

Q: Do the requirements at F329 apply to residents at the end of life and/or who are on hospice? (1-13-15)

A: We posed the question to CMS, Central office and here is their response. Interpretive guidance language at F329, regarding the use of antipsychotics at the End of life was deleted from the "Medication Issues of Particular Relevance Table 1". The rationale for deleting the language was to assure that the physician/practitioner who prescribed the antipsychotic medication for a resident, provided the identification of distressing symptoms and clinical rationale for the use of the medication, developed interventions for assessing and monitoring the efficacy and response to the medication being used, for monitoring target symptoms, and to provide consideration for reducing and/or discontinuing the medication.

The guidance at F329 does not preclude the prescriber from using an antipsychotic medication, but recommends that other interventions should be attempted to address the medical and/or behavioral symptoms prior to the use of an antipsychotic. The prescriber must provide a specific clinical rationale for the use of the medication and identify the medical symptom(s) for which the medication has been ordered.

If the medication is ordered, the record must reflect the following:

- The prescriber must provide a specific clinical rationale for the use of the medication and identify the medical symptom(s) for which the medication has been ordered;
- The use of the medication must be monitored and the prescriber must consider discontinuing the medication or reducing the dose when the medical symptoms for which the medication was prescribed are alleviated;
- Other interventions should be identified and implemented to address the medical symptoms in an attempt to prevent, to the extent possible, the distressing symptoms and the use of an antipsychotic medication;
- The use of the medication must be documented and the record must identify and address any contributing and underlying causes of the condition and verify the need for an antipsychotic medication, and if administered, the efficacy of the medication and whether the target symptoms have resolved;
- The record should also include the plan for discontinuing or reducing the dosage of the medication;
- The use of the medication must be discussed with the resident/designated representative prior to administration and the risks and benefits discussed; and
- The care plan must include the use of the medication and identify the target symptoms and include monitoring for the symptoms and for potential adverse consequences and include

other possible interventions in an attempt to reduce or discontinue the medication.