

Ready to Use Packaging

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Challenges in the United Arab Emirates

- ✓ Minimal availability of ready to use injectables:
 - Pre-filled syringes
 - vials vs. ampoules
 - Pre-mixes
- ✓ Lack of barcoding on all products
- ✓ Inability to outsource sterile compounding



Minimal Availability of Ready to Use Injectables

Enoxaparin Product Difference

Clexane®



Regular Needles

Lovenox®



Safety Needles

Batching Pre-filled Syringes

- ❖ Pharmacy batches several pre-filled syringes for Anesthesia:
 - NORepinephrine
 - nitroglycerin
 - EPINEPHrine
 - ePHEDrine
- ❖ Products look-alike which results in potential for mix-up



Batching Pre-filled Syringes

AUXILIARY LABELS



Batching Premixes



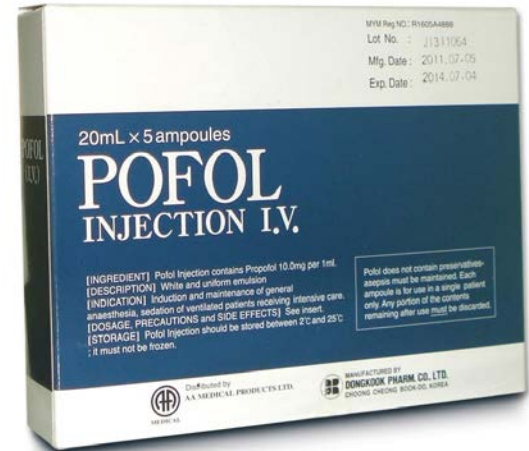
HydroMORPHONE 10 mg/mL

- ❖ Only strength available in the country up until 2015
- ❖ Imported directly from the United States at a unit-dose strength, however:
 1. Higher Cost
 2. Higher wastage due to short expiration/transport time
 3. Unsustainable stock due to UAE laws around ordering narcotics
- ❖ Unable to receive next batch until 2019
- ❖ Requires updating all our order sets each time a different strength is available



Propofol Ampoules

- ❖ Difficulty sustaining supply of vials and pre-filled syringes
- ❖ Majority of the stock is ampoules which are bulky and easy to break
- ❖ Mitigation was placement of Styrofoam pads in our Automated Pyxis Cabinets



