



**MONTANA STATE PRISON
HEALTH SERVICES OPERATIONAL PROCEDURE**

Procedure No.: MSP HS D-02.1	Subject: INMATE SELF-MEDICATION- KOP
Reference: NCCHC P-D-02, 2018; Montana Administrative Rules, Montana Board of Pharmacy; Diamond Pharmacy Services Policies and Procedure Manual	Page 1 of 3 and one attachment
Effective Date: November 1, 2010	Revised: October 1, 2020
Signature / Title: /s/ Cindy Hiner / Medical Bureau Chief	
Signature / Title: /s/ Paul Rees M.D./ Medical Director	

I. PURPOSE

To outline the process by which inmates possess and self-administer identified prescription medications ordered by licensed medical providers.

II. DEFINITIONS

Blister Pack – a sealed card of prescribed medication containing individual unit dosages.

Keep on Person (KOP) – A designation for a medication approved by a provider for an inmate to keep in his cell and self-administer as prescribed.

Long Term – a period of time more than 30 days.

Nursing Protocol Medications – non-prescription medications pre-approved by the Medical Director.

Prescribed Medication – medication ordered by the treating practitioner to be used by the inmate.

Short Term – a period of time 30 days or less.

Unit Dose – Medications that are not approved for inmates to keep in their cells.

III. PROCEDURES

A. Prescribed Medication Packaging

1. All approved medication will be pre-packaged in blister packaging or unit dose form except for inhalers, ointments and other medication not conducive to blister packaging. These medications will be provided in appropriate alternative packaging. All prescribed medication (pills) will remain in the blister pack until immediately prior to ingestion.
2. Designated health care staff will ensure all prescribed medications are labeled with the following:
 - a. Inmate’s name;
 - b. Inmate’s AO/ID number;
 - c. issuance date;
 - d. expiration date of medication;
 - e. discontinued date of order;
 - f. medication name;
 - g. unit dosage;
 - h. prescribing practitioner;
 - i. medication instructions;
 - j. prescription number; and

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k. KOP status

B. KOP blister pack distribution

1. Health care staff will distribute KOP medications using the Sapphire EMAR system.
2. KOP blister packs will be checked and verified by the pharmacy aides to ensure the inmate has a current medication order and the medication in the blister pack matches the medication order.
3. The staff member signing out the medication will sign them out utilizing the Sapphire EMAR system, noting the amount of pills.
4. Health care staff issuing the KOP medication will:
 - a. Issue the medication only to the inmate whom the medication is prescribed for, requiring the inmate to show his inmate ID card when receiving his medications; and
 - b. require the inmate to sign for the medication he receives.
5. Health care staff will inform inmates who report they did not receive their medications to submit a Health Care Request form (HCR) to the infirmary.
6. Staff will consider any loose (unpackaged) pill(s) found in the facility as contraband and will complete an incident report for any inmate who violates this procedure.
7. Any inmate found subverting (i.e. cheeking, hoarding, selling, etc.) his medication will be subject to disciplinary action. The medication subversion incident will be documented in an incident report and forwarded to the prescribing provider and to the Command Post as per facility procedure.
8. Licensed health care staff may administer Nursing Protocol Medication to inmates:
 - a. when indicated on the specific nursing protocol for inmates having or complaining of minor problems (e.g. cough, cold, sore-throat, heartburn, constipation, diarrhea, headaches, minor aches, etc.); and
 - b. for no longer than three to five days, unless indicated otherwise by a physician. Health care staff will document Nursing Protocol Medications on the nursing protocol forms and in the Sapphire EMAR system.

C. Medication Completion

1. Health care staff will request inmates to return the following to the Infirmary:
 - a. approved medication cards that are not empty, but are no longer valid;
 - b. medication cards that have reached expiration date; or
 - c. medication cards that are not desired by the inmate.
 Health care staff will return these cards/medications to the pharmacy for destruction.

D. Medication Accountability

1. Health care staff will set up medications in a medication box or will unit dose medications for inmates who are unable or unwilling to comply with an order for prescribed medication.
2. Health care staff will require inmates to keep all prescribed medication (pills) in the blister pack until immediately prior to ingestion.

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IV. CLOSING

Questions concerning this operational procedure will be directed to the MSP Clinical Services Manager.

V. ATTACHMENT

Unit Dose List

attachment A

UNIT DOSE ONLY MEDICATIONS

	ALL Narcotics					Norpramine / Desipramine			
	Amitriptyline / Elavil					Nortriptyline / Pamelor			
	Aripirazole / Abilify					Olanzapine / Zyprexa-Zyids			
	Benztropine mesylate / Cogentin					Oxybutynin / Ditropan			
	Bupropion / Wellbutrin					Perphenazine / Trilafon			
	Chlorpromazine HCL / Thorazine					Prednisone <u>*titrated doses only*</u>			
	Clozapine / Clozaril					Prochlorperazine / Compazine			
	Cyclobenzaprine / Flexeril					Promethazine / Phenergan			
	Dicyclomine / Bentyl					Pseudoephedrine / Actifed			
	Duloxetine / Cymbalta					Quetiapine / Seroquel			
	Enoxaparin injection / Lovenox					Ribavirin / Ribashere			
	Fluphenazine / Prolixin					Risperdone / Risperdal			
	Gabapentin / Neurontin					Seinequan / Doxepin			
	Haloperidol / Haldol					Sumatriptan / Imitrex			
	Hydroxyzine HCL / Atarax					Thiothixene / Navane			
	Hydroxyzine pamoate / Vistaril					Tofranil / Imipramine			
	Isoniazid / INH					Trazadone / Desyrel			
	Lamotrigine / Lamictal					Trifluoperazine / Stelazine			
	Lioresal / Baclofen					Trihexyphenidyl / Artane			
	Lithium carbonate / Lithobid					Venlafaxine / Effexor			
	Methocarbamol / Robaxin					Ziprasidone / Geodon			