

Medication Safety Today



Medicines
Governance
Team

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Mark the date



Some areas use a long stay Kardex. This has a separate section for prescribing depot injections of antipsychotic medicines which may be administered at intervals of 1 to 4 weeks. Because these medicines are given at less frequent and different intervals, it can be easy to overlook this section when reviewing a Kardex to determine which medicines are due for administration leading to omitted and delayed doses.



Safety tips:

- ✔ Check all sections of the Kardex when reviewing medicines due for administration.
- ✔ When a patient is prescribed depot injections check the date a dose was last administered and when the next dose is due.
- ✔ Consider a diary system to highlight when depot injections are next due to be administered.
- ✔ Where possible, involve patients in remembering when their next depot injection is due.
- ✔ Where a depot injection is prescribed on discharge, specify the frequency of administration and the date that the dose is next due on the discharge prescription.

Odd man out

Can you spot which medicine is the 'odd man out' in this list?

apixaban, edoxaban, rivastigmine, rivaroxaban, dabigatran

Answer on reverse



Weighing on your mind



With New Year's resolutions on the cards again and the sales of scales increasing around the country it is an ideal time to remember to accurately document patient's weight.

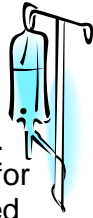
Medication incidents have occurred where the dose of intravenous paracetamol has not been adjusted for the patient's weight. It is important that patients are accurately weighed to calculate appropriate doses of medication. For patients less than 50kg the dose of IV paracetamol is 15mg/kg. There are different preparations available, a 1g/100ml vial, a 500mg/50ml vial and an unlicensed preparation available as 10mg/ml syringe in 4ml, 10ml and 15ml sizes. Selection of an appropriate preparation can help prevent accidental overdose.

Safety tips:

- ✔ Document weight clearly in kilograms.
- ✔ NEVER guess the weight of a patient.
- ✔ Choose a preparation appropriate to the dose required.
- ✔ For long stay patients, be aware that their weight may change over time.
- ✔ Does the dosage of medication need reviewed?

If you have any comments on this newsletter, please contact Sharon O'Donnell, Medicines Governance pharmacist on 02890638129 at Royal Hospitals or by e-mail at sharon.odonnell@belfasttrust.hscni.net Further copies of this newsletter can be viewed at www.medicinesgovernanceteam.hscni.net or on your Trust intranet

A fluid problem

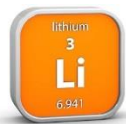


Many people were affected by the excessive rainfall over the Christmas and New Year period. Fluids of another type can also cause problems for patients. Medication incidents have been reported where the wrong infusion fluid has been selected. This could lead to infusion of inappropriate electrolytes in patients or artificially high blood glucose results from arterial blood gas analysers, if for example glucose was administered instead of sodium chloride to maintain patency of arterial lines.

Safety tips:

- Many infusion fluids have similar appearance therefore wherever possible they should be stored in their original outer box to aid differentiation.
- Review the infusion fluids in your area and only stock those that are routinely required.
- Ensure different infusion fluids are separated in storage areas. Potassium containing infusions should be separated from other infusions. Epidural infusions should be stored in a designated lockable cupboard separate from intravenous infusions.

Lithium



Camcolit[®] 250mg tablets are indicated for the treatment and prophylaxis of mania, manic depressive illness and recurrent depression, and the treatment of aggressive or self-mutilating behaviour.

The proprietary (brand) name of “Camcolit[®] 250mg tablets” has changed to “Lithium Carbonate Essential Pharma 250 mg film-coated tablets”, effective from **1st October 2015**. The product strength and formulation have not changed, only the name has changed.

This name change only applies to Camcolit[®] 250mg. Please note, the product name for “Camcolit[®] 400mg prolonged release Lithium carbonate film-coated tablet” is not affected.

Patients should receive the same brand of lithium product consistently because brands from different manufacturers may not be bioequivalent. It is therefore essential that the new name is written in full by the prescriber.

Actions:

- Prescribers should prescribe “Lithium Carbonate Essential Pharma 250mg film-coated tablets” for those patients already established on “Camcolit[®] 250mg tablets”.
- Prescribers and pharmacists should inform patients about the name change and the need to take the same brand of lithium consistently.
- Prescribers will need to ensure that their patients’ NHS lithium treatment cards and booklets are updated to reflect this change.

CUSS words



Have you ever been in a situation where you feel your medication safety concerns aren't being listened to? How can you ask for help when you are unsure about something? One way of doing this, particularly, if you are talking to a more senior member of staff, is to CUSS! Use statements like:

- “I am **C**oncerned”
- “I am **U**ncomfortable”
- “This is a **S**afety issue”
- “**S**top”

Formulation switch



Posaconazole (Noxafil[®]) is a specialist triazole antifungal used to treat invasive fungal infections in immunocompromised patients. It is approved in two oral formulations: an oral suspension and a gastro-resistant tablet. A recent alert emphasizes that the oral formulations cannot be substituted for each other without adjusting the dose. The tablets have a higher bioavailability; the suspension is not interchangeable with the tablets on a milligram-for-milligram basis.

Incorrect prescriptions have caused major patient harm.

Where possible, Posaconazole (Noxafil[®]) tablets should be used in preference to the suspension. Prescribers should specify the dosage form, strength, and frequency on all posaconazole prescriptions. Pharmacists should request clarification from prescribers when the dosage form, strength, or frequency is not specified.

Use Alternative Route

Medication incidents involving omitted doses continue to be among the most commonly reported medication incidents.



For some patients with swallowing difficulties, oral medicines are administered via a feeding tube. The feeding tube can become dislodged or blocked. If this occurs, it is important that the patient's medicines are reviewed to consider if an alternative route of administration should be prescribed to ensure essential medicines can continue to be administered until the feeding tube is replaced or unblocked.

Answer: Rivastigmine. The other medicines are all Direct Oral Anticoagulants (DOACs).