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PURPOSE

To manage requests for and utilization of medications not listed on the Formulary.

To manage requests for utilization of Formulary medications not in accordance with the Formulary drug use criteria or guidelines.

To provide a process for Formulary review, addition and deletion.

DEFINITION

A non-formulary drug is any medication which is not listed on the Long Term Care Formulary.

Non-formulary drug use is any Formulary medication which is utilized not in accordance with Formulary drug use criteria, or guidelines.

Non-Formulary drugs may be necessary when:

1. Other pharmacologically or therapeutically similar formulary medications have been tried unsuccessfully, or
2. Specific laboratory or medical investigations indicate that the drug is the clear agent of choice or,
3. There is no viable formulary alternative.

Note: A drug was *formerly* deemed as Special Authorization when the cost per day exceeds \$3.00 and/or generates excessive cost to the LTC drug budget. This designation was removed in August 2014, as the drug funding model for Calgary LTC no longer operates on *per diem* funding per client.

NON-FORMULARY DRUG USE PROCESS:

For a summary, refer to flow diagram following procedure and on reverse of the Non-Formulary Drug Use Request Form

The AHS Pharmacists may be involved at any point in the process.

1. With a physician's order for a non-formulary drug is processed, the pharmacist or nurse contacts the prescriber to discuss viable alternative formulary drug therapy. Whenever possible, a formulary drug is chosen.
2. Should the Pharmacy Provider/Clinical Pharmacist and prescriber agree that there is no viable formulary alternative and, that a reasonable case to justify the use of a non-formulary medication can be made, an application for NF approval is made to the AHS Pharmacists.

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The non-formulary application is documented on the Non-Formulary Drug Request Form and submitted to the AHS Pharmacists via email to cc.drugmanagement@albertahealthservices.ca, OR fax to (403) 943-0232. The clinical pharmacist or Pharmacy Provider must ensure completion of the form to indicate resolution.

3. In the event the Pharmacy Provider/Clinical Pharmacist and prescriber do not mutually agree that a non-formulary drug is justified, referral may made to the Facility Site Leader Medical and/or AHS Pharmacists, and/or P&T Chair and P&T Committee for resolution. If the non-formulary product is deemed justified, application will be forwarded to the AHS Pharmacists as described in Step 2.
4. The NF request will be assessed by AHS Pharmacists for approval. The following points will be considered in determining whether use of the non-formulary product will be funded (note: P&T Chair or Committee may be consulted at any point during this assessment period):
 - o Previous trials of formulary alternatives (or reasonable explanation as to why formulary alternatives are not suitable). Formulary trials should be expected to be of adequate duration to allow for proper assessment of efficacy.
 - o Current clinical guidelines to recommend use of non-formulary medication for a particular medication condition
 - o Evidence-informed support of non-formulary product for the patient's specific health condition, as well as clinical judgment and treatment experience.
 - o Laboratory or diagnostic evidence that non-formulary item is clear drug of choice
 - o No viable formulary alternative exists
 - o Financial impact
5. If NF use is approved by the AHS Pharmacists, provision of drug product may commence and drug expenditures shall be funded by AHS. The NF form shall be retained by the clinical and AHS pharmacists.
6. Annual submission, from the date of drug provision, is required for all Non-Formulary and High Cost Drug utilization unless otherwise indicated on the approval. If NF application is declined by AHS Pharmacists, the non-formulary product shall not be funded by AHS. Drug provision of the non-formulary product may still occur if pharmacy provider is able to secure funding or supply by family or client. If alternative funding or supply source is not available, the care team must consider other therapeutic alternatives.

MONITORING

Individual non-formulary drug utilization will be monitored and reviewed by the AHS Pharmacists. A summary of non-formulary drug usage will be reviewed by the Long Term Care P&T Committee at least annually, with results reported to administration.

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ADDITION to/ DELETION from FORMULARY

To facilitate the role of the medical staff and other health care providers in the selection of drugs on the formulary.

