



## Medication Education Module 5

# Leave of Absence





# Objectives

**1. What is a LOA?**

**2. Who prepares LOA meds?**

**3. Can staff prepare LOA meds?**

**4. How is a LOA documented?**

**5. What about unused meds?**



# Leave of Absence

- **Meds administered outside of an individual's residence**
  - Day program
  - Day-hab
  - Relative's home
  - Outing with MAP Certified staff
  - Vacation with MAP Certified staff



# LOA Meds

- **Must be prepared by a pharmacist for**
  - **Routine absences less than 72 hrs.**
  - **Extended absences (planned or unplanned) greater than 72 hrs.**



# LOA Meds

**If a LOA is**

- unplanned
- less than 72 hrs.
- the pharmacist is unable to prepare the meds

**Then**

- Certified staff may prepare the meds



# LOA Meds

- **Separate container for each type of med**
- **Package only exact number of doses needed**
  - **Transfer medication from original card/container directly into LOA container**





# LOA Meds

- **Copy required information directly on container**
- **Coin envelopes are acceptable**





# Information on Container

- **Individual's name**
- **Name and strength of medication**
- **Directions for use**
- **Prescribing HCP name**
- **Date of dispensing**
- **Any cautionary statements**
- **Amount of med in the container**



# LOA Form

- **Must be signed by**
  - **The Certified staff handing over the LOA meds and**
  - **Responsible party accepting the LOA meds**



# LOA Documentation

Name: Joseph Smith

Doctor: Paula Whiten

Pharmacy: Cornerstone

Medication

& Strength Ativan 0.5mg

Directions: Take 1 tab by mouth twice daily

Original Entry

Transfer from pg 10

Prescription Number: D388857

Prescription Date 08/05/yr

Prescription Number:

Prescription Date:

Date	Time	Amount on Hand	Amount Used	Amount Left	Signature
08/30/yr	8:00 PM	9	Transfer	9	Karen Mason/Lisa Long
09/01/yr	8:00 AM	9	one	8	Karen Mason
09/01/yr	8:00 PM	8	one	7	Lisa Long
09/02/yr	8:00 AM	7	one	6	Karen Mason
09/02/yr	10:00am	6	two/LOA	4	Karen Mason
09/03/yr	8:00 PM	4	one	3	Pamela Smith



# LOA Documentation

Name: Joseph Smith    Month/Year: Sept. yr    Allergies: NKDA

Dates	Medication	Hour	1	2	3	4	5	6
<b>Start:</b> 6/22/yr  <b>Stop:</b> Cont.	<b>Generic:</b> Lorazepam <b>Brand:</b> Ativan  <b>Strength:</b> 0.5mg <b>Amount:</b> one tab <b>Dose:</b> 0.5mg <b>Frequency:</b> twice daily <b>Route:</b> by mouth	8am	<i>RM</i>	<i>RM</i>	LOA	<i>II</i>		
		8pm	<i>LL</i>	LOA	<i>PS</i>			

SPECIAL INSTRUCTIONS/REASON: agitation



# Unused LOA Medications

- **Unused oral LOA meds cannot be returned to the program for use**
  - **Follow DPH disposal guidelines**
- **Topicals, eye drops, ear drops, inhalers may go back and forth**



# Staffed LOA Vacations

- **Meds are prepared by the pharmacy**
- **Copies of**
  - **HCP Orders**
  - **Medication Sheets**
  - **Medication Information Sheets**
- **All policies regarding drug security are observed**
- **List of MAP Consultants**



# Questions

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