Look-Alike Products



Lack of Barcoding on Products

No Barcoding on Products

❖ Majority of products we receive do not have a barcode from manufacturer

❖ Pharmacy barcode labels every single medication on formulary

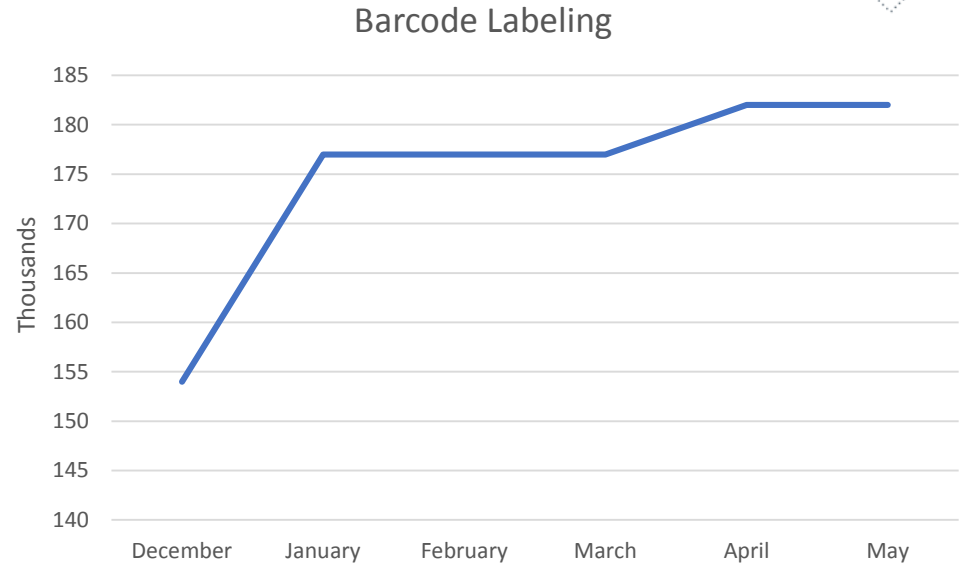
~1.6 K Medications

~175 K Labels/Month

❖ **DISADVANTAGES:**

- Manual process
- Potential for long label
- Cost with machines/labels

*46% of Injectables in IV Room
Don't have a barcode from
manufacturer*



Barcode Labeling in Pharmacy

- ❖ ADVANTAGES:
 - Uniform packaging:
 1. Green Rain Code (NDC)
 2. Expiration Date
 3. Lot Number
 - Tracking Recalls

midazolam
(DORMICUM)
5 mg/1 mL injection

Lot#UDC28E16M
Exp:31/07/2020

CDA



13921971006

imipramine
(IMIPRAMINE)
10 mg tablet

Lot#UDC20F16A
Exp:31/12/2016

CDB



99994224001

morphine sulphate
4 mg/mL injection

Lot#UDC01F16B
Exp:01/07/2017

High-Alert
NARC



19284817014

Barcode Labeling in Pharmacy

PHARMACY

Dispense Preparation Details

Prepared By: Carmela Mendoza at 29/05/2018 19:01

Ingredient	Medication Used	Scanned?	Charge Amount**	Expiration Date	Lot Number
fentaNYL 500 mcg/10 mL (50 mcg/mL) injection (INJ)	fentaNYL 500 mcg/10 mL (50 mcg/mL) injection (INJ) [H02-1851-02293-01]	Yes	50 mL	30/04/2019	UDC22E18B
	fentaNYL 500 mcg/10 mL (50 mcg/mL) injection (INJ) [H02-1851-02293-01]	Yes	--	30/04/2019	UDC22E18B
	fentaNYL 500 mcg/10 mL (50 mcg/mL) injection (INJ) [H02-1851-02293-01]	Yes	--	30/04/2019	UDC22E18B
	fentaNYL 500 mcg/10 mL (50 mcg/mL) injection (INJ) [H02-1851-02293-01]	Yes	--	30/04/2019	UDC22E18B
	fentaNYL 500 mcg/10 mL (50 mcg/mL) injection (INJ) [H02-1851-02293-01]	Yes	--	30/04/2019	UDC22E18B
0.9% NaCl continuous infusion (IV)	0.9% NaCl continuous infusion (IV) [1748-3991-022]	Yes	250 mL	31/07/2019	y256701

** Packages not used for charging are denoted with --

Warnings

Warning	Alert Type	Barcode Data	Action Taken	Override Reason
fentaNYL 500 mcg/10 mL (50 mcg/mL) injection (INJ) Too many packages have been scanned for fentaNYL 500 mcg/10 mL (50 mcg/mL) injection (INJ) (Quantity scanned: 3,000 mcg; Quantity needed: 2,500 mcg).	Too many packages scanned	H021851022930130/04/2019UDC22E18B	Cancel Warning	

Action Summary

Action User: Jonathan Labios, RN

Charge Status: Not charged because pharmacy is set to charge on dispense

Patient Class: Inpatient

Admin Date and Time: 04/06/18 06:00 (Edited)

[Full Administration Report](#)

Scanned Medication

heparin 5,000 unit/0.2 mL Soln

Barcode

O703376027210130/10/2020UD29E18V

Package

O70-3376-02721-01

Expiration Date

30/10/2020

Lot Number

UD29E18V

NURSING

IMSN Position Statement

IMSN Position Statement

- ❖ A comprehensive, worldwide solution to the problem of unsafe medicine naming, labeling and packaging is needed
- ❖ Regulations in all countries should be strengthened to:
 - Require better design and field testing of medicines naming, labeling and packaging before release for use
 - Incorporate human factors theory
 - Promote safer use in practice
- ❖ The pharmaceutical industry should ensure that products are safely named, labeled and packaged to minimize errors
- ❖ Healthcare providers should assess names, labels and packages, associated devices and software, before purchasing decisions are made so that risks may be identified, minimized or managed

Video of an Actual Event

<https://vimeo.com/242725788/dbc4d051c3>