



**Behavioral Health
Department**
Alameda County Health

Signed by:

By: 
Karyn L. Tribble, PsyD, LCSW, Director

POLICY TITLE

Standardized Procedure: Refill of Medications in Adult, Child, and Adolescent Community Support Centers by RN

Policy No: 502-1-1

Date of Original Approval: 8/24/2026

Date(s) of Revision: N/A

PURPOSE

This standardized procedure outlines the nursing functions around medication refill requests by ACBH prescribers. This standardized procedure is developed collaboratively by nursing, pharmacy and Chief Medical Officer or Associate Medical Officer.

DEFINITION and AUTHORIZATION

- I. Standardized procedures are the legal mechanism for registered nurses, nurse practitioners to perform functions which would otherwise be considered the practice of medicine (Board of Registered Nursing 1998)
- II. Standardized Procedures are authorized in the Business and Professions Code, [Nursing Practice Act \(NPA\) Section 2725](#) and further clarified in [California Code of Regulations \(CCR\) 1480](#).
- III. Standardized procedures are developed collaboratively by registered nurses, physicians, and administrators and must conform to the eleven steps of the standardized procedure guidelines as specified in [CCR, Title 16, Section 1474](#), and Medical Board of California, [CCR, title 16, 1379](#).

SCOPE

This procedure covers the authorization of additional refills of medications by the registered nurse (RN), as detailed in the attached medication list. Authorized registered nurses (RNII, RNIII, RNIV) are authorized to refill medications within the ACBHD Community Support Centers on behalf of the prescriber for their clients as detailed in this procedure, when there is a clear and active medication order from an ACBHD prescriber, who has the legal authority to prescribe medications, with an established relationship with the client.

POLICY

This standardized procedure for the refill of medications in community support centers

by nurses outlines the processes for an authorized RN to approve additional medication refills for clients seen at ACBHD Community Support Centers. All authorized refills are closely monitored by the prescriber and nurse to ensure safe continuation of appropriately prescribed medications.

This standardized procedure also includes guidelines stating specific conditions requiring the RN to seek clinician consultation. Overlapping functions are to be performed in areas where a consulting prescriber is available to the RN, by phone or in person.

This standardized procedure is approved by the Interdisciplinary Practice Committee (IDPC).

PROCEDURE

I. Practice Sites

- A. The RN may refill approved medications in all ACBHD Community Support Centers. Only medications within this approved protocol are available for RNs to authorize refills.

II. Inclusions and Exclusions

A. Inclusions

- 1 Existing mental health client of respective community support centers within ACBHD where refill requests are received
- 2 Medications listed in the approved medication list
3. Qualified nurses can assist in the management of authorizing non-controlled medication refills

B. Exclusions

1. The following medications/circumstances are excluded from this protocol:
 - Clozapine
 - Nefazodone
 - Controlled schedule medications
 - Evidence of non-adherence, including overuse or underuse of the medication
 - Indication(s) that the client may be experiencing side effects or drug interactions from the medication

Qualified nurses authorize medication refills based on the following criteria:

Quantity Authorized for Refills	Last visit criteria (i.e., when was the client last seen within?)	Early Refill Cut off	Labs
3-month supply	Pt has shown up for 2 out of the last 3 appointments. Last appointment within the past 3 months	N/A	Need to be relevant within 6 months, unless otherwise specified

III. Prescriber Consultation

A. Prescriber consultation is requested in any circumstance in which the nurse feels that a prescriber consultation would be beneficial. If the primary prescriber is not available, urgent consultations are directed to the Lead Prescriber or covering Prescriber on duty. In some cases, prescriber consultation is required prior to authorization of medication refills. Some examples include, but are not limited to:

1. Acute decomposition or worsening of the clients' condition
2. Emergency conditions requiring prompt medical intervention
3. Upon the request of the client, family, RN, or provider
4. Abnormal lab and vital findings, including results that are missing, abnormal or equivocal relating to the medication refill, as specified in the medication list
 - a. In the case of missing lab values: RN must consult with the prescriber prior to authorization of refills.
 - b. In the case of abnormal or equivocal lab values and vitals, refill request will be redirected to provider for approval.
 - In the case of lab values not accompanied by a lab range, the range provided on the approved medication list will be used.
5. Discrepancies with medication reconciliation
6. Lack of visit history within 3 months
7. Suspected medication adherence issues
8. RN has questions or concerns in approving a medication refill request
9. Upon request by client or family

IV. Requirements for the Registered Nurse

- A. Experience and Education
1. Possess an active, unrestricted California Registered Nurse license

2. RNII or higher in the ACBHD Community Support Center in which they are authorizing refills

B. Special Training

1. Completion of a review of medication list, importance of documentation, implications of electronic medical record (EMR) access and use of the Medication List approved for refill
2. At the conclusion of the standardized procedure training, the Nurse Leader or clinician designee assesses the RNs ability to perform the procedure.
3. The RN is observed completing three (3) successful medication refills by a qualified clinician prior to being deemed competent on this standardized procedure.
4. A list of the RNs authorized to perform these standardized procedure functions are maintained.

C. Scope of Supervision Required: The RN is responsible and accountable to the lead prescriber and the Chief Nursing Officer, or designee.

1. The designated clinician evaluates RNs competence through an annual performance appraisal and skills competency review.
2. Follow-up Supervision
 - a. Training is conducted in areas requiring increased proficiency and monitored by a designated clinician at appropriate intervals until acceptable skill level is achieved.
 - b. The RN is not allowed to perform the tasks associated with the standardized procedure until proficiency is established.
 - c. Evidence of training completion and competency verification are submitted to IDPC.

