

OBJECTIVE

CONTEXT :
Revision of our circuit for managing urgent requests for preparations of injectable cytotoxics (ITCs) outside the production unit's working hours

National survey of centers preparing ITCs



OBJECTIVE :
TO CARRY OUT AN **STATE OF PLAY OF PRACTICES** IN HEALTH CARE INSTITUTIONS (HECs) PREPARING ITCs, TO GUIDE THE REVISION OF OUR INTERNAL CIRCUIT

METHODS

National survey :



Online questionnaire

Recipients



Pharmacists working in CRUs

Distribution



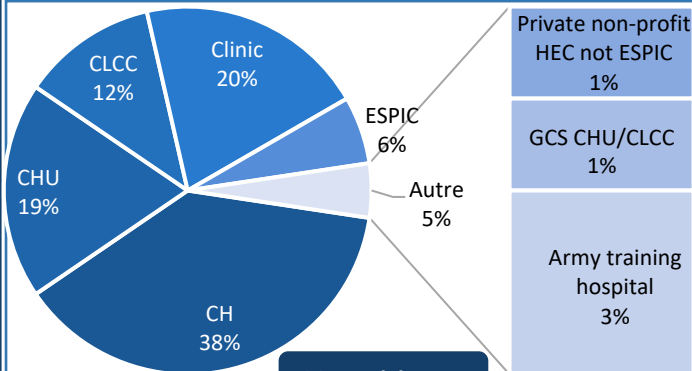
Mailing list of Experts centers

Period



1 week
Month of June 2021

RESULTS



82 participants

29%

HECs with on-call line for ITC preparation

18 HECs did not deliver **any ITCs** outside of CRU hours



Effective on-call period

In **48** HECs, **no preparation** are made **in** the care departments.

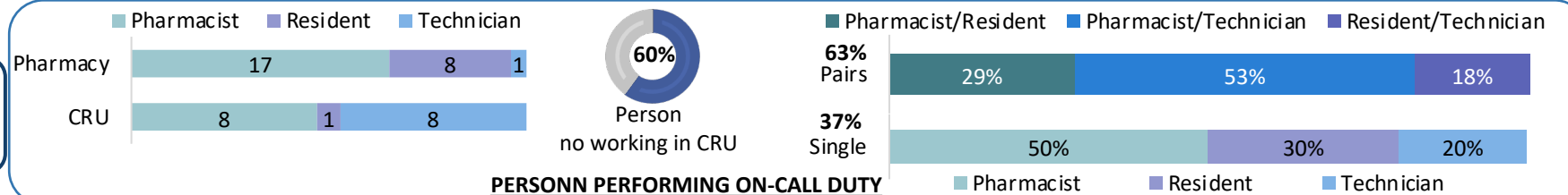
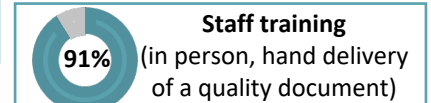
DEPARTMENTS CONCERNED

- Hematology
- Oncology
- Pediatrics
- Gynecology
- Intensive Care

MOLECULES MAINLY CONCERNED

- Methotrexate
- Cytarabin
- Idarubicin
- Daunorubicin

- If prepared on the ward :
- **Secure device** (mainly Tevadaptor®),
 - **Storage in the pharmacy,**
 - **Dispensing with the vials.**



DISCUSSION - CONCLUSION

Heterogeneous practices with a « center-dependent » management

Participants feedback
Problem present in other centers

Provision of a **secure device** to care departments when dispensing ITC vials

Continuity of care for emergency patients, if no specific on-line call

PROJECT IN OUR HEC

Delivery of a secure device outside the hours covered by the specific on-call duty

Staff training through simulation

