LAC+USC MEDICAL CENTER POLICY

Subject:	Original Issue Date:	Policy #
WORKFLOW MANAGEMENT SOFTWARE DURING STERILE COMPOUNDING	12/1/17	**941**
	Supersedes: 12/1/17	Effective Date: 11/16/20

Departments Consulted:	Reviewed & Approved by:	Approved by:
P&T Committee	Attending Staff Association Executive Committee Senior Executive Council	(Signature on File) Chief Medical Officer
		(Signature on File) Chief Executive Officer

PURPOSE

A. When used during sterile compounding, workflow management software is designed to improve safety and accuracy, decrease waste, and generate retrievable logs and reports.

B. This policy establishes procedures for use of workflow management software during sterile compounding, in compliance with relevant laws and regulations.

DEFINITIONS

- BD Cato™: a brand of workflow management software
- CSP: compounded sterile product
- EHR: electronic health record
- Pharmacy personnel: licensed pharmacy technician or pharmacist

POLICY

A. The Chemotherapy Pharmacy is responsible for preparing a variety of compound sterile preparations (CSPs) including chemotherapy medications, biologic medications, hazardous medications, and supportive care medications. Whenever possible, the Chemotherapy Pharmacy must use BD Cato software for sterile compounding set-up, preparation, and verification.

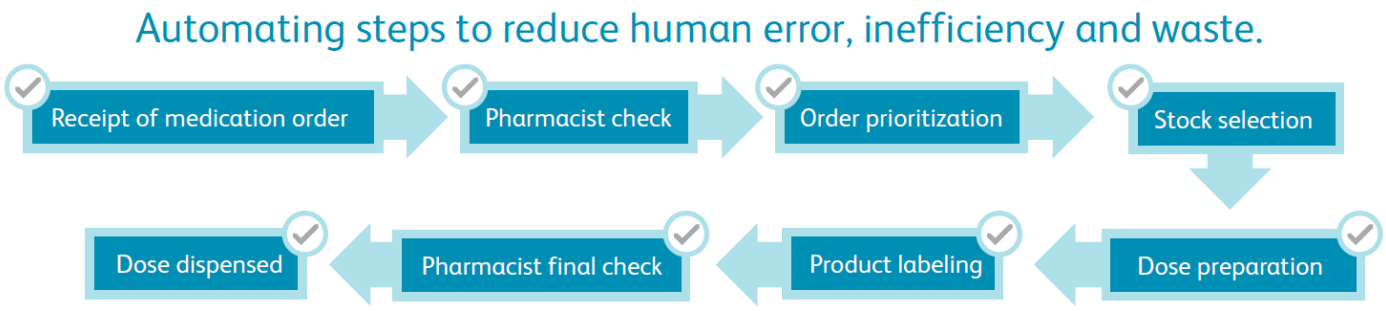
B. In addition to the following requirements, all relevant clauses of Pharmacy Department policy 226, “Compounded Sterile Preparations,” and Medical Center policy # 947, “Hazardous Medications,” must be followed.

C. The following procedure describes the integration of BD Cato software into the compounding process.

1. The product to be compounded will be released from the Orchid EHR to the BD Cato set-up queue only after pharmacist verification of the original medication order.

2. **Set-Up.** The product to be compounded will be selected from the BD Cato set-up queue by pharmacy personnel.
    a. After selection, BD Cato automatically assigns product vials, diluents, and containers to be used. Pharmacy personnel may assign alternative product vials, diluents, or containers to be used when necessary.
    b. Pharmacy personnel must collect the assigned ingredients, place them together in a single medication bin, and then introduce them into the cleanroom.
3. **Preparation.** The product to be compounded will be selected from the BD Cato preparation queue by pharmacy personnel.
    a. After selection, BD Cato provides on-screen compounding and documentation instructions. Pharmacy personnel must follow all on-screen instructions including capture of barcode, photographic, and gravimetric evidence. Pharmacy personnel must meet all minimum accuracy specifications.
    b. The Pharmacy Department Master Formula Record provides a comprehensive description of compounding steps and special requirements, and pharmacy personnel must reference the Master Formula Record when necessary to compound in an accurate and complete manner.
    c. Once all on-screen instructions are complete, the pharmacy personnel who compounded the CSP must immediately affix the initial unverified medication label to the CSP and return the CSP to its medication bin pending pharmacist verification.
4. **Verification.** The CSP will be selected from the BD Cato medication queue by the pharmacist, who may be located in an area physically distant from the compounding area.
    a. After selection, BD Cato will provide access to photographic, gravimetric, and textual documentation of the sterile compounding process. The pharmacist will review the documentation for accuracy and completeness.
    b. If the CSP is deemed appropriate as compounded, then the pharmacist will accept verification. If the CSP is deemed inappropriate as compounded, then the pharmacist will reject verification and resolve all deficiencies with the pharmacy personnel who compounded the CSP.

5. **Release.** The CSP will be scanned by pharmacy personnel and have the final verified medication label immediately affixed over the initial unverified medication label before dispensing.



Training of Personnel

A. Prior to using BD Cato software, pharmacy personnel must be fully trained in such use. This training includes:
   1. Review of this policy
   2. Successful completion of all role-specific BD Cato training modules provided by the BD Learning Compass
   3. Experiential instruction under fully trained pharmacy personnel for a minimum of two hours

B. A record of fully trained pharmacy personnel is continuously maintained.

Quality Assurance

A. The BD Cato medication database must be developed and maintained only by pharmacists having sufficient experience with the medications of interest. New medication entries must be verified by two independent pharmacists before release to production.

B. Pharmacy personnel must verify accuracy of the balance used for gravimetric documentation using a standard weight set on a weekly basis. An accuracy tolerance of 2% will be considered acceptable. The results of this verification will be documented in a logbook and maintained for at least three years.

C. A technician will calibrate the balance used for gravimetric documentation at least annually and whenever the accuracy tolerance is exceeded.

RESPONSIBILITY

Pharmacy Department

REFERENCES

- American Society of Health-System Pharmacists (ASHP) Section of Pharmacy Informatics and Technology Report on Current State of IV Workflow Systems and IV Robotics
- BD Cato Dose Verification: Quick Training Guide
- BD Cato Pharmacy Technician Workflows: Quick Training Guide

REVISION DATES

November 16, 2020