

# Time-delay reduction in the chemotherapy administration after optimizing the preparation / dispensing circuit of parenteral antineoplastics

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## BACKGROUND

Separation between the Chemotherapy Unit and the Day Hospital Unit makes rapid treatment of onco-hematologic patients difficult.

## PURPOSE

To optimize the sequence of dispensing parenteral antineoplastic mixtures when there is relevant physical separation between the Chemotherapy Unit (CU) of the Pharmacy Department and the Day Hospital Unit (DHU) where these treatments are administered to onco-hematologic patients.

## MATERIAL AND METHODS

Stability review of antineoplastic mixtures

Uptodate protocol in Oncofarm® program

Efficiency

➔ Delay between confirming prescription and administration

### Pharmacotherapeutics Schemes (PS) classification

Type I

BT, MV and CA: Same day

Type II

BT day 1; MV and CA: Next day

Type III

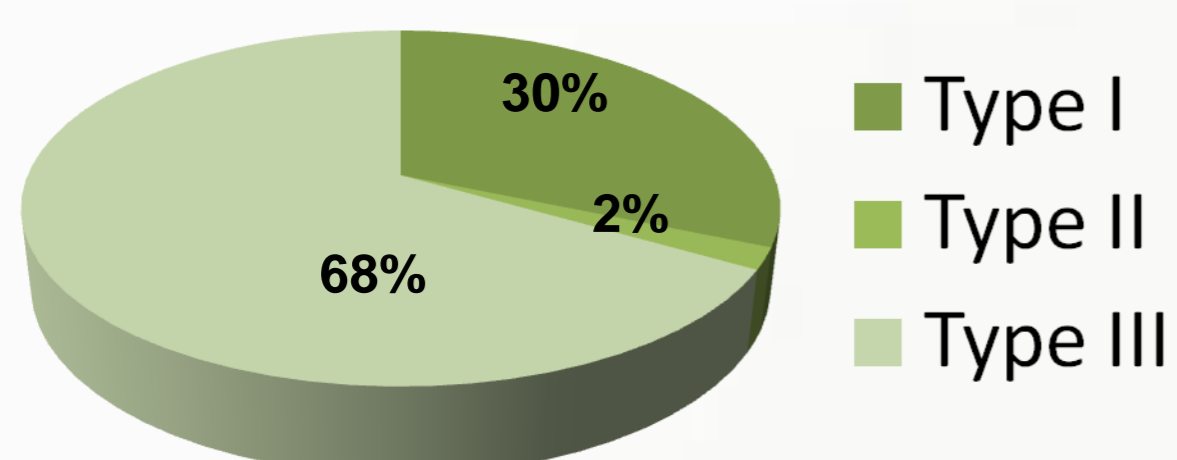
BT and MV day 1; CA: Next day

BT: Blood Test; MV: Medical Visit; CA: Chemotherapy Administration

## RESULTS

➤ Stability of 54 mixtures reviewed

➤ 482 protocols analyzed



Efficiency

3 months period  
552 patients; 1023 mixtures

- ✘ Stability reviewed: 28 new protocols prepared in the day before the administration
- ✘ Average delay: 2:23h (SD: 0:37h)
- ✘ Level of compliance: 100%

## CONCLUSIONS

The reorganization of the antineoplastic preparation process based on the updated stability data made it possible to dispense the mixtures of PS prescribed for type II and III patients at the best time. This ensured optimum services to health professionals and patient satisfaction.