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INTRODUCTION : The production of sterile and non-sterile preparations in hospital settings, particularly in emergency contexts, may require the implementation of **continuous service (CS)** in pharmaceutical technology. However, many French healthcare institutions operate without CS, relying instead on alternative arrangements to ensure treatment availability outside regular working hours.

OBJECTIVE : To describe the organizational modalities of pharmaceutical technology in the absence of continuous service (CS), by identifying current practices.

METHODS : National multicenter descriptive survey conducted among French hospital institutions over a one-month period in 2025.

Data collected :

-  **Type of institution (general hospital (GH), university hospital (UH), comprehensive cancer center (CCC))**
-  **Existence of continuous service (CS)**
-  **Compensatory measures in the absence of CS**

RESULTS :



Type of institution
31 responding institutions
2 GH, 21 UH et 8 CCC



Continuous service provided?
☒ Yes : 17 institutions (55%)
☒ No : 14 institutions (45%)



Compensatory measures in the absence of CS	Répondants
Standardized doses of injectable chemotherapy	1/14 (7%)
Intrathecal syringe emergency kits	2/14 (14%)
Scheduled preparations requiring the mobilization of an on-call pharmacist or pharmacy technician	2/14 (14%)
Closed system for reconstitution/preparation/administration of chemotherapy by nursing staff in the care unit	4/14 (29%)
Use of ready-to-use oral formulations (hospital preparation)	2/14 (14%)
No system in place: postponement of preparations to the next working day	3/14 (22%)

DISCUSSION-CONCLUSION : These results reveal heterogeneity in the management of the absence of continuous service, based on a local adaptation approach. While some institutions have formalized robust organizational frameworks, others present potential risks in emergency situations occurring outside regular working hours. Harmonizing practices, formalizing standardized protocols, and strengthening interdisciplinary coordination could contribute to more effective patient care and enhanced safety in the medication management process.