V. Clinical Assessment and Findings/Database

A. Timeline

1. It is expected that two (2) business days is the standard turnaround time to review a medication refill request, regardless of the form of request (i.e., fax, phone, pharmacy request).

B. Chart Review/Subjective

1. Assigned and appropriately trained RN who has been deemed competent on this procedure will review medication refill requests by electronic medical record, telephone contact, FAX inquiry or in person inquiry.
2. RN will review and assess client information pertinent to the medication refill request, including and not limited to the following:
 - a. Client's name, medical record number, and/or date of birth, client's designated clinic and prescriber
 - b. Medication, dose, amount requested, and date of last refill
 - c. Whether medication falls into exclusion criteria and/or provider consultation is needed

- d. Current medications and confirmation that the medication is on the current approved medication list
- e. Medication allergies
- f. Reconciling the medication directions listed in the most recent EMR note or prescription to the directions listed in the medication refill request
- g. Medication adherence history
- h. Medical history as relevant to the medication requested
- i. Relevant labs related to the medication or the psychiatric conditions (as specified in the medication list)

C. Objective Data that may be used

- 1. Patient assessment - no recent emergency room visit or hospitalizations
- 2. Laboratory assessment - Laboratory, vitals and imaging evaluation, as indicated, relevant to history and exam

D. Assessment

- 1. Assessment based on chart review, subjective and objective data to identify that the client may have medications refilled by an RN within this procedure
- 2. The attached medication list encompasses the commonly used medications in ACBHD; these are the only medications covered by this procedure

E. Plan

- 1. The RN follows this medication refill standardized procedure:
 - a. If the client meets indications as outlined above for medication refill by the RN and the medication is not excluded from the protocol, the RN:
 - (1) Verifies that no additional labs or vitals are required prior to refilling the medication prescription.
 - (2) Follows the algorithm and refills the medication for the duration of time outlined in the algorithm.
 - (3) Regardless of method of refill request received, the RN is expected to submit the refill through EMR.

F. Client Education: If the medication refill request is made during a face-to-face, telehealth, or client visit, the RN reviews medication purpose, administration instructions, and side effects directly with the client.

VI. Record-Keeping and Documentation

A. All RN medication refills are documented electronically and with a written note (according to clinic protocol) within one (1) business day. Documentation includes:

1. The medication name, dose, directions of use, day supply, number of refills authorized
2. Received route of the refill request
3. Transmission of refills through E-Prescribing with the date sent
4. Date of the communication with prescriber regarding refill

VII. Communication with the Primary Prescriber

A. RN communicates to the prescribing provider all relevant client care, medication refill approvals or denials in a manner consistent with the workflow of the designated clinic EMR, or other direct communication within one (1) business day

VIII. Approvals

Interdisciplinary Practice Committee (IDPC)	Date: 10-30-2025
Medical Executive Committee	Date: 07-02-2026
Chief Medical Officer /Designee	Date: 10-30-2025
Chief Nursing Officer	Date: 10-30-2025

- I. The standardized procedures will be reviewed every three (3) years, or sooner if there is a significant change in practice, by the ACBHD Chief Medical Officer or Associate Medical Director and the Chief Nursing Officer.
- II. All changes or additions to standardized procedures are to be approved by the IDPC Chair and accompanied by a signed and dated approval sheet.

CONTACT

ACBHD Office	Current As Of	Email
Office of the Medical Director	7/2/26	kinzi.richholt@acgov.org

DISTRIBUTION

This policy is distributed to the following:

- ACBHD Staff
- ACBHD County and contracted Providers

ISSUANCE AND REVISION HISTORY

Original Authors: Kinzi Richholt, APRN; Alyssa Choo, APRN; Charles Raynor, PharmD; Betsy Yuan, PharmD; Victoria Firl, PharmD

Original Date of Approval:8/24/2026 by Karyn L. Tribble, PsyD, LCSW, Behavioral Health Director

Revision Author	Reason for Revision	Date of Approval by (Name, Title)

DEFINITIONS

Term	Definition
Prescriber	A person authorized by the appropriate State Professional and Occupational licensing Board in California according to California Health & Safety Code 11150 .
Standardized Procedures	Legal mechanism for registered nurses, nurse practitioners to perform functions which would otherwise be considered the practice of medicine (Board of Registered Nursing, 1998). Board of Registered Nursing, CCR, Title 16, Section 1474 (1998). Medical Board of California, CCR, title 16, 1379 (1998).

APPENDICES

- **APPENDIX A**
Approved Refill Medication List (for authorized RNs)
- **APPENDIX B**
Medication Refill Standardized Procedure (List of RNs to be authorized)

