

NEWCASTLE UPON TYNE HOSPITALS NHS FOUNDATION TRUST

GUIDELINES FOR THE PREPARATION OF IV DRUGS IN THEATRE

This guideline is to be used in conjunction with the Newcastle upon Tyne Hospitals Trust [Intravenous Drug Administration policy](#).

General:

- All medicines administered to the patient are the responsibility of the anaesthetist.
- With the approval of the anaesthetist and following his/her verbal instructions, the approved anaesthetic assistant may prepare all drugs in readiness for use.
- Careful consideration is given to the appropriate usage of drugs and correct dosage
 - The anaesthetist prior to use must check the prepared drugs.
 - Any uncertainty must be resolved with the anaesthetist.

Preparation:

Drugs must be prepared in an aseptic manner as per Trust guidelines ([Intravenous drug administration policy](#) (excluding the practice of anaesthesia and dental sedation by doctors and dentists) appendix 3). All ampoules, including water for injection and normal saline must be stored in the original manufacturers packaging. Once an ampoule is removed from the original packaging it is not advisable to put it back into the packaging if it is no longer required. This may be done in exceptional circumstances where a through check of drug name and strength is made to ensure it is put in the correct box.

1. Select an ampoule from theatre
2. Check the drug name and strength of the ampoule to ensure it is the correct drug. Check the expiry date of the medicine.
If the drug supplied is in powder form it must be dissolved using the solvent and in the required volume specified by the manufacturer.
3. Draw the contents of the ampoule into a syringe
4. Label the syringe immediately, using the pre-printed labels. The strength of the drug (mg/ml) must be added. **DO NOT PRE-LABEL SYRINGES.**
5. Double check that the drug name and strength on the label attached to the syringe is the same as the drug name and strength on the empty ampoule.
6. Place the labelled syringe into a tray with the empty ampoule.
7. Select the next drug required and repeat the process.

Note:

- Each drug that is required is selected and drawn into a syringe one at a time.
- All ampoules used are retained until the end of the case.
- If necessary to prepare different patients' drugs in advance they must be prepared separately and then kept separately (i.e. placed in a tray, which is then placed inside a drug cupboard), to ensure they are not used by a mistake.
- Previous patient's drugs must be discarded prior to admitting next patient to anaesthetic room.
- If for any reason the injection cannot be given immediately or used within the same theatre list it must be discarded
- **NO MORE THAN TWO PATIENTS DRUGS CAN BE PREPARED AT ANY TIME**

Checking Procedure:

1. A second qualified member of staff must check both the drug and the flushing solution. (The checker can be a doctor or registered nurse).
2. The name of the drug and the strength on the labelled syringe must be matched with the empty vial.
3. Check that the drug and diluents have not passed their expiry dates.
4. Check that there are no visible particles in the syringe.

References:

1. [Intravenous drug administration policy](#) (excluding the practice of anaesthesia & dental sedation by doctors & dentists). Guidelines & Policies 2004. The Newcastle upon Tyne Hospitals NHS Trust.
2. Building a safer NHS for Patients: Improving medication safety. A report by the Chief Pharmaceutical officer. 2004. Department of Health.