

# IMPLEMENTATION OF CPFARMA® SOFTWARE TO OPTIMIZE THE MANAGEMENT OF MAGISTRAL FORMULATION IN A TERTIARY UNIVERSITY HOSPITAL

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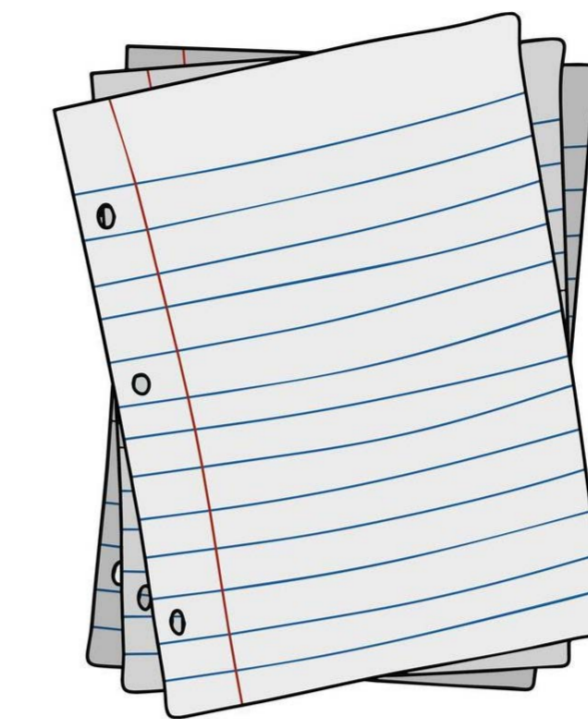


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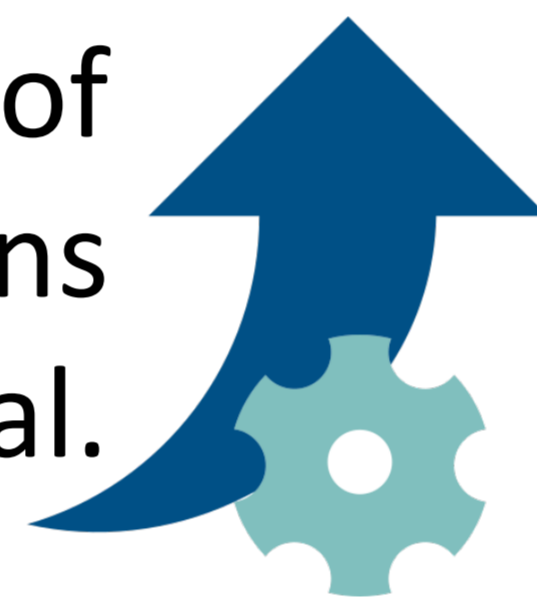
## WHY WAS IT DONE?

The pharmacist is responsible for **magistral formulations** in hospitals. Paper-based methods can lead to errors so the **software** was integrated between 07/2022-06/2023 aiming to reduce human errors, optimize preparation times, standardize procedures, improve stock management, formula traceability and enable statistical analysis capabilities of the area.



## WHAT WAS DONE?

CPFarma® software was implemented to **CONTROL** the programming, preparation, validation, and dispensing of magistral formulas. It facilitated **proper management** of the processes involved in galenic preparations at a tertiary-level university hospital.



## HOW WAS IT DONE?

1. Creation of user accounts and permissions.
2. Introduction of active pharmaceutical ingredients and raw materials, including batch and expiry details.
3. Inclusion of packaging materials, tools and required clothing for each preparation.
4. Transfer of **Standard Operating Procedures (SOPs)** in three phases:
  - a. Integration of the original SOP for each formula.
  - b. Revision and validation of SOPs and associated calculations.
  - c. Determination of active and passive SOPs.
5. Association of patient information sheets.
6. Drafting of a programme use protocol.
7. Training personnel on software use.
8. Validation in daily practice situations.

## WHAT HAS BEEN ACHIEVED?

Until August 31, 2024: →

### Incorporated into the database

249 SOPs (85 monthly)	74,7%(186) active status	standardizing procedures	
	25,3%(63) passive status		
Material	67 primary packaging materials	improving stock control	
	275 components		185 active ingredients
			16 base formulations
			74 excipients

### Prepared and validated by a pharmacist

1279 magistral formulas	54%(693) for usual stock	Each formula includes a preparation guide that includes detailed records to ensure traceability, such as patient information, prescriber details and preparation order number
	40%(510) for specific patients	
	6%(76) with no record available	

There is also a computerized recipe book with histories filterable for statistical analysis

**No human errors** have been detected in the preparation since the program's implementation. The **patient information sheet** helps prevent medication errors.

## WHAT NEXT?

Efforts are being made to **improve the system** by adding features like a barcode reader for batch entry and registering personnel that dispense and collect medication. CPFarma® has optimized magistral formulation management, so Pharmacy Services without specialized software could benefit to improve their practices through its implementation.



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