Generic (* indicates controlled substance)	Brand	Therapeutic Category	Age Group, Option 1	Laboratory/Vitals Criteria	Allowed abnormal lab value for 1 month authorization x 1 time only	Other Notes
citalopram	Celexa	Antidepressants: Selective Serotonin Reuptake Inhibitors	Ages 18 or older	•Age > 65 years old: Na level wnl within 12 months •Age > 60 years old and doses > 20 mg/day: EKG WNL within 1 year or deemed appropriate by psychiatrist	Past due: •EKG	not prescribed as prn
escitalopram	Lexapro	Antidepressants: Selective Serotonin Reuptake Inhibitors	Ages 12+	Age > 65 years old: Na level wnl within 12 months	Past due: • Na, as long as last level was wnl and no changes in medical condition	not prescribed as prn
fluoxetine	Prozac	Antidepressants: Selective Serotonin Reuptake Inhibitors	Ages 7+	Age > 65 years old: Na level wnl within 12 months	Past due: • Na, as long as last level was wnl and no changes in medical condition	not prescribed as prn
fluvoxamine	Luvox	Antidepressants: Selective Serotonin Reuptake Inhibitors	Ages 8+	Age > 65 years old: Na level wnl within 12 months	Past due: • Na, as long as last level was wnl and no changes in medical condition	not prescribed as prn
paroxetine	Paxil	Antidepressants: Selective Serotonin Reuptake Inhibitors	Ages 18 or older	Age > 65 years old: Na level wnl within 12 months	Past due: • Na, as long as last level was wnl and no changes in medical condition	not prescribed as prn
sertraline	Zoloft	Antidepressants: Selective Serotonin Reuptake Inhibitors	Ages 6+	Age > 65 years old: Na level wnl within 12 months	Past due: • Na, as long as last level was wnl and no changes in medical condition	not prescribed as prn
vilazodone	Viibryd	Antidepressants: Selective Serotonin Reuptake Inhibitors	Ages 18 or older	Age > 65 years old: Na level wnl within 12 months		not prescribed as prn
venlafaxine	Effexor	Antidepressants: Serotonin-Norepinephrine Reuptake Inhibitors	Ages 18 or older	•Age > 65 years old: Na level wnl within 12 months •Most recent BP WNL within 12 months	Past due: • Na, as long as last level was wnl and no changes in medical condition •BP	not prescribed as prn
duloxetine	Cymbalta	Antidepressants: Serotonin-Norepinephrine Reuptake Inhibitors	Ages 7+	•Age > 65 years old: Na level wnl within 12 months •Most recent BP WNL within 12 months	Past due: • Na, as long as last level was wnl and no changes in medical condition •BP	not prescribed as prn
desvenlafaxine	Pristiq	Antidepressants: Serotonin-Norepinephrine Reuptake Inhibitors	Ages 18 or older	•Age > 65 years old: Na level wnl within 12 months •Most recent BP WNL within 12 months	Past due: • Na, as long as last level was wnl and no changes in medical condition •BP	not prescribed as prn
levomilnacipran	Fetzima	Antidepressants: Serotonin-Norepinephrine Reuptake Inhibitors	Ages 18 or older	•Age > 65 years old: Na level wnl within 12 months •Most recent BP WNL within 12 months	Past due: • Na, as long as last level was wnl and no changes in medical condition •BP	not prescribed as prn
milnacipran	Savella	Antidepressants: Serotonin-Norepinephrine Reuptake Inhibitors	Ages 18 or older	•Age > 65 years old: Na level wnl within 12 months •Most recent BP WNL within 12 months	Past due: • Na, as long as last level was wnl and no changes in medical condition •BP	not prescribed as prn
isocarboxazid	Marplan	Antidepressants: Monoamine Oxidase Inhibitors	Ages 18 or older	•Most recent BP WNL within 12 months •EFTs, SrCr within 12 months most current wnl	Past due: •BP	not prescribed as prn
phenelzine	Nardil	Antidepressants: Monoamine Oxidase Inhibitors	Ages 18 or older	•Most recent BP WNL within 12 months •EFTs, SrCr within 12 months most current wnl	Past due: •BP	not prescribed as prn
tranycpromine	Parnate	Antidepressants: Monoamine Oxidase Inhibitors	Ages 18 or older	•Most recent BP WNL within 12 months •EFTs, SrCr within 12 months most current wnl	Past due: •BP	not prescribed as prn
selegiline	Zelapar	Antidepressants: Monoamine Oxidase Inhibitors	Ages 18 or older	•Most recent BP WNL within 12 months •EFTs, SrCr within 12 months most current wnl	Past due: •BP	not prescribed as prn
bupropion	Wellbutrin	Miscellaneous Agents	Ages 8+	•Most recent BP WNL within 12 months •No active alcohol use disorder	Past due: •BP	not prescribed as prn

