



U.S. Department of Justice
Federal Bureau of Prisons

Washington, D.C. 20534

April 24, 2020

MEMORANDUM FOR ALL CLINICAL DIRECTORS
ALL HEALTH SERVICES ADMINISTRATORS
ALL INSTITUTION CHIEF PHARMACISTS
ALL INSTITUTION CHIEF PSYCHOLOGISTS

Jeffery D. Allen, M.D.

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Date: 2020.04.24 08:29:21 -04'00'

FROM: Jeffery D. Allen, M.D.
Medical Director

SUBJECT: Changes to Directly Observed Therapy Medications
(Updated)

This is a change to the National Formulary in response to the COVID-19 Pandemic.

The following are removed from pill line only (also known as directly observed therapy [DOT]) status and may be dispensed for up to 14 day supplies as self-carry (KOP) medications on Care Level 3 or 4 inmates and up to 30 days on Care Level 1 or 2 inmates:

- Atypical Antipsychotics: asenapine, risperidone, olanzapine, aripiprazole, paliperidone, lurasidone, and ziprasidone
- **Benzotropine (added 4-24-2020)**
- Trazodone
- **Non-sedating antihistamines:** loratadine, cetirizine, and fexofenadine **(added 4-24-2020)**
- Antiseizure medications used for mental health conditions: phenytoin, valproic acid, carbamazepine, levetiracetam, oxcarbazepine, topiramate, **lamotrigine (added 4-24-2020)**.

NOTE: This does not include benzodiazepines, gabapentin, quetiapine, or pregabalin.

Prior to changing from DOT to KOP, all patients should be evaluated by a health care provider, in collaboration with a psychologist whenever possible, to ensure appropriateness in each circumstance. Certain patients might not be good candidates for this option, including those with poorly-

controlled conditions, evidence for significant medication non-compliance, or self-harm tendencies. Notification should be made to Psychology when this change is made. This does not apply to any other classes of medications currently listed as pill line only (i.e. insulin, or controlled substances). Providers should also consider allowing KOP for inmates on DOT for other medications that are not required by the formulary to be pill-line only (i.e. of statins, oral diabetic, and hypertensive medications).

This change will remain in effect until October 1, 2020.

cc: Louis Milusnic, ICS Operations Chief
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