

Medication Safety Alert

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Focus on... **Methotrexate**

While Methotrexate has a well-established role in oncology, it is increasingly being used in **low doses** for rheumatoid arthritis, asthma, psoriasis, and inflammatory bowel disease. **Used for the above purposes, the dose is typically administered once, twice, or three times a week, as opposed to every day.** However, mistakes have been all too frequent because this medication is typically dosed on a **weekly** basis and clinicians and patients are more familiar with the daily dosing schedules prescribed for most medications.

Due to the potential for serious sentinel events from errors with oral methotrexate **clinicians should consider it a high risk medication regardless of the indication.**

There are several *safeguards* that can help reduce the risk of an occurrence when oral methotrexate is prescribed:

- **As a safety practice, encourage prescribers to include a specific clinical indication** (e.g. rheumatoid arthritis, psoriasis, etc.) within prescription directions.
- If the purpose of the medication is not made apparent, the nurse should speak directly with the prescriber to verify use and dose, frequency, and promote appropriate monitoring of the patient.
- Provide clearly written instructions that name a SPECIFIC day of the week for taking tablet(s). When possible avoid choosing Monday since it could be misread as “morning”.
- Verify any weekly dose greater than 15mg or any dose frequency other than a weekly schedule.
- After a prescriber has been contacted to verify a methotrexate order, document the outcome *in writing*.
- Methotrexate used for rheumatoid arthritis, psoriasis, asthma, or inflammatory bowel disease is not an emergency medication. Hold the order until a questionable dose can be verified and documented, and safely dispensed.