


High-Alert Medications List: PCH Highlights*



*Adapted from the Provincial High-Alert Medication List 2023 (not an exhaustive list of available products or of High-Alert Medications). For the full details, refer to the Provincial High-Alert Medication List

HIGH-ALERT <i>*REQUIRES independent double-check by visual verification</i>	NOT High-Alert <i>NO independent double-check by visual verification required</i>
	
INSULINS <ul style="list-style-type: none"> All routes of insulin administration (e.g., subcut) All formats of insulin (e.g., prefilled pens, cartridges, vials) 	<ul style="list-style-type: none"> Insulin self-administered by the resident
CYTOTOXIC MEDICATIONS <ul style="list-style-type: none"> Administered by the parenteral route (e.g. IM, subcut) 	<ul style="list-style-type: none"> Non-parenteral routes (e.g., oral, topical, rectal)
ANTICOAGULANTS <ul style="list-style-type: none"> Dalteparin vials/ampoules Heparin vials/ampoules with more than 5,000 units Other anticoagulants[#] in vials/ampoules <p><i>[#]Other anticoagulants include: argatroban, bivalirudin, danaparoid, enoxaparin, eptifibatide, fondaparinux, tinzaparin</i></p>	<ul style="list-style-type: none"> Oral anticoagulants Dalteparin prefilled syringes Heparin 5,000 unit prefilled syringes or vials Heparin flush for central venous access devices Other anticoagulants[#] in prefilled syringes
OPIOIDS <ul style="list-style-type: none"> FentaNYL patches all strengths FentaNYL vials/ampoules with total dose greater than 100 mcg per container HYDROmorphone vials/ampoules with total dose greater than 2 mg per container Morphine vials/ampoules with total dose greater than 15 mg per container Methadone all routes (e.g., tablets, oral liquid) and all concentrations Remifentanyl and sufentanyl all routes and all concentrations (not recommended for PCH) 	<ul style="list-style-type: none"> FentaNYL vials or ampoules with total dose less than or equal to 100 mcg per container (e.g., 50 mcg/mL x 2 mL) HYDROmorphone tablets/capsules/supps/oral liquid HYDROmorphone vials/ampoules with total dose less than or equal to 2 mg per container (e.g., 2 mg/mL x 1 mL) Morphine tablets/capsules/oral liquid Morphine vials/ampoules with total dose less than or equal to 15 mg per container (e.g., 10 mg/mL x 1 mL)
SEDATIVES <ul style="list-style-type: none"> LORazepam or midazolam given via continuous infusion (e.g., subcut) Ketamine vials/ampoules with a concentration greater than 10 mg/mL 	<ul style="list-style-type: none"> LORazepam tablets Midazolam intranasal LORazepam or midazolam intermittent (e.g., subcut, or IM) Ketamine compounds: oral liquid or topical Ketamine vials/ampoules less than or equal to 10 mg/mL