



Department of Nursing POLICY AND PROCEDURE

POLICY NUMBER: 769
VERSION: 1

SUBJECT: COMPOUNDING STERILE PREPARATIONS

PURPOSE: To prepare compounded sterile preparations (CSPs) of high quality and reduce the potential for patient harm.

POLICY: Licensed nurses, as permitted by The California Nursing Practice Act, may prepare CSP for immediate use only

DEFINITIONS:

Immediate Use CSP: No more than 1 hour elapses from the time compounding commences to the time administration to the patient begins. Best practice indicates that there are no intervening steps between compounding and administration.

PROCEDURE:

1. Immediate use compounding applies to any CSP for parenteral administration (IM, IV, SC, and inhalation) prepared outside of the pharmacy. The procedure consists of the simple transfer of no more than 3 sterile, non-hazardous drugs in the manufacturer's original containers, and no more than 2 entries into any one container.
2. Medication preparation areas should be clean, uncluttered, and with low traffic flow.
3. Before compounding, appropriate hand hygiene must be performed. Garbing (mask, hair covering, shoe covers) or gowning is not necessary.
4. Ideal aseptic technique shall be used to minimize contamination; including swiping with isopropyl alcohol on crucial sites and the use of filter needles for ampules.
 - a. Wipe rubber stoppers of vials and necks of ampules with sterile isopropyl alcohol, and wait at least 10 seconds before using them.
5. The compounded preparation shall be kept with the compounder or within close proximity until administered.
6. The compounded preparation must be appropriately disposed of if not used within 1 hour.
7. The container must be labeled with the name of the medication, diluent, date and time prepared, concentration, and initials of compounder.

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8. Visually inspect CSP before administration:
 - a. Ensure there are no chunks or floaters which might be a sign of drug incompatibility, defective drug product, or of coring of a vial's stopper. If this occurs, discard and remake a new preparation.
 - b. Note if preparation is an odd color. Often the product's package insert will indicate whether a color change is a concern or not.
 - c. Ensure that the final product contains the expected volume.

REFERENCES:

American Society of Health-System Pharmacists, ASHP Guidelines on Compounding Sterile Preparations, *Drug Distribution and Control: Preparation and Handling Guidelines*, 2013

University of Kentucky Hospital – Chandler Medical Center, Department of Pharmacy Policy, *Beyond Use Dating and Labeling*, 2012

<http://pharmacistsletter.therapeuticresearch.com/ce/ceCourse.aspx?cs>

Approved By: Susan Knapp (CHIEF NURSING OFFICER I)	
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