



Who Says You Can't Tube Chemotherapy?

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Problem

- 40 inpt chemo doses/day to deliver
 - Labor cost of \$60,000/yr
- Chemo clinic pharmacy construction requires delivery of 150 doses/day
 - Time sensitive
 - Temporary labor cost of \$100,000/yr
- Considering centralized chemo robot

Research

- NIOSH, OSHA, or ASHP positions
- ASHP and UHC Listserve responses
- Hospitals identified with tubing history
 - Telephone interviews
- Data request from tube system manufacturer

Key Policy Points

- Triple containment + absorbant
 - #1 Chemo ziplock bag
 - #2 12 mil leakproof biohazard pouches
 - 2 chemosorb pads = 1 L absorption



Key Policy Points

- Triple containment:
 - #3 Special leakproof tube carriers
- Immobilization within carrier
- IV bag spike should arrive facing up
- Sent via Secure Transaction Mode
- Nurses have emergency station shutdown procedure



Follow-Up and Outcome

- Chemotherapy Tubing Policy steps:
 - Institutional Safety Committee
 - Patient Safety/Quality Department
- In-services on packing, sending & receiving, station shutdown
- Zero leakage at any level
- Improved TAT, RN satisfaction, costs

Conclusion

This 'myth' is "busted"!