

# Practice sting 2022-11

## Practice sting Medication patch not removed

A medication patch sometimes has to be removed immediately because of the occurrence of serious adverse effects. Last year, VMI received several reports in which the removal of the patch went wrong. The notification below is an example.

#### **Notification**

A patient with delirium was admitted to a hospital via the Emergency Department (ED). The patient had on his body a buprenorphine patch, prescribed by the general practitioner. In the emergency room, the physician decided to stop the use of the medication patch. A few days after admission to the ward, the nurses discovered that the medication patch was still on the patient's body. The delirium decreased rapidly after removal of the medication patch.

#### **Analysis**

A medication patch releases a constant amount of medicine per hour over a period of time. For example, there are buprenorphine patches for 3, 4 or 7 days. That means that after 3, 4 or 7 days the patch should be replaced with a new patch. Occasionally, premature removal of a patch is necessary due to adverse effects. Then, the physician must communicate to the nurses to remove the medication patch immediately. The physician or patient can also remove the patch immediately. Writing out a stop order for the medication patch by the physician is insufficient. With a stop order, the nurses are only instructed not to replace the patch with a new one.

## Recommendations

### For the medicine committee of a hospital or other healthcare institution

- Provide a procedure for the premature removal of medication patches.
- State in the procedure:
  - o How involved healthcare professionals find out where the patch is on the body.
  - o Who will remove the patch.
  - o How the communication (oral/written) between prescriber and nursing/care takes place.
  - o How and where is it recorded that the patch has been removed.