Immediate Use Compounding Competency

Staff Member: _____ **Job Title:** _____

Start Date of Competency: _____ **Unit:** _____

This competency has been assigned to the staff member indicated above and must be completed as part of their assigned role. This competency may need to be renewed at a designated future date to ensure the staff member maintains their skill.

*The **Staff Member** will discuss with their Preceptor on their previous experiences and skills in establishing a plan and goals for successfully demonstrating their ability to meet the performance elements of the competency.*

*The **Preceptor** will discuss with the Staff Member the best approach to ensure their success in meeting the performance requirements for this competency. The **Preceptor** will date and initial each performance element when they validate that the Staff Member **has met the requirement of the element and can deliver this aspect of care without direct supervision.** The Preceptor should indicate in the Notes column any areas that the Staff Members should focus on to gain greater proficiency as they continue to develop. If the **Preceptor** has any concerns regarding the Staff Member's ability to meet the performance elements and successfully complete this policy, they should document their concerns on the Notes column and contact their **Supervisor** for direction.*

Applicable References & Policies:	• Institute for Safe Medication Practices (ISMP). ISMP Safe Practice Guidelines for Adult IV Push Medications. 2015. • Centers for Disease Control and Prevention. Medication Preparation FAQs regarding Safe Practices for Medical Injections.

Performance Elements	Validation Method (Circle) **D** – Demonstrated **S** – Simulated **T** – Test **V** - Verbalized	Date Performance Element Met	Preceptor Initials	Notes
Hand Hygiene Performance Criteria				

• Hand hygiene procedure:
  ○ Removes all jewelry on hands and wrists to prevent contamination.
  ○ Performs hand washing with warm soap and water for at least 30 seconds to mechanically remove inordinate particulate matter.
  ○ If sink is not available, at a minimum, performs hand hygiene with alcohol based hand sanitizer.
	D S T V			

Applicable to the following Accreditation Programs: (X) Hospital (X) Critical Access Hospital (X) Behavioral Health (X) Ambulatory Care (X) Office Based Surgery ( ) Disease Specific Certification ( ) Staffing Certification

Performance Elements	Validation Method (Circle) **D** – Demonstrated **S** – Simulated **T** – Test **V** - Verbalized	Date Performance Element Met	Preceptor Initials	Notes
○ Dries hands with clean, dry paper towel after using soap and water..				
• Garbing procedure: ○ Dons garb for immediate use compounding as defined in the organizational SOP. ○ Disinfects gloves by applying alcohol based hand sanitizer or disinfecting agent onto gloves and allow to dry to reduce contamination from gloves	**D S T V**			
Selection Performance Criteria				
• Selects components and arranges compounding supplies in a manner that will allow for quick and efficient use.	**D S T V**			
• Does not dilute or reconstitute IV push medications by drawing up the contents in a commercially available, prefilled flush syringe of 0.9% sodium chloride. The FDA has not approved these devices for the reconstitution, dilution, and/or subsequent administration of IV push medications.	**D S T V**			
Dosing Preparation Performance Criteria				
• Disinfects compounding space by applying organization approved agent onto compounding surface to minimize potential contact with contaminated surfaces.	**D S T V**			
• If withdrawing from a vial: ○ Disinfects vials by performing unidirectional swiping motion using single use sterile 70% isopropyl alcohol swabs to remove dust or debris. ○ Uses air displacement to maintain vial pressure to avoid leaks or sprays.	**D S T V**			

Performance Elements	Validation Method (Circle) **D** – Demonstrated **S** – Simulated **T** – Test **V** - Verbalized	Date Performance Element Met	Preceptor Initials	Notes
○ Punctures vial at a 45 degree angle with bevel of needle facing upward to avoid vial coring. ○ Avoids critical sites (e.g., septum, needle) while withdrawing medication from vial by holding top of vial and lower half of syringe to prevent contamination. ○ If a rubber stopper is penetrated more than once in a multi-dose vial, the prior puncture site should be avoided.				
• If withdrawing from an ampule: ○ Prior to breaking the ampule open, the neck of the ampule is disinfected with 70% IPA and allowed to dry. ○ Uses an alcohol swab or gauze to open the ampule to reduce the aspiration of glass particles from the ampule into the syringe. ○ To minimize glass particle contamination, 5-micron filter straws or filter needles are used when withdrawing contents of ampules. Refers to the drug labeling for manufacturer's recommendations concerning filtration. ○ After withdrawing the contents of the ampule, the filter needle or filter straw is removed and discarded after use and replaced with the needle to inject into the final solution. Filter needles and filter straws are only used in one direction to prevent potential reintroduction of glass particles that were originally filtered.	**D S T V**			
• Performs correct volume transfer.	**D S T V**			
• Performs only simple transfer of no more than three sterile, non-hazardous drugs in the manufacturer's original containers including no more than two entries into any one container.				

Performance Elements	Validation Method (Circle) **D** – Demonstrated **S** – Simulated **T** – Test **V** - Verbalized	Date Performance Element Met	Preceptor Initials	Notes
• Performs safe needle technique to protect from needle stick injury.	**D S T V**			
• Disposes of waste appropriately by placing needle into red sharps container to prevent improper contact with needles.	**D S T V**			
• Disposes of any unused medication in appropriate pharmaceutical waste container.	**D S T V**			
• Visually inspects final compounded medication to ensure its free of particulates and meets expected appearance and quality.	**D S T V**			
Labeling and Documentation Performance Criteria				
• Demonstrates proper labeling by writing names and total volumes of all active ingredients, preparer's initials, and patient identifier onto "Medication Added" label to prevent mix-up of medication.	**D S T V**			
• Applies correct 4-hour Beyond Use Date (BUD) to label by writing applicable date and time to "Medication Added" label to prevent administration of outdated, unsafe, and potentially less effective medication to patient.	**D S T V**			
• When preparing Compounded Sterile Preparations for more than one patient, completes compounding record that includes all the required elements.	**D S T V**			

I hereby attest that I have completed this assigned competency and feel confident in my ability to perform the listed performance elements. I understand that if I have any questions regarding my abilities to perform in my role that I am to contact my supervisor immediately.

Signature of Staff Member:_____ **Date:**_____

Signature of Preceptor: _____ **Date:** _____

Applicable to the following Accreditation Programs: (X) Hospital (X) Critical Access Hospital (X) Behavioral Health (X) Ambulatory Care (X) Office Based Surgery ( ) Disease Specific Certification ( ) Staffing Certification

Regulatory Information may change over time as healthcare expectations change. This document is current as of the date noted within this footer

Signature of Supervisor:_____ **Date:** _____

Notes: