



CLINICAL POLICY
PHARMACY SERVICE POLICY
Oral Syringe Preparation

A. EFFECTIVE DATE :

March 16, 2021

B. PURPOSE :

The purpose of oral syringe preparation is to ensure the quality and safety of the products prepared by establishing a documented checking procedure.

C. POLICY :

All employees of the Department of Pharmacy will adhere to the procedure outlined below.

D. SCOPE :

This policy applies to oral syringe medication distributed from the Department of Pharmacy at John Dempsey Hospital.

E. DEFINITIONS :

Medication Repackaging: the act of taking a finished drug product from the container in which it was distributed by the original manufacturer and placing it into a different container without further manipulation of the drug.

F. MATERIAL(S) NEEDED :

1. Epic® EMR software/Dispense Preparation feature
2. Oral Syringes

G. PROCEDURE :

1. All oral syringe preparation shall be performed in the designated area of the Pharmacy, which should be maintained in a neat, orderly condition. No food or drink in the repackaging area.
2. Disposable gloves must be worn when preparing oral syringe medications.
3. All medications orders to be prepared in oral syringes will be automatically generated through EMR Epic® system.

4. All medications requiring reconstitution or repackaging from original container to aid in dispensing must be processed using the compounding and repackaging feature of the Epic® EMR system, prior to use on any patient.
 - 4.1. Two pharmacists should sign off if product is to be used on NICU patients unless only one pharmacist is available (overnight shift) or in an emergent use situation.
5. Designated technician draws up the daily batch of oral syringes to exact dose volume.
 - 5.1. 6 months beyond use dating is standard on all original plastic container products going into a plastic syringe unless the manufacturer's date is sooner.
 - 5.2. Technician will draw up Oral syringes using Dispense Preparation feature of the Epic®EMR system.
 - 5.3. Affix a label containing at least 2 patient identifiers and a barcode to the syringe in an aesthetically pleasing manner so volume in syringe can be observed.
 - 5.4. All oral syringes are placed beside the bulk bottles to be checked by the pharmacist.
6. The Pharmacist checks each syringe thoroughly for correct drug, concentration, calculation of dosing, labeling, and expiration using Dispense Checking feature of the Epic®EMR system. The syringe is then initialed by the checking pharmacist(s) to indicate that prepared dose is ready to be dispensed.
 - 6.1. Two pharmacists must check and initial all oral products prepared for NICU patients unless only one pharmacist is available.
7. Unless oral syringes are needed prior to scheduled cart exchange delivery, the completed syringes are then placed into the front pharmacy refrigerator (if storage condition warrants) or room temperature designated delivery bins while awaiting delivery.
8. Returned and unused syringes must be discarded through appropriate waste system. Syringes are not to be dismantled and added back to bulk solution bottles under any circumstances

H. ATTACHMENTS

None

I. REFERENCES :

United States Pharmacopeia (USP).

J. SEARCH WORDS :

Oral syringe

K. ENFORCEMENT:

Violations of this policy or associated procedures may result in appropriate disciplinary measures in accordance with University By-Laws, General Rules of Conduct for All University Employees, applicable collective bargaining agreements, the University of Connecticut Student Code, other applicable University Policies, or as outlined in any procedures document related to this policy.

L. STAKEHOLDER APPROVALS :

On File

M. COMMITTEE APPROVALS :

None

N. FINAL APPROVAL :

- | | |
|--|---------------------------|
| 1. <u>Andrew Agwunobi, MD (Signed)</u>
Andrew Agwunobi, MD, MBA
UConn Health Chief Executive Officer | <u>03/24/2021</u>
Date |
| 2. <u>Anne D. Horbatuck (Signed)</u>
Anne D. Horbatuck, RN, BSN, MBA
Clinical Policy Committee Co-Chair | <u>03/24/2021</u>
Date |
| 3. <u>Scott Allen, MD (Signed)</u>
Scott Allen, MD
Clinical Policy Committee Co-Chair | <u>03/23/2021</u>
Date |
| 4. <u>Caryl Ryan (Signed)</u>
Caryl Ryan, MS, BSN, RN
VP Quality and Patient Services & Chief Nursing Officer | <u>03/23/2021</u>
Date |

O. REVISION HISTORY :

Date Issued: 2/28/89

Date Reviewed: 12/29/2014, 11/27/17

Date Revised: 11/8/90, 12/15/92, 11/12/93, 9/27/94, 11/20/97, 12/20/01, 10/20/03, 9/02/10, 11/27/17,
3/16/2021