

Vincristine Medication Alert

Audit checklist

Name of organisation:

Date:

Audit checklist prepared by:

Review of Safety and Quality Council (S&QC) recommended actions

Recommended action	Suggested evidence	Assessment	Comment/further action required
1. Vincristine should be administered in a minibag, not a syringe. Use of a minibag aims to 'design out the error' by preventing a connection to a spinal needle.	Copy of: <ul style="list-style-type: none">• policy/procedure• date of Drugs and Therapeutics/Nutrition Committee approval	Compliance or non-compliance	

<p>2. All vincristine products, including outer wraps, should be labelled with a prominent warning label stating: 'FOR INTRAVENOUS USE ONLY – Fatal if given by other routes'.</p> <p>Negative labels, such as 'Not for intrathecal use' should NEVER be used.</p>	<p>Copy of:</p> <ul style="list-style-type: none"> • Sterile unit worksheet 	<p>Compliance or non-compliance</p>	
<p>3. The timing and location of vincristine preparation, delivery and administration should be such that it is separate from all medicines intended for intrathecal administration.</p>	<p>Copy of:</p> <ul style="list-style-type: none"> • policy/procedure • date of Drugs and Therapeutics/Nutrition Committee approval 	<p>Compliance or non-compliance</p>	
<p>4. Vincristine, and other intravenous medicines, must be packaged, transported and stored in specifically designated containers. Separate packaging and different containers must be used for medicines to be administered intrathecally.</p>	<p>Copy of:</p> <ul style="list-style-type: none"> • policy/procedure • date of Drugs and Therapeutics/Nutrition Committee approval 	<p>Compliance or non-compliance</p>	

<p>5. All medicines for intrathecal administration should be labelled with a prominent warning label, on the syringe and outer wrap, stating 'For intrathecal use'.</p>	<p>Copy of:</p> <ul style="list-style-type: none"> • policy/procedure • date of Drugs and Therapeutics/Nutrition Committee approval 	<p>Compliance or non-compliance</p>	
<p>6. Only staff specifically trained and experienced in cancer treatments should be designated to prescribe, prepare, dispense, deliver, receive or administer injectable chemotherapy. This includes registrars, consultants, pharmacists and nurses.</p>	<p>Copy of:</p> <ul style="list-style-type: none"> • training curriculum • dates of training sessions; • records of staff attending training; • competency certificates. 	<p>Compliance or non-compliance</p>	
<p>7. Staff administering intrathecal medicines must use formal checking procedures. This should include a 'time out' involving at least two health professionals, including an oncology trained nurse or pharmacist and a doctor. The patient identifiers, drug, dose, volume, route and rate should be verified against the medication order immediately prior to administration. Both health professionals should then sign the order.</p>	<p>Copy of:</p> <ul style="list-style-type: none"> • policy/procedure • date of Drugs and Therapeutics/Nutrition Committee approval • signed orders 	<p>Compliance or non-compliance</p>	

2. Observation assessment over a five day period

Recommended action	Suggested evidence	Assessment	Comment/further action required
Random check of vincristine products, to ensure that they have been prepared in a minibag, not a syringe.	<ul style="list-style-type: none"> • Number of areas audited. • Percentage of areas where vincristine products had been prepared in a minibag, not a syringe. 	Compliance or non-compliance	
Random check of labelling on vincristine products, including outer wraps, to ensure that it has been labelled with a prominent warning label stating: 'FOR INTRAVENOUS USE ONLY – Fatal if given by other routes'.	<ul style="list-style-type: none"> • Number of areas audited. • Number of observations. • Percentage of observations where practice was not in compliance with local policies, procedures and Safety and Quality Council recommendations. 	Compliance or non-compliance	
Random check to ensure that the timing and location of vincristine preparation, delivery and administration is separate from all medicines intended for intrathecal administration.	<ul style="list-style-type: none"> • Number of areas audited. • Number of observations. • Percentage of observations where practice was not in compliance with local policies, procedures and Safety and Quality Council recommendations. 	Compliance or non-compliance	

<p>Random check to ensure vincristine, and other intravenous medicines are packaged, transported and stored in specifically designated containers. Separate packaging and different containers must be used for medicines to be administered intrathecally.</p>	<ul style="list-style-type: none"> • Number of areas audited. • Number of observations. • Percentage of observations where practice was not in compliance with local policies, procedures and Safety and Quality Council recommendations. 	<p>Compliance or non-compliance</p>	
<p>Random check to ensure staff involved in prescribing, preparing, dispensing, delivering, receiving and administering injectable chemotherapy are specifically trained and experienced in cancer treatments. This includes registrars, consultants, pharmacists and nurses.</p>	<ul style="list-style-type: none"> • Number of staff audited. • Number of observations. • Percentage of observations where practice was not in compliance with local policies, procedures and Safety and Quality Council recommendations. 	<p>Compliance or non-compliance</p>	
<p>Random check to ensure that staff administering intrathecal medicines are using formal checking procedures. This should include a 'time out' involving at least two health professionals, including an oncology trained nurse or pharmacist and a doctor. The patient identifiers, drug, dose, volume, route and rate should be verified against the medication order immediately prior to administration. Both health professionals should then sign the order.</p>	<ul style="list-style-type: none"> • Number of areas audited. • Number of observations. • Percentage of observations where practice was not in compliance with local policies, procedures and Safety and Quality Council recommendations. 	<p>Compliance or non-compliance</p>	

3. Review of patient safety incident data involving vincristine for preceding 12 months

Clinical programs should establish good incident reporting cultures to enable learning from incidents. Programs that report few incidents should consider other audit methods, such as observation, to obtain further information about the safe use of injectable medicines.

3.1 Clinical outcome	Number of reports
Death	
Severe (permanent harm)	
Moderate (significant, but not permanent, harm requiring increase in treatment)	
Low (temporary harm requiring extra observation or minor treatment)	
No harm	
Total	

3.2 Type of report	Number of reports
Prescribing	
Dispensing/medicine preparation	
Administration	
Monitoring	
Total	



3.3 Type of incident	
Wrong dose	
Wrong frequency	
Omitted medicine/dose	
Mismatching of patient and their medicine	
Wrong/omitted medicine label	
Wrong/omitted/exceeded expiry date	
Wrong storage	
Wrong route	
Contraindication	
Patient allergic to treatment	
Wrong method of preparation/supply	
Adverse drug reaction – when used as intended	
Wrong or omitted verbal patient directions	
Other	
Total	

4. Overall comments and actions recommended by Drug and Therapeutics Committee

Overall comments concerning risk management measures in place and additional actions:

Signature of Drugs and Therapeutics Committee Chair:

Name of Drugs and Therapeutics Committee Chair:

Date:

Date of next annual audit review:

