#### Alaris Guardrails Quick Overview for Staff Pharmacists

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## Objectives

- Provide information to pharmacists that may assist when a nurse calls with an issue with the guardrails. Ruth Kalish, RPh can be contacted with any items that require more assistance.
- Illustrate some features of the Alaris Guardrails
- Review recent changes within the Alaris Guardrails
- Review how a nurse would program Alteplase for Stroke within the Alaris Guardrails

**Guardrails**®



## **Nursing Resources**

- Pharmacy website under "Nursing Hot List" contains the latest guardrails and overview of recent changes
- Information on how to program the pump for Alteplase under "Anticoagulation & Heparin Resources"
- On Nursing website (nursing.uchc.edu) has PCA information:
  - <u>http://nursing.uchc.edu/nursing\_standards/docs/Alaris</u>
    <u>%20System%20Implementation.pdf</u>
  - <u>http://nursing.uchc.edu/nursing\_standards/docs/PCA</u>
    <u>%20Pocket%20Guide.pdf</u>



## **Current Library Version?**

 In order to determine the current version of the library, it will appear in the corner under module selection. Nurses must power down the pump in order to get the current library so it can connect

to wifi.

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## Modules

- Various areas have specific modules that contain medications specific to that area. At UConn, we have the following:
  - Adult Critical Care
  - Anesthesia
  - Med/Surg
  - OB/LD
  - Oncology
  - OP Cancer Center
  - OP Infusion Center
  - Pediatrics





## **Basic Infusion**

 Medications can be run outside of the guardrails under basic infusion. This is highly discouraged as there is no clinical checking.





# IV Fluids



- This would be used for large volume parenterals (e.g. TPN, Lipids, hydration).
- Any hydration that does not contain a medication can be run under the
  - ..Maintenance Fluid entry
- VTBI = Volume to Be Infused

# Drug Library



- These are all the Drugs available within that module
- It is in alphabetical listings and contains medications that are given continuously and intermittently.





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## Drug Library

Certain medications may already have dosing units programmed (e.g. Vancomycin) whereas others the nurse will need to program in (e.g. Alteplase for stroke).

Alaris<sup>®</sup> PC

Yes

No

mL

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O 5Y5

 Some medications can have both selections (e.g. Rituximab).







## Continuous Infusion (CI) vs Intermittent Infusion (II)

 Medications are programmed into Guardrails dependent upon if a product is administered continuously or as an intermittent infusion. This does not apply to Patient Controlled Analgesia (PCA) or IV Fluids

2.1.1 Continuous/Bolus - N	on-/	Ane	sthesi	a Drugs													
				Continuous/Bo	olus - No	on-Anes	thesia D	rugs - A	dult Crit	ical Car	е						
Drug Name	Mo	dule	Conc. Limits	Dosing Units		Conti	nuous			Во	lus		Bolus	s Dose A Ra		ration	Clinical Ads.
Therapy Concentrations	Р	s			Soft Min	Soft Max	Hard Max	Initial Value	Soft Min	Soft Max	Hard Max	Initial Value	Soft Min	Soft Max	Hard Max	Initial Value	Name
abciximab	v		n/a	Continuous mcg/kg/min	0.05	0.13	1	0.125		-	- 1	-				-	Filter
9 mg / 250 mL (0.036 mg / mL)	X																

2.1.5 Intermitter	nt Dr	ugs																
							Intermittent Drugs -	Adul	t Crit	tical (	Care							
		ilable \s	Tota	al Dose					Mod	lule		Duration			ncentra			Clinical Ads.
Drug Name Therapy	Pri.	Sec.	Dosing Units		Soft Max		Concentrations		Р	s	Hard Min	Soft Min	Initial Value		Hard Min	Soft Min	Soft Max	Name
acetaminophen	x	х	mg	500	1000	1	1,000 mg / 100 mL (10 mg / mL) mg / mL		X X		Ä		00:15	n/a 	n/a -	n/a 	n/a 	-



## **Dosing Units**

 Medications can be programmed in the guardrails based on BSA, body weight or just the dose (e.g. mg, Gm). Below illustrates inputting of a weight-based dosing medication.





## Therapies

- A medication may be grouped in such a way that the nurse needs to identify the indication, route, dosing interval, etc. in order to proceed.
- The benefit of this is that it lessens the amount of scrolling throughout the library and provides clinical standards based on each selection.

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## **Clinical Advisories**

 When a certain medication is picked, there are alerts/advisories that will appear to the nurse asking them to confirm (filter, high alert, LASA, etc.). Below are some examples:







## Soft and Hard Stops

- The pump has settings that are either a hard or soft stop.
- A soft stop can be acknowledged and then able to proceed
- A hard stop cannot be bypassed and could require an additional pump or an immediate update to the library if this does occur and was verified as such. Be sure to check the guardrails library on the pharmacy website if you do have an issue to see the parameters.