mirtazapine	Remeron	Miscellaneous Agents	Ages 12+	Age > 65 years old: Na level wnl within 12 months	Past due: • Na, as long as last level was wnl and no changes in medical condition	not prescribed as prn
trazodone	Desyrel	Miscellaneous Agents	Age 12+ for sedative hypnotic use			
vortioxetine	Trintellix	Miscellaneous Agents	Ages 18 or older	Age > 65 years old: Na level wnl within 12 months	Past due: • Na, as long as last level was wnl and no changes in medical condition	not prescribed as prn
amitriptyline	Elavil	Antidepressants: Tricyclics	Ages 18 or older	•Doses > 100 mg/day: EKG WNL within 1 year or deemed appropriate by psychiatrist •Most recent BP WNL within 12 months appropriate by psychiatrist •Age > 65 years old: Na level wnl within 12 months	Past due: • Na, as long as last level was wnl and no changes in medical condition •BP	not prescribed as prn when used for depression or mood
clomipramine	Anafranil	Antidepressants: Tricyclics	Ages 10+	•Doses > 100 mg/day: EKG WNL within 1 year or deemed appropriate by psychiatrist •Most recent BP WNL within 12 months appropriate by psychiatrist •Age > 65 years old: Na level wnl within 12 months	Past due: • Na, as long as last level was wnl and no changes in medical condition •BP •EKG	not prescribed as prn when used for depression or mood
desipramine	Norpramin	Antidepressants: Tricyclics	Ages 18 or older	•Doses > 100 mg/day: EKG WNL within 1 year or deemed appropriate by psychiatrist •Most recent BP WNL within 12 months appropriate by psychiatrist •Age > 65 years old: Na level wnl within 12 months	Past due: • Na, as long as last level was wnl and no changes in medical condition •BP •EKG	not prescribed as prn when used for depression or mood
doxepin	Silenor	Antidepressants: Tricyclics	Ages 18 or older	•Doses > 100 mg/day: EKG WNL within 1 year or deemed appropriate by psychiatrist •Most recent BP WNL within 12 months appropriate by psychiatrist •Age > 65 years old: Na level wnl within 12 months	Past due: • Na, as long as last level was wnl and no changes in medical condition •BP •EKG	not prescribed as prn when used for depression or mood
imipramine	Tofranil	Antidepressants: Tricyclics	Ages 6+	•Doses > 100 mg/day: EKG WNL within 1 year or deemed appropriate by psychiatrist •Most recent BP WNL within 12 months appropriate by psychiatrist •Age > 65 years old: Na level wnl within 12 months	Past due: • Na, as long as last level was wnl and no changes in medical condition •BP •EKG	not prescribed as prn when used for depression or mood
nortriptyline	Pamelor	Antidepressants: Tricyclics	Ages 18 or older	•Doses > 100 mg/day: EKG WNL within 1 year or deemed appropriate by psychiatrist •Most recent BP WNL within 12 months appropriate by psychiatrist •Age > 65 years old: Na level wnl within 12 months	Past due: • Na, as long as last level was wnl and no changes in medical condition •BP •EKG	not prescribed as prn when used for depression or mood
protriptyline	Vivactil	Antidepressants: Tricyclics	Ages 18 or older	•Doses > 100 mg/day: EKG WNL within 1 year or deemed appropriate by psychiatrist •Most recent BP WNL within 12 months appropriate by psychiatrist •Age > 65 years old: Na level wnl within 12 months	Past due: • Na, as long as last level was wnl and no changes in medical condition •BP •EKG	not prescribed as prn when used for depression or mood
trimipramine	Surmontil	Antidepressants: Tricyclics	Ages 18 or older	•Doses > 100 mg/day: EKG WNL within 1 year or deemed appropriate by psychiatrist •Most recent BP WNL within 12 months appropriate by psychiatrist •Age > 65 years old: Na level wnl within 12 months	Past due: • Na, as long as last level was wnl and no changes in medical condition •BP •EKG	not prescribed as prn when used for depression or mood
aripiprazole	Abilify	Antipsychotics: Atypical	Ages 6+	•If h/o TD, AIMS within the last 6 months •Weight measured according to guidelines •Glucose/A1C measured according to guidelines •Cholesterol/TG measured according to guidelines •EPS assessment at last encounter	Past due: •Weight •Glucose/A1C •Cholesterol/TG •AIMS & EPS assessment	

asenapine	Saphris	Antipsychotics: Atypical	Ages 10+	•h/o TD, AIMS within the last 6 months •Weight measured according to guidelines •Glucose/A1C measured according to guidelines •Cholesterol/TG measured according to guidelines •EPS assessment at last encounter	Past due: •Weight •Glucose/A1C •Cholesterol/TG •AIMs & EPS assessment	
brexpiprazole	Rexulti	Antipsychotics: Atypical	Ages 18 or older	•h/o TD, AIMS within the last 6 months •Weight measured according to guidelines •Glucose/A1C measured according to guidelines •Cholesterol/TG measured according to guidelines •EPS assessment at last encounter	Past due: •Weight •Glucose/A1C •Cholesterol/TG •AIMs & EPS assessment	
iloperidone	Fanapt	Antipsychotics: Atypical	Ages 18 or older	•h/o TD, AIMS within the last 6 months •Weight measured according to guidelines •Glucose/A1C measured according to guidelines •Cholesterol/TG measured according to guidelines •EPS assessment at last encounter	Past due: •Weight •Glucose/A1C •Cholesterol/TG •AIMs & EPS assessment	
lumateperone	Caplyta	Antipsychotics: Atypical	Ages 18 or older	•h/o TD, AIMS within the last 6 months •Weight measured according to guidelines •Glucose/A1C measured according to guidelines •Cholesterol/TG measured according to guidelines •EPS assessment at last encounter	Past due: •Weight •Glucose/A1C •Cholesterol/TG •AIMs & EPS assessment	
lurasidone	Latuda	Antipsychotics: Atypical	Ages 18 or older	•h/o TD, AIMS within the last 6 months •Weight measured according to guidelines •Glucose/A1C measured according to guidelines •Cholesterol/TG measured according to guidelines •EPS assessment at last encounter	Past due: •Weight •Glucose/A1C •Cholesterol/TG •AIMs & EPS assessment	
olanzapine	Zyprexa	Antipsychotics: Atypical	Ages 10+	•h/o TD, AIMS within the last 6 months •Weight measured according to guidelines •Glucose/A1C measured according to guidelines •Cholesterol/TG measured according to guidelines •EPS assessment at last encounter	Past due: •Weight •Glucose/A1C •Cholesterol/TG •AIMs & EPS assessment	
paliperidone	Invega	Antipsychotics: Atypical	Ages 12+	•h/o TD, AIMS within the last 6 months •Weight measured according to guidelines •Glucose/A1C measured according to guidelines •Cholesterol/TG measured according to guidelines •EPS assessment at last encounter • Prolactin wnl taken within the last 12 months	Past due: •Weight •Glucose/A1C •Cholesterol/TG •AIMs & EPS assessment •Prolactin	
pimavanserin	Nuplazid	Antipsychotics: Atypical	Ages 18 or older	•h/o TD, AIMS within the last 6 months •Weight measured according to guidelines •Glucose/A1C measured according to guidelines •Cholesterol/TG measured according to guidelines •EPS assessment at last encounter	Past due: •Weight •Glucose/A1C •Cholesterol/TG •AIMs & EPS assessment	
quetiapine	Seroquel	Antipsychotics: Atypical	Ages 10+	•h/o TD, AIMS within the last 6 months •Weight measured according to guidelines •Glucose/A1C measured according to guidelines •Cholesterol/TG measured according to guidelines •EPS assessment at last encounter	Past due: •Weight •Glucose/A1C •Cholesterol/TG •AIMs & EPS assessment	
risperidone	Risperdal	Antipsychotics: Atypical	Ages 5+	•h/o TD, AIMS within the last 6 months •Weight measured according to guidelines •Glucose/A1C measured according to guidelines •Cholesterol/TG measured according to guidelines •EPS assessment at last encounter •Prolactin wnl taken within the last 12 months	Past due: •Weight •Glucose/A1C •Cholesterol/TG •AIMs & EPS assessment •Prolactin	
ziprasidone	Geodon	Antipsychotics: Atypical	Ages 18 or older	•h/o TD, AIMS within the last 6 months •Weight measured according to guidelines •Glucose/A1C measured according to guidelines •Cholesterol/TG measured according to guidelines •EPS assessment at last encounter •EKG WNL within 1 year or deemed appropriate by psychiatrist	Past due: •Weight •Glucose/A1C •Cholesterol/TG •AIMs & EPS assessment •EKG	

