursing staff throughout the West Coast District Health Board (WCDHB).

3. Definitions

For the purposes of this Procedure:

Prescribing medications is the responsibility of the Doctor;

Dispensing medications is the role of the Pharmacist;

Administration of medications is undertaken by nurses.

4. Staff Authorised To Perform Procedure

This Procedure shall be performed by a:

- i) Registered nurse(RN)/midwife

5. Resources Required

This Procedure requires:

- i) prescribed medication;
- ii) drug treatment sheet.

6. Process

1.00 Emergency Orders For Medication

1.01 Orders for emergency medication must be repeated back to the prescribing doctor before the medication is administered.

1.02 Medication used in an emergency must be checked and signed for immediately following the emergency.

1.03 Administration of oxygen therapy without prescription is appropriate while waiting for medical assistance.

2.00 Verbal Orders For Medication

2.01 Verbal orders should only be used in exceptional circumstances. The diagnosis and health status as evaluated and documented by a doctor must be available if the prescribing doctor is not the one who made the initial assessment.



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- 2.02 Only one stat dose may be prescribed verbally, including Controlled Drugs.
- 2.03 Verbal orders shall initially be taken by a Registered Nurse, and repeated to a second Nurse.
- 2.04 The Registered Nurse receiving the order must record the order on the drug treatment sheet (in the verbal order section). The entry is to be in red ink and should also include the time, date, name of prescriber and the Nurse's signature, as well as the second Nurse's signature.
- 2.05 The Registered Nurse should repeat the order to the doctor to ensure that the details are correct.
- 2.06 The drug treatment sheet is to be countersigned by the doctor who gave the verbal order at the earliest possible time, within 24 hours for Grey Hospital, and as soon as is practicable for other areas.
- 2.07 If they are in any doubt, the Registered Nurse should seek clarification from the doctor until they are satisfied that they correct:
- drug;
 - dose;
 - time;
 - route;
 - patient;
- are to be given.
- 2.08 The medication is to now be administered as per the WCDHB Administration of Medication Procedure and the WCDHB Medication Policy.
- 2.09 A verbal order should be refused if the Registered Nurse believes that it may compromise the patient's care and treatment.

7. Precautions And Considerations

- ➔ Medication used in an emergency must be checked and signed for immediately following the emergency.
- ➔ Verbal orders should only be used in exceptional circumstances
- ➔ Verbal orders shall only be taken by a Registered Nurse.
- ➔ The Registered Nurse should repeat the order to the doctor to ensure that the details are correct.



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8. References

Code of Health and Disability Services Consumers' Rights (1995)
Health Practitioners Competence Assurance ACT 2003
New Zealand Nursing Council Code of Conduct for Nurses and Midwives (1995)
Health Act (1956)
Hospitals Act (1957)
Hospitals Regulations (1993)
Medicines Act (1981)
Medicines Regulations (1984)

9. Related Documents

WCDHB Administration of Medication Procedure
WCDHB Administration of Medications by Students Procedure
WCDHB Controlled Drugs Procedure
WCDHB Medication Errors Procedure
WCDHB Medication For On-Leave Patients Procedure
WCDHB Medication Policy
WCDHB Nurse Initiated Medication Procedure
WCDHB Nursing Standards
WCDHB Practice Development Programme
WCDHB Refusal of Medications by Patients Procedures
WCDHB Self-Medicating Patients
WCDHB Storing and Labelling Medications Procedure
WCDHB Use of Traditional and Alternative Medications Procedure

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