

## **AVENUE II COMMUNITY PROGRAM SERVICES**

(THUNDER BAY) INCORPORATED

## MANUAL OF ADMINISTRATION

TOPIC:	SUBJECT:	Code:	MD010
Medication	PRN Protocol	Date of Issue:	November 2013
		Revised:	May 2025
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## PURPOSE:

To outline documented requirements for PRN medication prescribed for a medical/mental health issue, specific appointment, event or emergency hospital visit, and PRN medication with a Behaviour Support Plan.

## PROCEDURE:

1. Medication must be prescribed.

Protocol must include:

- Medication name and dosage.
- When it is to be used
- How often it is to be used
- Contraindications / side effects
- Consent of client / family member or substitute decision maker
- 2. PRN Protocol must be reviewed by the physician annually, or as needed, and updated to ensure it is not administered excessively beyond the recommended dosage, as a punishment for the person's behaviour, convenience or as a substitute for meaningful support, by the physician.
- 3. Where possible, the prescriber will be involved in the development of the protocol and sign the protocol (signature is mandatory when used with a Behaviour Support Plan).

**Relevant Documentation Involved:** 

- AIMS Restraint report Completed to record PRN support monitoring
- Written PRN Protocol
- MAR/Medication Sheet
- Serious Occurrence
- Clinical Notes On AIMS (Documentation for Medical Appointments/Events)
- Medication Summary on AIMS
- Daily Notes

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