

Limiting the Use of PRN Psychotropic Medications

PRN psychotropic orders (excluding antipsychotics)

Includes: anxiolytics, hypnotics, antidepressants, or any other medications that affect brain activities associated with mental processes and behavior.

PRN use of these psychotropics is limited to 14 days. The psychotropic orders may be extended beyond 14 days if the prescribing practitioner:

- Believes it is appropriate to extend the order, and
- Provides a specific duration of use (this could be indicated by a stop date listed on the MAR), and
- Documents clinical rationale for the extension.

PRN antipsychotic orders are limited to 14 days only. PRN antipsychotic orders may not be extended beyond the 14 day limit.

A new PRN antipsychotic order may be written if the prescribing practitioner:

- Directly examines and assesses the resident (evaluation by facility staff is not acceptable), and
- Documents the clinical rationale for the new order, which should include how the resident benefits from the medication as a result of the PRN order.

Taking a stepwise approach

- Continue to implement gradual dosage reductions and other non-pharmacologic interventions for residents who receive psychotropic medications, unless contraindicated.
- Review all existing orders for PRN psychotropic medications for compliance with the new regulations.
 - ▶ Consider running a psychotropic drug report to identify PRN orders,
 - ▶ Orders written prior to 11/28/17 must comply, and are not grandfathered,
 - ▶ Discontinue any unnecessary PRN psychotropic medications that are more than 14 days past the drug's order date, and



- ▶ Discuss any necessary PRN psychotropic medications with the resident's attending prescriber, and then obtain new orders with specific time frames.
- Inform all prescribing practitioners (including hospice care agencies) that new orders for PRN psychotropic medications must comply with CMS requirements.
 - ▶ There are no exclusions for PRN psychotropic orders once the resident is admitted to a nursing facility.
 - ▶ Ask that prescribers provide new PRN psychotropic orders with time frames
 - a. PRN X 14 days only
 - b. PRN X __number of days (this excludes antipsychotics)
 - ▶ Utilize stop dates, and then load orders into software systems with those stop dates.
 - ▶ Ask that the prescriber provide a written clinical rationale for any order extended more than 14 days.



Summary of Federal Requirements

(Effective November 28, 2017)

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§483.45(c)(3) A psychotropic drug is any drug that affects brain activities associated with mental processes and behavior. These drugs include, but are not limited to, drugs in the following categories: (i) Anti-psychotic; (ii) Anti-depressant; (iii) Anti-anxiety; and (iv) Hypnotic;

§483.45(e) Psychotropic Drugs. Based on a comprehensive assessment of a resident, the facility must ensure that:

§483.45(e)(1) Residents who have not used psychotropic drugs are not given these drugs unless the medication is necessary to treat a specific condition as diagnosed and documented in the clinical record;

§483.45(e)(2) Residents who use psychotropic drugs receive gradual dose reductions, and behavioral interventions, unless clinically contraindicated, in an effort to discontinue these drugs;

§483.45(e)(3) Residents do not receive psychotropic drugs pursuant to a PRN order unless that medication is necessary to treat a diagnosed specific condition that is documented in the clinical record;

§483.45(e)(4) PRN orders for psychotropic drugs are limited to 14 days. Except as provided in §483.45(e)(5), if the attending physician or prescribing practitioner believes that it is appropriate for the PRN order to be extended beyond 14 days, he or she should document their rationale in the resident's medical record and indicate the duration for the PRN order; and

§483.45(e)(5) PRN orders for anti-psychotic drugs are limited to 14 days and cannot be renewed unless the attending physician or prescribing practitioner evaluates the resident for the appropriateness of that medication.

INTENT: §483.45(d) Unnecessary drugs and 483.45(c)(3) and (e) Psychotropic Drugs

The intent of this requirement is that:

- each resident's entire drug/medication regimen is managed and monitored to promote or maintain the resident's highest practicable mental, physical, and psychosocial wellbeing;
- the facility implements gradual dose reductions (GDR) and non-pharmacological interventions, unless contraindicated, prior to initiating or instead of continuing psychotropic medication; and
- PRN orders for psychotropic medications are only used when the medication is necessary and PRN use is limited.

With regard to psychotropic medications, the regulations additionally require:

- Giving psychotropic medications only when necessary to treat a specific diagnosed and documented condition; and
- Implementing GDR and other non-pharmacologic interventions for residents who receive psychotropic medications, unless contraindicated.

PRN Orders for Psychotropic and Antipsychotic Medications

In certain situations, psychotropic medications may be prescribed on a PRN basis, such as while the dose is adjusted, to address acute or intermittent symptoms, or in an emergency. However, residents must not have PRN orders for psychotropic medications unless the medication is necessary to treat a specific diagnosed condition. The attending physician or prescribing practitioner must document that condition and indication for the PRN medication in the medical record.

Additional Limitations for PRN Psychotropics and PRN Antipsychotic Medications

Type of PRN order	Time Limitation	Exception	Required Actions
PRN orders for psychotropic medications, excluding antipsychotics	14 days	Order may be extended beyond 14 days if the attending physician or prescribing practitioner believes it is appropriate to extend the order.	
PRN orders for antipsychotic medications only	14 days	None	If the attending physician or prescribing practitioner wishes to write a new order for the PRN antipsychotic medication, he/she must first evaluate the resident to determine if the new order is appropriate.