# EVALUATION OF COMPOUNDING QUALITY OF INTRAVENOUS ADMIXTURES

Tomás Luiz A, Pellicer Franco C, Ruiz Jimenez MM, Almanchel Rivadeneyra M, Carmona Mateo J, De la Rubia Nieto MA.

Hospital Clínico Universitario Virgen de la Arrixaca

#### **BACKGROUND**

According to guides it's necessary to ensure compounding quality of intravenous admixtures in Pharmacy Services.

## **OBJECTIVE**

To evaluate the compounding quality of intravenous admixtures.

### **METHODS**

A retrospective observational study from 1 to 15 of August 2015. It was revised every "check list" done by technicians. It was established the following standards errors and its severity: drug / concentration missed or wrong (low gravity), total / ml dose error (high gravity), mismatch between real and theoretical surplus milliliters (high gravity), batch and expiration date missed (high gravity), checklist specification missed (moderate severity), and signature of the technicians who prepares and checks missed (low gravity).

#### RESULTS

It was prepared and checked 215 sterile intravenous admixtures (100%). It was observed that 20.47% "check lists" were poorly completed. It was detected the following errors: 17 (7.9%) drug / concentration missed or wrong, 26 (12.09%) total / ml dose error, 26 (12.09%) mismatch between real and theoretical surplus milliliters, 1 (0.47%) batch and expiration date missed. Twenty percent errors were done by the technicians who elaborates the sterile intravenous preparations and 12,56% by the technicians who checks. The severity of the errors was: 24.65% high and 7.9% low.

215
Sterile intravenous admixtures prepared and checked

70 errors

Drug / concentration missed or wrong

Total / ml dose error

Mismatch between real and theoretical surplus milliliters

Batch and expiration date missed

#### CONCLUSIONS

The quality of 20.47% preparations wasn't be followed so it should be reviewed the causes of poor filling and take steps to improve the indicator obtained; for that are planned training sessions for technicians about sterile areas getting deeper into the sterile intravenous admixtures correct elaboration and preparation quality control. Also, it's established a staff periodic evaluation to accredit them.

