SAFETY STRATEGIES TO IMPROVE DRUG LABELLING IN OPERATING ROOMS

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OBJECTIVES

Operating rooms (OR) are an area with a significant proportion of high-risk, high-alert medications. A new law was published in 2016 in Spain with the objective of improving safety regarding drug identification in OR.

OBJECTIVE: to describe the actions developed to adapt our environment to the new legislation and to analyse intravenous drug labelling in daily clinical practice.

METHODS

• A committee was created composed by anaesthesia, surgeons, nursing and pharmacy departments. Seven brainstorming sessions were carried out to apply the new law to our OR in clinical practice.

• A transversal and observational study was conducted during two days in a tertiary hospital in October 2019. Variables were collected by nurses from reconstituted medication in bags and syringes.

RESULTS

Autofill ID patients’ labels and white labels to identified drugs should be pre-printed before the operation. In addition, pre-printed syringe labels were purchased complying with the colour code used in international system. The information was diffused to the departments in September 2019.

Total number of bags analysed: 91

55 (60,4%) Correctly identified

66 (72,53%) Patient ID
88 (96,7%) Drug identification
81 (89%) Dose or concentration

Total number of syringes analysed: 113

60 (53,1%) Correctly identified

93 (82,3) drug identification label
60 (53,1) dose identification

CONCLUSIONS

Reconstituted medication labelling in our OR follows adequately the standards but there is room for improvement. New measures will be discussed in training sessions as the high relevance of patient identification, administration route and syringe doses and new preprinted syringe labels will be purchased. A new study will be conducted in November 2019.