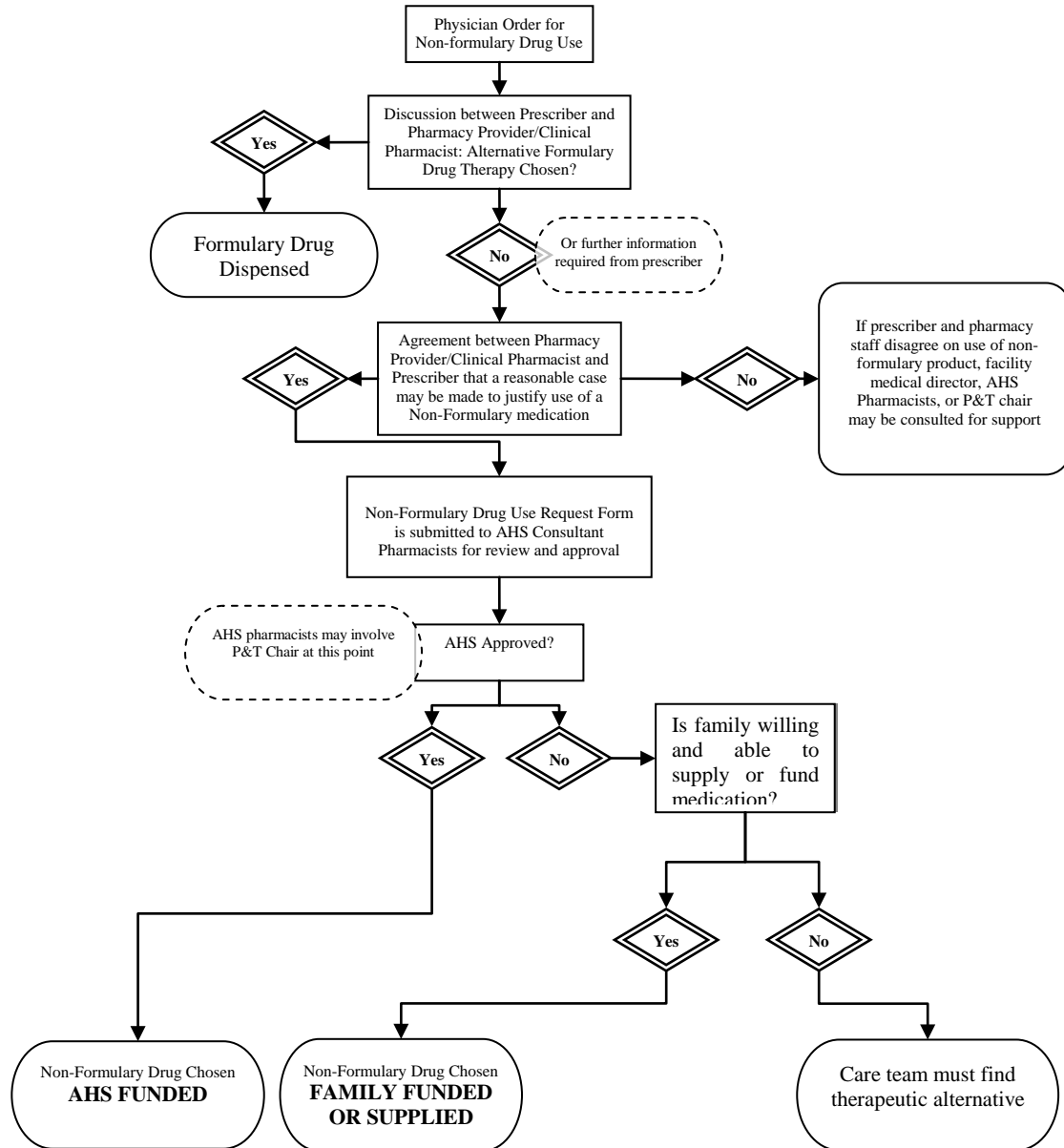
A request for formulary addition or deletion is submitted by the "Addition to Formulary" form available on the LTC formulary. The applicant will be requested to complete all elements of the application form to the best of their ability.

Upon completed submission, the Long Term Care P&T Committee will complete a formulary drug evaluation and review. The committee will notify the party requesting the change to the formulary of the outcome of the review.

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NON FORMULARY DRUG USE PROCESS



NOTE:
 AHS Pharmacists may be involved at any point in this process.
 Refer to Non-Formulary Drug use Procedure: FPP-01