



Medication Audit Checklist

Disulfiram

April 2021

Audit Information

Reviewer:
Drug:
Audit #:
Audit Date:
Dose:
Does this audit require a physician review? Y or N

Patient Information

Patient #:
Age:
Ordering Provider:
Admit Date:
Gender:
Attending Provider:

Indication	Comments	Does this indication require a physician review?
<ul style="list-style-type: none"> ● Alcohol use disorder – to maintain abstinence; suggested for use in patients with alcohol use disorder (moderate to severe) who want to abstain from alcohol and either prefer disulfiram or are unable to tolerate or are unresponsive to naltrexone and acamprosate 		

Contraindications	Comments	Does this contraindication require a physician review?
<ul style="list-style-type: none"> ● Receiving or have recently received alcohol, metronidazole, paraldehyde, or alcohol-containing preparations (e.g. cough syrups, tonics) ● Severe myocardial disease or coronary occlusion ● Psychosis ● Hypersensitivity to disulfiram or to other thiuram derivatives used in pesticides and rubber vulcanization 		

Patient Monitoring	Comments	Does this require a physician review?
<ul style="list-style-type: none"> ● Comprehensive Metabolic Panel (hepatic function, serum chemistries) – baseline and within two weeks of starting therapy, then as clinically indicated May consider monthly monitoring for first three months ● Complete Blood Count – baseline and as clinically indicated ● Eye exam – as clinically indicated 		