## Patient Controlled Analgesia (PCA)

### Refer to the nursing website for further information on PCA programming

		PC	A Drugs -	Adult Critica	al Care		
Drug Name Therapy HYDROmor PCA 1mg/mL		ntration					
Concentration Limits	Co	onc. Un	its	Hard Mi	n	Soft Min	Soft Max
Limits	Hard Min	n/a Soft Min	Soft Max	n/a Hard Max	Initial Value	n/a PCA Pause Proto No	n/a col:
PCA Dose	n/a	0.2	5	10		Dosing Units	
Continuous Dose / h	n/a	0.5	10	12		mg	
Bolus Dose	n/a	1	-		n/a	Max Accum. Inclu	des Bolus?
Loading Dose	n/a	-	-		n/a	No	
_ockout Interval (minutes)	5	6	30	n/a	-	Clinical Advisory	
Max Acc. Dose Range / 1 h	n/a						
nak nee. Deee nanger i n	11/d	1.2	15	30	-	Double Check by 2	RN
Drug Name Therapy	Concer	PC	A Drugs -	Adult Critica			RN
Drug Name	Concer 10 mg /	PC ntration / 50 mL	A Drugs - , s: (0.2 mg / m	Adult Critica	al Care		
Drug Name Therapy	Concer 10 mg /	PC ntration 50 mL	A Drugs - , s: (0.2 mg / m	Adult Critica L) Hard Min	al Care	Soft Min	Soft Max
Drug Name Therapy HYDROmor PCA0.2mg/mL	Concer 10 mg /	PC ntration / 50 mL	A Drugs - , s: (0.2 mg / m	Adult Critica	al Care		Soft Max n/a
Drug Name Therapy HYDROmor PCA0.2mg/mL Concentration Limits Limits PCA Dose	Concer 10 mg / Co	PC ntration / 50 mL onc. Un n/a Soft Min 0.05	A Drugs - s: (0.2 mg / m its Soft Max	Adult Critica L) Hard Mir n/a Hard Max 2	al Care n Initial	Soft Min n/a PCA Pause Proto No Dosing Units	Soft Max n/a
Drug Name Therapy HYDROmor PCA0.2mg/mL Concentration Limits Limits PCA Dose Continuous Dose / h	Concei 10 mg / Co Hard Min n/a	PC ntration / 50 mL / onc. Un n/a Soft Min	A Drugs - s: (0.2 mg / m its Soft Max	Adult Critica L) Hard Min n/a Hard Max	n Initial Value	Soft Min n/a PCA Pause Proto No Dosing Units mg	Soft Max n/a col:
Drug Name Therapy HYDROmor PCA0.2mg/mL Concentration Limits Limits PCA Dose Continuous Dose / h Bolus Dose	Concer 10 mg / Co Hard Min	PC ntration / 50 mL onc. Un n/a Soft Min 0.05	A Drugs - s: (0.2 mg / m its Soft Max	Adult Critica L) Hard Mir n/a Hard Max 2	n Initial Value	Soft Min n/a PCA Pause Proto No Dosing Units mg Max Accum. Inclu	Soft Max n/a col:
Drug Name Therapy HYDROmor PCA0.2mg/mL Concentration Limits Limits PCA Dose Continuous Dose / h Bolus Dose Loading Dose	Concei 10 mg / Co Hard Min n/a n/a n/a n/a	PC ntration 50 mL 50 mL n/a Soft Min 0.05 0.1 -	A Drugs - s: (0.2 mg / m its Soft Max 1 2 -	Adult Critica L) Hard Min n/a Hard Max 2 3 	al Care	Soft Min n/a PCA Pause Proto No Dosing Units mg Max Accum. Inclu No	Soft Max n/a col:
Drug Name Therapy HYDROmor PCA0.2mg/mL Concentration Limits Limits PCA Dose Continuous Dose / h Bolus Dose	Concer 10 mg / Hard Min n/a n/a	PC ntration / 50 mL onc. Un n/a Soft Min 0.05 0.1 -	A Drugs - s: (0.2 mg / m its Soft Max	Adult Critica L) Hard Mir n/a Hard Max 2	al Care	Soft Min n/a PCA Pause Proto No Dosing Units mg Max Accum. Inclu	Soft Max n/a col: ides Bolus? Name

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#### Alaris Guardrail Update

3-16-2016

If a pump has a **red** sticker, it has been updated with the latest library that is "UConn 3-16-2016." After this week, all pumps should have the latest library for usage.



Some of the changes include:

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- New Modules for ACCU (OP Infusion Center) and Cancer Center (OP Cancer Center)
- Therapy identified medications to make sure the appropriate indication is picked for the medication. These include Aleplase, Heparin, Dobutamine, Dopamine, Potassium Chloride etc. Picture below details what a therapy medication looks like.
- New medications added (IdaruCIZUMAB, nivolumab, etc)
- · HYDROmorphine and Morphine indicate the concentration rather than Naïve or Tolerant



Any updates with the Guardrails will be communicated out to the nursing and pharmacy staff. This flyer describes the most recent change.



## Alteplase for Stroke in Guardrails



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Please contact Ruth Kalish at <u>rkalish@uchc.edu</u> if you have any questions on this presentation