cariprazine	Vraylar	Antipsychotics: Atypical	Ages 18 or older	• If h/o TD, AIMS within the last 6 months • Weight measured according to guidelines • Glucose/A1C measured according to guidelines • Cholesterol/TG measured according to guidelines • EPS assessment at last encounter	Past due: • Weight • Glucose/A1C • Cholesterol/TG • AIMS & EPS assessment	
olanzapine/samidorphan	Lybalvi	Antipsychotics: Atypical, combination	Ages 18 or older	• If h/o TD, AIMS within the last 6 months • Weight measured according to guidelines • Glucose/A1C measured according to guidelines • Cholesterol/TG measured according to guidelines • EPS assessment at last encounter	Past due: • Weight • Glucose/A1C • Cholesterol/TG • AIMS & EPS assessment	
aripiprazole	Abilify Maintena	Antipsychotics: Atypical, Long Acting Injectable	Ages 6+	• If h/o TD, AIMS within the last 6 months • Weight measured according to guidelines • Glucose/A1C measured according to guidelines • Cholesterol/TG measured according to guidelines • EPS assessment at last encounter	Past due: • Weight • Glucose/A1C • Cholesterol/TG • AIMS & EPS assessment	
aripiprazole lauroxil	Aristada	Antipsychotics: Atypical, Long Acting Injectable	Ages 18 or older	• If h/o TD, AIMS within the last 6 months • Weight measured according to guidelines • Glucose/A1C measured according to guidelines • Cholesterol/TG measured according to guidelines • EPS assessment at last encounter	Past due: • Weight • Glucose/A1C • Cholesterol/TG • AIMS & EPS assessment	
paliperidone palmitate	Invega Hafyera	Antipsychotics: Atypical, Long Acting Injectable	Ages 18 or older	• If h/o TD, AIMS within the last 6 months • Weight measured according to guidelines • Glucose/A1C measured according to guidelines • Cholesterol/TG measured according to guidelines • EPS assessment at last encounter • Prolactin wnl taken within the last 12 months	Past due: • Weight • Glucose/A1C • Cholesterol/TG • AIMS & EPS assessment • Prolactin	
paliperidone palmitate	Invega Sustenna	Antipsychotics: Atypical, Long Acting Injectable	Ages 18 or older	• If h/o TD, AIMS within the last 6 months • Weight measured according to guidelines • Glucose/A1C measured according to guidelines • Cholesterol/TG measured according to guidelines • EPS assessment at last encounter • Prolactin wnl taken within the last 12 months	Past due: • Weight • Glucose/A1C • Cholesterol/TG • AIMS & EPS assessment • Prolactin	
paliperidone palmitate	Invega Trinza	Antipsychotics: Atypical, Long Acting Injectable	Ages 18 or older	• If h/o TD, AIMS within the last 6 months • Weight measured according to guidelines • Glucose/A1C measured according to guidelines • Cholesterol/TG measured according to guidelines • EPS assessment at last encounter • Prolactin wnl taken within the last 12 months	Past due: • Weight • Glucose/A1C • Cholesterol/TG • AIMS & EPS assessment • Prolactin	
risperidone	Perseris	Antipsychotics: Atypical, Long Acting Injectable	Ages 18 or older	• If h/o TD, AIMS within the last 6 months • Weight measured according to guidelines • Glucose/A1C measured according to guidelines • Cholesterol/TG measured according to guidelines • EPS assessment at last encounter • Prolactin wnl taken within the last 12 months	Past due: • Weight • Glucose/A1C • Cholesterol/TG • AIMS & EPS assessment • Prolactin	
risperidone	Risperdal Consta	Antipsychotics: Atypical, Long Acting Injectable	Ages 18 or older	• If h/o TD, AIMS within the last 6 months • Weight measured according to guidelines • Glucose/A1C measured according to guidelines • Cholesterol/TG measured according to guidelines • EPS assessment at last encounter • Prolactin wnl taken within the last 12 months	Past due: • Weight • Glucose/A1C • Cholesterol/TG • AIMS & EPS assessment • Prolactin	
fluphenazine decanoate	Modecate/Prolixin	Antipsychotics: Conventional, Long Acting Injectable	Ages 18 or older	• If h/o TD, AIMS within the last 6 months • Weight measured according to guidelines • Glucose/A1C measured according to guidelines • Cholesterol/TG measured according to guidelines • EPS assessment at last encounter • Prolactin wnl taken within the last 12 months	Past due: • Weight • Glucose/A1C • Cholesterol/TG • AIMS & EPS assessment • Prolactin	
fluphenazine decanoate	Modecate/Prolixin	Antipsychotics: Conventional, Long Acting Injectable	Ages 18 or older	• If h/o TD, AIMS within the last 6 months • Weight measured according to guidelines • Glucose/A1C measured according to guidelines • Cholesterol/TG measured according to guidelines • EPS assessment at last encounter • Prolactin wnl taken within the last 12 months	Past due: • Weight • Glucose/A1C • Cholesterol/TG • AIMS & EPS assessment • Prolactin	

