HIGH DESERT HEALTH SYSTEM
AMBULATORY SURGICAL CENTER

SUBJECT: XI-124 ANESTHESIA MEDICATIONS HANDLING AND LABELING	**POLICY #**: 1079
	VERSION: 1
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DATE APPROVED: 09/15/2017	

PURPOSE: To ensure all medications in the perioperative and other procedural settings are properly identified and labeled when drawn into syringes and into solutions, thereby reduce the risk of unsafe medication practice.

POLICY: In the perioperative and other procedural settings, all medications removed from their original vials that are not immediately administered and placed into and unlabeled syringe shall be labeled.

DEFINITION:

- **Immediately administered medication** - one that an authorized staff member prepares or obtains, takes directly to a patient, and administers to that patient without any break in the process.

PROCEDURE:

1. Check the medication to be sure it is the correct one. Check ampule's expiration date ampule/vial contents are no cloudy or discolored.
2. Wipe top of vial with alcohol swab and draw up the medication in a clean syringe.
3. Double check the medication name, concentration and expiration date.
4. Identify the syringe with the label that corresponds with the medication drawn up.
5. Label all medications:
    a. Immediately after the medication is drawn into syringes or solutions containing medications
    b. Even if only one medication is being used
    c. No more than one medication or solution is labeled at one time
    d. All labeled syringes/solutions are to be discarded at the conclusion of the surgical case and before the patient leaves the OR suite

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e. Syringes/solutions found unlabeled on anesthesia cart must be immediately discarded

6. Labels must include:

   a. Drug name

   b. Strength

   c. Date of drawing

   d. Initials of the anesthesia provider who drew up the medication

   e. Amount (if not apparent from the container – applies to medications added to IV solutions)

7. Fluid Preparation: All opened IV fluids will be labeled with date, time, and patient name and MRUN number. All intravenous admixture solutions should be labeled with medications added, concentration and date of preparation.

8. Document medications given at time of administration on the anesthesia record, as well as the total dose at the end of the case.

9. Discard any draw-up medication no given at the end of each case. Do not use the same syringe for different medications; do not use the same syringe for different patients.

10. Discard syringes and needles into the appropriate sharps container.

11. Do no recap if needle used to administer medication, unless there is no feasible alternative (recap with mechanical device or one-handed technique).

12. All medication syringes prepared for the subsequent case must be stored in a locked anesthesia cart when leaving the room unattended.

13. Anesthesia Pyxis containing drugs, syringes and needles must be locked at the end of the day and whenever anesthesia personnel are not in attendance. Monitoring is performed to ensure compliance.

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REFERENCES:

- Joint Commission National Patient Safety Goals 2017 – NPSG.03.04.01,
- Joint Commission Perspectives on Patient Safety, July 2008, Volume 8 Issue 7.
- NPS Goal 3.04.01FAQ's.

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