

BASIC INFORMATION AND COMMON
MISPERCEPTIONS ABOUT PSYCHIATRIC
MEDICATIONS IN KING COUNTY JAIL

Jail Health Services-KCCF/MRJC

1. The goal of King County Public Health, Jail Health Services (JHS), Psychiatric and Social Services is to provide appropriate psychiatric services while in the jail and assist with a patient's transition back to the community.
2. We would ideally like to have all approved medications started 24 hours from booking. Some factors which may delay this are:
 - a. Need for medication verification. Depending on the agency and their response time that can take days to more than a week. Once verified that the prescription is less than 45 days old, and the dosage is within the usual therapeutic range and meets formulary clinically, the Psychiatric Provider will restart the medication as clinically indicated. They will then be scheduled for follow-up as clinically appropriate on rounds or in clinic. Occasionally, the patient will be seen before this has time to occur.
 - b. If the patient's psychiatric medication[s] have been verified, but the dosage is outside of the normal therapeutic range, or does not comply with JHS practice guidelines, the dosage may be lowered or medications may be restarted selectively, so as to assure that JHS practice standards are maintained.
 - c. If the patient's medication cannot be verified through a provider or pharmacy, or the patient has not taken the medication during the 45 days prior to booking and is not enrolled in services, the medication request will not be routinely authorized and they will be assessed by a Psychiatric Provider face to face.
3. Common medications which are verified but not prescribed as they are in the community in accordance with jail health practice guidelines:
 - a. Dose change for safety reasons: after 5 days not taking lamotrigine the medication is restarted at a low dose.
 - b. Dose change for better effect: a low dose antipsychotic may be increased to a therapeutic dose.
 - c. Non-formulary medications may be substituted with a formulary equivalent.

- d. Medications stopped for safety reasons include tricyclic antidepressants (nortriptyline, amitriptyline) and MAOIs (Nardil, Parnate, selegiline).
 - e. Medications stopped because they are not considered medically necessary in the jail setting include soporifics [e.g. Trazodone, low-dose Seroquel, Ambien] “PRNs” such as hydroxyzine or clonidine.
 - f. Medications stopped because they lack FDA approval for psychiatric disorders such as gabapentin.
 - g. Benzodiazepines are typically tapered and discontinued in accordance with practice guidelines.
 - h. Polypharmacy: multiple low-dose medications particularly atypical antipsychotics will often be streamlined for simplicity of care and improved efficacy.
 - i. Medications lowered to within FDA guidelines such as high-dose Buspar.
 - j. Medications given twice, three or four times daily which can be consolidated and given less frequently without reduction in efficacy.
 - k. We receive a transport list of those patients returning from Western State Hospital and medications are ordered on their return. They typically are ordered as prescribed; however, there are some exceptions as noted above. The most likely reason for change in a medication from Western State Hospital is patient refusal or a reduction in dose at the request of patient.
 - l. Medications stopped at booking when there is a strong substance abuse background and/or poor adherence: there may be a period where the Psychiatric Provider may want to wait to see the patient off stimulants/alcohol/other drugs before restarting some or all of their medications due to potential interactions.
4. Medications prescribed during a patient’s time in jail:
- a. All medications can cause unwanted effects in an individual at any time. If a patient experiences side effects, especially a new problem, they should not hesitate to let a nurse or Medical/Psychiatric Provider know right away.
 - b. Some people may not feel better with the first medicine they try and may need to try several medicines in order to find the one that works for them. Others may find that a medicine helped for a while, but their symptoms return. It is important for patients to carefully follow a Provider’s directions for taking their medicine at an adequate dose and over an extended period of time (often 4 to 6 weeks) for it to work.
 - c. It is a patient’s responsibility to attend their clinic visit and let their Psychiatric Provider know if they think the medication is working, as well as if they are experiencing side effects. A person might not “feel” different after starting a medication and a patient may discuss this with a Psychiatric Provider. A patient may find, during the process of answering a

few simple questions in their visit with a Psychiatric Provider that their behavior has changed for the better despite how they think the medication may be working. It is possible that how a patient thinks may also be influenced by potential stress associated with their legal circumstances and/or the jail environment.

5. Medications to property:

- a. JHS will provide up to 7 days of medications to property upon request either by the patient, JHS provider, or outside agency.
- b. If a patient's care is associated with a particular court, outpatient mental health, or inpatient drug treatment program, JHS may provide a prescription for a 30-day supply to a pharmacy for patients to pick up after release from jail, upon request.
- c. Typically JHS pharmacy needs at least 1-3 business days for 7 days of medications to property and at least 3-5 business days for a 30 day prescription to be called into an outside pharmacy.
- d. All outside requests for medications should be made by faxing the "Request for Psychiatric Medications at Release from KCCF or MRJC" form as soon as a patient's release date is known.
 - For patients housed at the King County Correctional Facility (KCCF) in Seattle, fax the form to: **(206)-296-1032**.
 - For patients housed at the Maleng Regional Justice Center (MRJC) in Kent, fax the form to: **(206)-205-2449**.
- e. At times, a patient is released prior to getting their medications placed into their property or a script has been called in. Unfortunately, JHS will not provide medications to patients once they have been released from jail.

6. JHS contact for information regarding medication:

- a. Health Information Management (HIM): **(206) 296-1091; Ext. 2**