

# PARENTERAL PATHWAYS

Volume 1, Issue 2

SUMMER 2008

## Keeping It Clean

HPS Pharmacy operates by USP-797



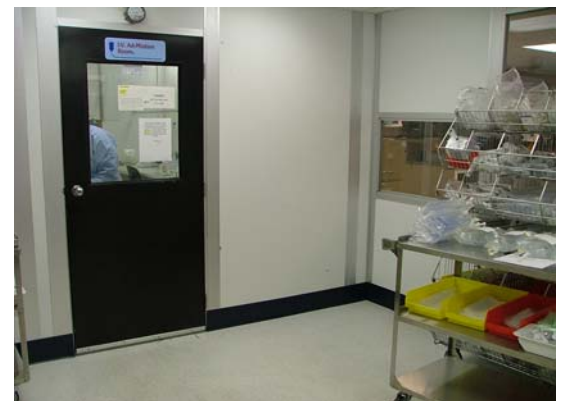
Anyone who receives medications from a pharmacy wants to be assured their drugs were prepared in a clean and sterile environment. Home Parenteral Services' pharmacy is currently practicing the guidelines of USP-797 to ensure patients and their medications are kept safe. USP-797 is a set of enforceable procedural guidelines and practical requirements that infusion-pharmacies must follow for safe mixing of sterile drugs. The purpose of USP-797 is to prevent harm to patients

that could result from bacterial contamination where compounded sterile medications are prepared. There are hundreds of USP drug standards and all standards numbered less than 1,000, including USP-797, are enforceable by either individual state boards of pharmacy or the Food and Drug Administration.

The Joint Commission for Accreditation of Healthcare Organizations (JCAHO), the most universally recognized standard of US



healthcare systems for quality, states that compliance with USP-797 is required by all infusion pharmacies. Sterility and stability are the main focal points of USP-797. Sterility is essential to have the proper clean environment to mix the drug and is necessary while mixing. Touch contamination is one of the top reasons there are IV line infections in patients. Home Parenteral Services continually tests for bacterial contamination in the pharmacy by surface sampling of mixing areas and other components in the mixing room. HPS also tests for bacteria by fingertip sampling of indi-



## PARENTERAL PATHWAYS

### Keeping It Clean *continued*

viduals mixing medicine to ensure sterility. Stability is essential for proper storage of medications after mixing. Home Parenteral Services is one of the few infusion pharmacies with a complete laminar air flow clean room. The air in this room is Hepa filtered. Every precaution is taken by staff to minimize particle introduction into the clean room. This includes extensive gowning and gloving of staff and continual cleaning of equipment as well as supplies allowed into the clean room. Thorough hand washing is one of the most critical steps to the USP-797 guidelines. Home Parenteral Services is dedicated to patient safety. The addition of these new pharmacy guidelines ensures HPS' pharmacy is sterile and accurate in mixing patient medications.



### Top 5 Reasons to use the Ambulatory Infusion Center:

1. Convenient and Accessible
2. Extended hours to accommodate work schedules.
3. Expert staff with high skill level.
4. Easy scheduling and registration for quick service.
5. Alternative to Part D for IV coverage.

For more information on the Ambulatory Infusion Center please call 417-269-2058.

## HPS Utilizes New Technology for PICC Lines

New technology and standards have been introduced to improve outcomes for patients requiring infusion therapy. HPS has evaluated the standards and some of the new technology this past year and is in the process of making several changes. All changes will affect HPS patients receiving infusion therapy.

1. StatLock Securement Device: The Infusion Nurses Society standards of practice and the CDC Guidelines for Prevention of Intravascular Catheter-Related Infections recommend that a mechanical securement device be utilized to secure

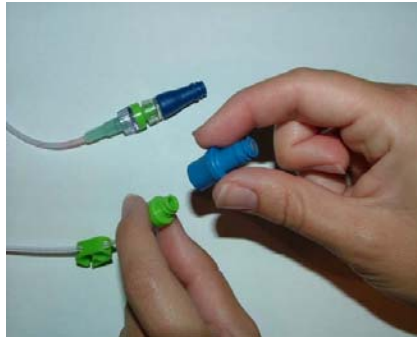
PICC lines. The StatLock mechanical device is designed to secure PICC lines without tape or invasive suture. Widely published clinical studies have shown StatLock products improve catheter dwell times and have demonstrated that the devices reduce catheter-related complications such as phlebitis and infiltration by restricting catheter micro-movements. StatLock also provides substantial cost savings in materials and labor compared to tape. HPS implemented the use of the StatLock securement device for PICC lines in June 2008. The StatLock device will be included

in patient supplies and should be routinely changed one time per week with routine dressing changes.