chlorpromazine	Thorazine	Antipsychotics: Conventional	Ages 18 or older	•H h/o TD, AIMS within the last 6 months •Weight measured according to guidelines •Glucose/A1C measured according to guidelines •Cholesterol/TG measured according to guidelines •EPS assessment at last encounter •Prolactin wnl taken within the last 12 months	Past due: •Weight •Glucose/A1C •Cholesterol/TG •AIMS & EPS assessment •Prolactin	
fluphenazine	Modecate/Prolixin	Antipsychotics: Conventional	Ages 18 or older	•H h/o TD, AIMS within the last 6 months •Weight measured according to guidelines •Glucose/A1C measured according to guidelines •Cholesterol/TG measured according to guidelines •EPS assessment at last encounter •Prolactin wnl taken within the last 12 months	Past due: •Weight •Glucose/A1C •Cholesterol/TG •AIMS & EPS assessment •Prolactin	
haloperidol	Haldol	Antipsychotics: Conventional	Ages 18 or older	•H h/o TD, AIMS within the last 6 months •Weight measured according to guidelines •Glucose/A1C measured according to guidelines •Cholesterol/TG measured according to guidelines •EPS assessment at last encounter •Prolactin wnl taken within the last 12 months	Past due: •Weight •Glucose/A1C •Cholesterol/TG •AIMS & EPS assessment •Prolactin	
loxapine	Loxitane	Antipsychotics: Conventional	Ages 18 or older	•H h/o TD, AIMS within the last 6 months •Weight measured according to guidelines •Glucose/A1C measured according to guidelines •Cholesterol/TG measured according to guidelines •EPS assessment at last encounter •Prolactin wnl taken within the last 12 months	Past due: •Weight •Glucose/A1C •Cholesterol/TG •AIMS & EPS assessment •Prolactin	
molindone	Moban	Antipsychotics: Conventional	Ages 18 or older	•H h/o TD, AIMS within the last 6 months •Weight measured according to guidelines •Glucose/A1C measured according to guidelines •Cholesterol/TG measured according to guidelines •EPS assessment at last encounter •Prolactin wnl taken within the last 12 months	Past due: •Weight •Glucose/A1C •Cholesterol/TG •AIMS & EPS assessment •Prolactin	
perphenazine	Trilafon	Antipsychotics: Conventional	Ages 18 or older	•H h/o TD, AIMS within the last 6 months •Weight measured according to guidelines •Glucose/A1C measured according to guidelines •Cholesterol/TG measured according to guidelines •EPS assessment at last encounter •Prolactin wnl taken within the last 12 months	Past due: •Weight •Glucose/A1C •Cholesterol/TG •AIMS & EPS assessment •Prolactin	
pimozide	Orap	Antipsychotics: Conventional	Ages 18 or older	•H h/o TD, AIMS within the last 6 months •Weight measured according to guidelines •Glucose/A1C measured according to guidelines •Cholesterol/TG measured according to guidelines •EPS assessment at last encounter • Prolactin wnl taken within the last 12 months	Past due: •Weight •Glucose/A1C •Cholesterol/TG •AIMS & EPS assessment •Prolactin	
thioridazine	Mellaril	Antipsychotics: Conventional	Ages 18 or older	•H h/o TD, AIMS within the last 6 months •Weight measured according to guidelines •Glucose/A1C measured according to guidelines •Cholesterol/TG measured according to guidelines •EPS assessment at last encounter •Prolactin wnl taken within the last 12 months •EKG WNL within 1 year or deemed appropriate by psychiatrist	Past due: •Weight •Glucose/A1C •Cholesterol/TG •AIMS & EPS assessment •Prolactin •EKG	
thiothixene	Navane	Antipsychotics: Conventional	Ages 18 or older	•H h/o TD, AIMS within the last 6 months •Weight measured according to guidelines •Glucose/A1C measured according to guidelines •Cholesterol/TG measured according to guidelines •EPS assessment at last encounter •Prolactin wnl taken within the last 12 months	Past due: •Weight •Glucose/A1C •Cholesterol/TG •AIMS & EPS assessment •Prolactin	
trifluoperazine	Stelazine	Antipsychotics: Conventional	Ages 18 or older	•H h/o TD, AIMS within the last 6 months •Weight measured according to guidelines •Glucose/A1C measured according to guidelines •Cholesterol/TG measured according to guidelines •EPS assessment at last encounter •Prolactin wnl taken within the last 12 months	Past due: •Weight •Glucose/A1C •Cholesterol/TG •AIMS & EPS assessment •Prolactin	
carbamazepine	Tegretol	Mood Stabilizer	Ages 4+	LFTs, CBC, Na within 12 months most current wnl	Past due: •EFTs •CBC	

