



PHARMACY UPDATE

Crushing Medications: Check Before You Crush

Before crushing any medication for PO or enteral-tube administration, check formulation descriptors and MAR comments.



CURRENT ISSUE / WHY IT MATTERS

Crushing medications that should not be crushed may increase or rapidly release the dose and cause harm.

Why is this important: Patient Safety and Institute for Safe Medication Practices (ISMP) compliance.

SOLUTIONS: CHECK BEFORE YOU CRUSH

1



Before crushing: Review MAR comments and administration instructions for PO or enteral-tube meds.

2



Do not crush flagged formulations:

ER or XR = Extended release SR = Sustained release
EC = Enteric coated CD = Controlled release
DR = Delayed release

3



If any descriptor is present: Contact the pharmacist or provider for an adjustment before administration.

4



This abbreviation list is not all-inclusive.

WHEN TO ESCALATE / ASK FOR HELP

- Medication includes ER, XR, SR, EC, CD, or DR



- Crushing is needed for PO or enteral-tube administration



- MAR comments are missing, unclear, or conflict with the order



- Any question or concern: contact pharmacy before crushing



BOTTOM LINE: Check descriptors and MAR comments before crushing - when in doubt, contact pharmacy.



HCA Healthcare®
Center for Clinical
Advancement
NC Division



Clinical Reminders

GO LIVE
AUG 11

Nursing Education: Oral PPI (Proton pump inhibitors) Formulation Changes

Moving from a pharmacy compounded oral solution to 2 different manufactured products that can be prepared on the floor

Choose the formulation by age and administration needs. Use purified water and an ENTERAL syringe when preparing for tube administration.

Lansoprazole ODT

For patients ≥ 1 year old who cannot tolerate tablets or require per-tube administration:

- ≤ 30 kg = 15 mg ODT
- > 30 kg = 30 mg ODT

ORAL ADMINISTRATION

- Do not break or cut the tablet.
- Place on tongue; allow to dissolve (with or without water) and swallow pellets. Do not chew pellets.
- If the patient has difficulty swallowing pellets, follow tube dissolution instructions and administer the mixture in the patient's mouth.
- Administer 30 minutes before meal.

TUBE ADMINISTRATION

- Place tablet in an ENTERAL syringe.
- Draw up purified water: 15 mg ODT = 4 mL; 30 mg ODT = 10 mL.
- Shake gently to dissolve; administer via FEEDING TUBE.
- Administer within 15 minutes of preparation.
- Refill ENTERAL syringe with 5 mL purified water, shake gently, and administer via FEEDING TUBE.
- Hold enteral nutrition 30 minutes prior to lansoprazole administration.



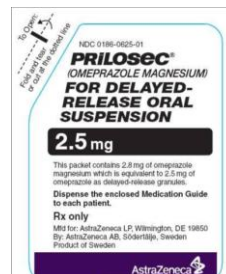
Omeprazole Suspension Packet

For patients < 1 year of age. Dosing is based on weight (kg).

Weight	Dose	Packets / volume
3 to < 5 kg	2.5 mg ONCE daily	1 packet (5 mL)
5 to < 10 kg	5 mg ONCE daily	2 packets (10 mL)
10 to < 20 kg	10 mg ONCE daily	4 packets (20 mL)
≥ 20 kg	20 mg ONCE daily	8 packets (40 mL)

2.5 MG OMEPRAZOLE PACKETS

- Add 5 mL purified water for EACH 2.5 mg packet used to an ENTERAL syringe.
- Add granules from the packet.
- Shake syringe and let thicken for 2–3 minutes.
- Shake again and administer within 30 minutes.
- If administered via FEEDING TUBE, flush the feeding tube according to nursing unit standards before and after administration.
- Administer 30 minutes before meal; hold enteral nutrition 30 minutes before administration (includes bolus feedings and continuous nutrition).



Cardiology Inpatient Pacemaker and Cardiology OPCU Pacemaker PowerPlan Updates



KEY PRACTICE CHANGE

Nursing Communication will be removed and replaced with Notify Provider/Physician orders.

Updates include:

Provider note added: within Diet and Diagnostic Tests.

Nursing Communication removed: from the affected plans.
Notify Provider/Physician replaces it: use for follow-up.

Diet selections updated: NPO prechecked; Cardiac/Heart Healthy unchecked.

GO-LIVE / PLAN SCOPE

GO LIVE

8/11/26

Affected PowerPlans

- Cardiology Inpatient Pacemaker or ICD Plan (MSJ)
- Cardiology OPCU Pacemaker or ICD Plan (MSJ)

Prothrombin Time/INR (PT/INR)	Stat, Blood, Nurse Collect
Intra-Op POC Testing Subplan (MSJ)	Planned Pen...
PROVIDER: Uncheck EKG order if completed within 30 days	
Notify Physician/Provider	Notify Provider, of EKG completion within 30 days. If no EKG within 30 days, complete EKG upon arrival.
EKG	T;N, Now, Abnormal EKG/Arrhythmia
PROVIDER: Once CXR completed, place diet order	
Notify Physician/Provider	Notify Provider, of CXR report showing no pneumothorax and need for provider diet order
NPO.	
Cardiac/Heart Healthy Diet	Sodium 2gm



BOTTOM LINE: Use updated PowerPlan selections at go-live.



HCA Healthcare®
Center for Clinical
Advancement
NC Division