2. LifeShield TKO: Blood reflux in the catheter is a root cause of many vascular access device (VAD) complications, including intraluminal thrombotic occlusion, thrombotic sheath, infiltration and catheter related bloodstream infections. All of these potential complications cause a delay in therapy, expensive thrombolytic medications and increased nursing time. Needle free technology (specifically injection caps) has been shown to cause an in-

### HPS Utilizes New Technology for PICC Lines<sup>CONTINUED</sup>

crease in blood reflux. The LifeShield TKO injection cap is designed with anti-reflux technology reducing the incidence of blood reflux. The injection cap is pressure activated which acts as an automatic clamp thereby removing the need to clamp the VAD. The injection cap attaches to any standard luer connector. Currently the device requires two connections. A future model will meld the two pieces together for a one piece device. Due to the pressure activation of the injection cap, Heparin is not required as a final flush. VADs, with the exception of Port-a-Caths, will require a final flush of normal saline (NS) only. The recommended final flush is 10ml NS after infusions and 20ml after blood draws. The



device should be routinely changed one time per week with routine dressing changes. HPS plans to implement the LifeShield TKO injection cap August 4, 2008.

3. Heparin and Saline: The process of flushing VADs has raised many issues in the past years. The Infusion Nurses Society (INS) re-

cently published flushing guidelines for all VADs. These new guidelines recommend that where Heparin flushes are required the concentration should be 10unit/ml 5ml for all VADs with the exception of Port-a-Caths where the concentration should remain 100unit/ml 5ml.

Due to the USP 797 pharmacy requirements HPS will no longer utilize the "bag flush" system for Heparin and saline. All Heparin and saline will now be provided in prefilled syringes. These new policies will also be implemented August 4, 2008.

If you have any questions or comments regarding these new changes or would like an inservice please feel free to call at 800-637-9201.

## Employee assists HPS with nutritional support

HPS sees a wide variety of patients. Some patients need specific nutritional guidance while receiving infusion therapy. Ann Weiss, HPS' registered and licensed dietitian, is called to assist patients in management of enteral and parenteral therapy. Ann has worked for CoxHealth 13 years at Metabolic Support. The most rewarding part of her job is finding a clinical solution for patients so that their health continues to improve. Ann is credentialed with the National Board of Nutritional Support Certification and is a member of the American Society of Parenteral and Enteral Nutrition. When not at work, Ann enjoys volunteering, traveling



with her husband to visit family throughout Missouri, hiking, as well as a variety of other hobbies.



2220 W. Sunset  
Springfield, MO 65807  
Springfield 417/ 887-7525  
Joplin 417/ 781-3773



Address Service Requested

SUMMER 2008

## HPS receives grant from Missouri Foundation for Health

Home Parenteral Services was recently the recipient of a 2 year, 200,000 dollar grant from the Missouri Foundation for Health. The grant is intended to provide home infusion therapy to patients in Missouri that have no payer source. Home Parenteral Services is providing the medicine, supplies, infusion pump, and arranging the nursing care which is all covered under the grant. The cost of all medication, supplies, and nursing is provided at cost or very near cost to make this valuable benefit available to as many people as possible in Southwest Missouri. Home Parenteral Services is excited about the opportunities this grant will present. Providing high quality care continues to be the mission of HPS, and this grant will help patients who might have had to opt for less expensive treatment options.

Parenteral Pathways is published quarterly for health professionals involved in parenteral and enteral therapy in the Springfield/ Joplin area. Please direct questions and comments to Lynn Kelley, Home Parenteral Services, an affiliate of CoxHealth.