oxcarbazepine	Trileptal	Mood Stabilizer	Ages 18 or older	LFTs, CBC, Na within 12 months most current wnl	Past due: •EFTs •CBC	
divalproex	Depakote	Mood Stabilizer	Ages 10+	•Most recent serum VPA level less than 125 mcg/mL •EFTs, CBC within 12 months most current wnl •Not pregnant	Past due: •EFTs •CBC •VPA level	
valproic acid	Depakene	Mood Stabilizer	Ages 6+	•Most recent serum VPA level less than 125 mcg/mL •EFTs, CBC within 12 months most current wnl •Not pregnant	Past due: •EFTs •CBC •VPA level	
lamotrigine	Lamictal	Mood Stabilizer	Ages 18 or older	CBC within 12 months most current wnl	Past due: •CBC	If stopped for 5 or more days, must restart initial dose titration
lithium carbonate	Eskalith/Lithobid	Mood Stabilizer	Ages 7+	•Serum Li level within 6 months and less than 1.2 mEq/L •SrCr, TSH, CBC within 12 months most current wnl	Past due: •SrCr •TSH •CBC •Li Level, as long as last level was wnl and no changes in medical condition and lithium dose since last level	
topiramate	Topamax	Mood Stabilizer	Ages 18 or older	•CrCl >70 mL/minute/1.73 m2. No hemodialysis •O2 WNL		For brand Trokendi XR, do not refill if active alcohol use disorder present
amantadine	Gocovri	Antiparkinsonian/antidyskinetic	Ages 18 or older	SrCr within 12 months most current wnl or stable		
benztropine	Cogentin	Antiparkinsonian/antidyskinetic	Ages 18 or older	Not on clozapine		
diphenhydramine	Benadryl	Antiparkinsonian/antidyskinetic and anti-histamine	Ages 2+	Not on clozapine		
trihexyphenidyl	Artane	Antiparkinsonian/antidyskinetic	Ages 18 or older	Not on clozapine		
ipratropium	Atrovent	Antiparkinsonian/antidyskinetic	Ages 18 or older			
atropine	Atropen	Antiparkinsonian/antidyskinetic	Ages 18 or older	Most recent BP/HR WNL within 12 months		
valbenazine	Ingrezza	Antiparkinsonian/antidyskinetic	Ages 18 or older	•EKG WNL within 1 year or deemed appropriate by psychiatrist •Not diagnosed with Huntingtons disease	Past due: •EKG	
deutetrabenazine	Austedo	Antiparkinsonian/antidyskinetic	Ages 18 or older	•EKG WNL within 1 year or deemed appropriate by psychiatrist •Not diagnosed with Huntingtons disease	Past due: •EKG	
buspirone	Buspar	Anxiolytic or Hypnotics : Non- Benzodiazepines	Ages 18 or older	Age > 65 years old: Na level wnl within 12 months	Past due: • Na, as long as last level was wnl and no changes in medical condition	
ramelteon	Rozerem	Anxiolytic or Hypnotics : Non- Benzodiazepines	Ages 18 or older			
tasimelteon	Hetlioz	Anxiolytic or Hypnotics : Non- Benzodiazepines	Ages 18 or older			
melatonin	Circadin	Anxiolytic or Hypnotics : Non- Benzodiazepines	Ages 18 or older			
doxazosin	Cardura	Antihypertensives: Alpha Blockers	Ages 18 or older	•T8-69 years old: BP >90/60 or <140/90 •=70 years old: BP >95/65 or <150/90 •HR > 60		
terazosin	Hytrin	Antihypertensives: Alpha Blockers	Ages 18 or older	•T8-69 years old: BP >90/60 or <140/90 •=70 years old: BP >95/65 or <150/90 •HR > 60		
propranolol	Inderal	Antihypertensives: Beta Blockers	Ages 18 or older	•T8-69 years old: BP >90/60 or <140/90 •=70 years old: BP >95/65 or <150/90 •HR > 60		
atenolol	Tenormin	Antihypertensives: Beta Blockers	Ages 18 or older	•T8-69 years old: BP >90/60 or <140/90 •=70 years old: BP >95/65 or <150/90 •HR > 60		
clonidine	Catapres	Antihypertensive: Alpha Agonist	Ages 6+	•T8-69 years old: BP >90/60 or <140/90 •=70 years old: BP >95/65 or <150/90 •HR > 60		
glipizide	Glucotrol	Antihypertensives: Alpha Agonist	Ages 18 or older	•A1C > 5 and <9% •Glucose >75 mg/dl and <175 mg/dl and no symptoms of hypoclycemia or hyperglycemia	A1C > 9%	
glimepiride	Amaryl	Antidiabetic Agents	Ages 18 or older	•A1C > 5 and <9% •Glucose >75 mg/dl and <175 mg/dl and no symptoms of hypoclycemia or hyperglycemia	A1C > 9%	
sitagliptin	Januvia	Antidiabetic Agents	Ages 18 or older	•A1C > 5 and <9% •Glucose >75 mg/dl and <175 mg/dl and no symptoms of hypoclycemia or hyperglycemia	A1C > 9%	
metformin	Glucophage	Antidiabetic Agents	Ages 18 or older	•A1C > 5 and <9% •Glucose >75 mg/dl and <175 mg/dl and no symptoms of hypoclycemia or hyperglycemia •GFR> 45 mL/min within the last 12 months	A1C > 9%	
metformin-glyburide	Glucovance	Antidiabetic Agents	Ages 18 or older	•A1C > 5 and <9% •Glucose >75 mg/dl and <175 mg/dl and no symptoms of hypoclycemia or hyperglycemia •GFR> 45 mL/min within the last 12 months	A1C > 9%	

