PRN Orders for Psychotropic and Antipsychotic Medications

In certain situations, psychotropic medications may be prescribed on a PRN basis, such as while the dose is adjusted, to address acute or intermittent symptoms, or in an emergency. However, residents must not have PRN orders for psychotropic medications unless the medication is necessary to treat a diagnosed specific condition. The attending physician or prescribing practitioner must document the diagnosed specific condition and indication for the PRN medication in the medical record.

The table below explains additional limitations for PRN psychotropic (other than antipsychotic medications) and PRN antipsychotic medications.

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Type of PRN order	Time Limitation	Exception	Required Actions
PRN orders for Psychotropic medications, excluding antipsychotics	14 days	Order may be extended beyond 14 days if the attending physician or prescribing practitioner believes it is appropriate to extend the order.	Attending physician or prescribing practitioner should document the rationale for the extended time period in the medical record and indicate a specific duration.
PRN orders for antipsychotic medications only	14 days	none	If the attending physician or prescribing practitioner wishes to write a new order for the prn antipsychotic, the attending physician or prescribing practitioner must evaluate the resident (through direct evaluation) to determine if the new order for the prn antipsychotic is appropriate.

The required evaluation of a resident before writing a new PRN order for an antipsychotic entails the attending physician or prescribing practitioner directly examining the resident and assessing the resident's current condition and progress to determine if the PRN antipsychotic medication is still needed. As part of the evaluation, the attending physician or prescribing practitioner should, at a minimum, determine and document the following in the resident's medical record:

- ? Is the antipsychotic medication still needed on a PRN basis?
- ? What is the benefit of the medication to the resident?
- ? Have the resident's expressions or indications of distress improved as a result of the PRN medication?

NOTE: Report of the resident's condition from facility staff to the attending physician or prescribing practitioner does not constitute an evaluation.