# ELECTRONIC PRESCRIPTION PROTOCOLS FOR PERSONALIZED STERILE PREPARATIONS FOR THE PEDIATRIC SURGERY

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DEPARTMENT

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# WHAT WAS DONE?

To prepare a protocol with the processes of prescription, validation, preparation and dispensing of personalized sterile formulations in the Pediatric-Surgery-Department (PSD:Otorhinolaryngology, Ophthalmology and Neurosurgery) from Pharmacy-Department (PD).



### WHY WAS IT DONE?

- ✓ Improve security, planning, and access to information for correct prescription, administration, and management.
- ✓ Guarantee the traceability of all processes.
- ✓ Improve the satisfaction of the services involved, preventing forgetfulness and therefore management of emergencies calls, unjustified need for the prescribed preparations, and incorrect packaging.
- ✓ Improve communication and the work circuit from PD.



## **HOW WAS IT DONE?**

- 1. Creation of a multidisciplinary team in which a circuit for the prescription, validation, preparation and dispensing of sterile-preparations was agreed.
- 2. Analysis with the departments involved of the personalized sterile-medications prepared by PD for use in pediatric-surgical-rooms, and the most frequent doses used.
- **3.** Bibliographic review: Pubmed®, Cochrane®, Uptodate®, Stabilis® and other sources such as the Good Clinical Practices (GCP) and the book Preparation of drugs and magistral formulation for ophthalmology (JM Alonso).
- **4.** Creation of electronic-prescription-protocols in ATHOS-Prisma®, containing:
- help notes and preconditions for the prescription.
- information for the administration and management of waste.
- detailed brew sheet and custom label for the PD.
- 5. Review of the protocols created and the circuit proposed for the prescription, preparation and dispensing.
- **6.** Start-up of the circuit: review and validation of prescriptions, preparation of sterile-formulations centralized in PD through laminar flow hoods, and dispensing directly to the surgical-room on the scheduled date.



#### WHAT HAS BEEN ACHIEVED?

Piloting began with sterile-otorhinology-formulations in 2021, expanding to ophthalmology and neurosurgery in 2022-2023.

✓ Creation of three groups of protocols that will contain those related to each specialty to facilitate location and prescription by surgeons:

#### \*Pediatric ophthalmology:

Mitomycin 0.2mg/ml intraoperative-solution-trabeculectomy Fluorouracil 5mg/0.1ml intraoperative-solution-trabeculectomy Intracameral-cefuroxime 2mg/0.2ml (antibiotic-prophylaxis)

## \*Pediatric otorhinology:

Cidofovir 5mg/ml intralesional (laryngeal-papillomatosis)
Bevacizumab 2.5mg/ml intralesional (laryngeal-papillomatosis)
Mitomycin 0.5mg/ml (choanal-atresia)



# \*Pediatric neurosurgery:

Interferon-alpha 3MIU/0.6ml intralesional (craniopharyngioma)

- ✓ Sixty-two preparations have been prepared and dispensed for a total of thirty children; average age of 4 years (1-10). No adverse-events were reported in any patient after the administration of these sterile-preparations.
- ✓ A study limitation was sample size. Circuit under development.





# **WHAT NEXT?**

The protocol is applicable to any hospital with electronicprescription and surgical-area.