sitagliptin-metformin	Janumet	Antidiabetic Agents	Ages 18 or older	•A1C > 5 and <9% •Glucose >75 mg/dl and <175 mg/dl and no symptoms of hypoclycemia or hyperglycemia •eGFR> 45 mL/min within the last 12 months	A1C > 9%	
cimetidine	Tagamet	GI Agents: H2 Antagonists	Ages 18 or older			
famotidine	Pepcid	GI Agents: H2 Antagonists	Ages 18 or older			
ranitidine	Zantac	GI Agents: H2 Antagonists	Ages 18 or older			
dexlansoprazole	Dexilant	GI Agents: Proton Pump Inhibitors	Ages 18 or older	•Not pregnant •Not on clopidogrel •No diagnosis of osteoporosis		
esomeprazole	Nexium	GI Agents: Proton Pump Inhibitors	Ages 18 or older	•Not pregnant •Not on clopidogrel •No diagnosis of osteoporosis		
lansoprazole	Prevacid	GI Agents: Proton Pump Inhibitors	Ages 18 or older	•Not pregnant •Not on clopidogrel •No diagnosis of osteoporosis		
omeprazole	Prilosec	GI Agents: Proton Pump Inhibitors	Ages 18 or older	•Not pregnant •Not on clopidogrel •No diagnosis of osteoporosis		
pantoprazole	Protonix	GI Agents: Proton Pump Inhibitors	Ages 18 or older	•Not pregnant •Not on clopidogrel •No diagnosis of osteoporosis		
rabeprazole	Aciphex	GI Agents: Proton Pump Inhibitors	Ages 18 or older	•Not pregnant •Not on clopidogrel •No diagnosis of osteoporosis		
acamprosate	Campral	GABA Agonist/Glutamate Antagonist	Ages 18 or older	SrCr within 12 months most current wnl or stable		
atomoxetine	Strattera	Attention-deficit/Hyperactivity Disorder Agent	Ages 6 or older	•Most recent BP/HR WNL within 12 months •EFTs within 12 months most current wnl		
docusate sodium	Colace	Miscellaneous Agents	Ages 12+			
sennosides	Senokot	Laxative	Ages 18 or older			
polyethylene glycol	Miralax	Laxative	Ages 18 or older			
psyllium fiber	Metamucil	Laxative	Ages 18 or older			
guanfacine	Tenex	Antihypertensive: Alpha Agonist	Ages 6+	Most recent BP/HR WNL within 12 months		
hydroxyzine	Vistaril	Antiparkinsonian/antidyskinetic and anti-histamine	Ages 6 or older			
nicotine gum	Nicorette	Nicotine Replacement	Ages 12 or older			
nicotine lozenge	Nicorette	Nicotine Replacement	Ages 12 or older			
nicotine transdermal patches	Nicoderm	Nicotine Replacement	Ages 12 or older	Most recent BP/HR WNL within 12 months		
prazosin	Minipress	Antihypertensives: Alpha Blockers	Ages 6 or older	•18-69 years old: BP >90/60 or <140/90 •70 years old: BP >95/65 or <150/90 •HR > 60		
vit E cap	Aquasol E	Miscellaneous Agents	Ages 18 or older			
cholecalciferol (vitamin D3)	Calciferol/Drisdol	Miscellaneous Agents	Ages 18 or older			
ergocalciferol (vitamin D2)	Calciferol/Drisdol	Miscellaneous Agents	Ages 18 or older			
thiamine	Thiamine (Vitamin B1	Miscellaneous Agents	Ages 18 or older			
folic acid (folate)	Folvite	Miscellaneous Agents	Ages 18 or older			
multivit/minerals		Miscellaneous Agents	Ages 18 or older			
prenatal vitamin	CitraNatal	Miscellaneous Agents	Ages 18 or older			
ferrous sulfate	Feosol	Miscellaneous Agents	Ages 18 or older	Hemoglobin, hematocrit, serum ferritin, and transferrin saturation in the last 6 months		
ferrous gluconate	Ferate	Miscellaneous Agents	Ages 18 or older	Hemoglobin, hematocrit, serum ferritin, and transferrin saturation in the last 6 months		
fish oil	Lovaza	Miscellaneous Agents	Ages 18 or older	Lipid panel in the last 12 months		
levothyroxine	Synthroid	Thyroid Product	Ages 18 or older	•TSH wnl in the last 12 months •If dosage changed, TSH wnl within 6 weeks or more after last dosage change	Past due: •TSH, as long as last level was wnl and no changes in medical condition or dose change since last TSH level	
liothyronine	Cytomel	Thyroid Product	Ages 18 or older	•TSH wnl in the last 12 months •If dosage changed, TSH wnl within 6 weeks or more after last dosage change	Past due: •TSH, as long as last level was wnl and no changes in medical condition or dose change since last TSH level	

Appendix B: Medication Refill Standardized Procedure

The following Registered Nurses will perform the functions in this **Standardized Procedure** following successful training and authorization:

Alyssa Choo RNIV _____

Abibat Ajiboye RNII _____

Keith Dixon RN _____