

# CENTRALISED PROPOFOL RECONDITIONING PROCEDURE DURING COVID-19



Barcia Martín MI, Aguilar Guisado C, Sánchez Suarez S, García Gimeno.  
Hospital El Escorial, Pharmacy, Madrid, Spain  
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## BACKGROUND AND IMPORTANCE

As a consequence of the current pandemic, it was necessary to create an intensive care unit (ICU) in our hospital. This fact meant an increase in the consumption of propofol and the associated supply problems. It was necessary to develop a procedure to rationalize its use and administration.

## AIM AND OBJECTIVES

Describe the centralisation in the Hospital Pharmacy Service of the reconditioning of propofol in bags to optimise its administration in the ICU during the COVID-19 pandemic.

## MATERIALS AND METHODS

- **Retrospective and descriptive study** about the centralised propofol reconditioning procedure (CPRP) in 500 ml (10 mg/ml) bags.

- **Period of study:** from 20/03/2020 (implementation date) to 05/05/2020 (date of disablement of ICU).

- **Procedure for action:**

1. To select the most appropriate primary packaging material → Ethylene-vinyl-acetate (EVA) bags
2. To establish stability and storage conditions → 7 days refrigerated or 30 hours at room temperature
3. To draw up the standart working procedure:

In the horizontal laminar flow cabin, transfer the propofol into the EVA bag to obtain a final volume of 500ml (using a 0.22 micron filter if the initial packaging was glass). Finally, it was sealed, labelled and packed in a photo-protective bag.

They were prepared daily according to the number of patients in treatment and the rate of perfusion.

- **Data collection:** From the electronic medical record and pharmacy programmes, demographic data was collected on patients treated with propofol and the number of bags produced and dispensed per patient was recorded.

*A literature review was carried out and the risk matrix for sterile preparations contained in the "Guide to good practice in the preparation of medicines in Hospital Pharmacy Services" was applied to obtain the information.*

## RESULTS

- During this period, **258 propofol bags were produced**.
- Reconditioned propofol was dispensed to **16 patients**.
- The median number of bags per patient was 13,5 (range:3-66).

- Median age: 59 years (range: 41-83)
- Sex: 62,5 females

## CONCLUSION AND RELEVANCE

- The CPRP in the pharmacy service increases safety of administration, allows their preparation in aseptic conditions and enables the optimisation of available stock.
- As it contains more volume, it facilitates the work and protects the nursing staff by reducing the frequency of contact with the patient.