DOSE STANDARDIZATION POLICY (ROUNDING)

In July 1996, the Pharmacy, Therapeutics and Nutrition Committee implemented a Dose Standardization Policy on the inpatient (non-PICU) areas of the hospital. Pharmacists may round oral drugs to +/- 20% of the prescribed dose. The purpose of the policy is to increase the efficiency of the pharmacy distribution system by utilizing the commonly prepackaged unit doses stored in the Automated Dispensing Cabinets.

Children < 3 months or < 5 kg in weight are excluded. These certain medications are excluded:

- azathioprine
- busulfan
- captopril
- chemotherapy drugs
- clozapine
- cyclophosphamide
- cyclosporine
- digoxin
- fluoxetine
- furosemide
- hydroxyurea
- imatinib
- ketamine
- L-thyroxine
- lithium
- lomustine
- mercaptopurine
- methotrexate
- midazolam
- mitotane
- pancreatic enzyme supplements
- phenytoin
- prednisone/prednisolone
- procarbazine
- resperidone
- sirolimus
- sotalol
- tacrolimus
- temozolomide
- thioguanine
- valproic acid
- warfarin

- Doses will be rounded off to ± 20% of the prescribed dose.
- The rounding off policy will only apply to oral dose forms only.
- The physician can override the policy by indicating “Do not round dose”.
- The dispensing pharmacist will complete a dose standardization order and send it to the nursing unit.
- Nurses will be alerted to this change via the red “Note change of order” tag.