

**Supplemental USP  
<797> Background  
Information**

# **Implementing a Regional Compounding Program for Compounded Sterile Preparations:** Practical strategies, a USP <797> approach.

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# The Objective of USP <797>...

- “...is to describe conditions and practices to prevent harm, including death, to patients...”\*

\* Introduction: USP <797> Pharmaceutical Compounding- Sterile Preparations © USP

# USP Chapter <797> Sections:

- Definitions
- Responsibilities of compounding personnel
- CSP microbial contamination risk levels
- Personnel training and evaluation in aseptic manipulation skills
- Immediate use CSPs
- Single-dose and Multiple-dose containers
- Hazardous drugs as CSPs
- Radiopharmaceuticals as CSPs
- Allergen Extracts as CSPs
- Verification of Compounding Accuracy and Sterility
- Environmental Quality and Control
- Suggested Standard Operating Procedures (SOPs)
- Elements of Quality Control
- Verification of Automated Compounding Devices (ACDs) for Parenteral Nutrition Compounding
- Finished preparation release checks and tests
- Storage and beyond-use-dating
- Maintaining Sterility, Purity, and stability of Dispensed and Distributed CSPs
- Patient or Caregiver training
- Patient monitoring and adverse event reporting
- The Quality Assurance (QA) Program
- Abbreviations and Acronyms
- Appendices I-V

# Responsibilities of Compounding Personnel-

- Personnel are adequately educated, instructed, and skilled to perform their functions
- **Ingredients have correct identity, quantity, amount**
- Open/partial containers are properly stored
- Minimize bacterial endotoxins
- Proper and adequate sterilization is used
- Equipment is clean, accurate, appropriate
- Potential harm from added substances considered
- **Packaging is appropriate for sterility, stability**
- Compounding environment maintains the sterility of pre-sterilized items
- **Labels are appropriate and complete**
- **Beyond-use-dates are appropriate and based on valid scientific criteria**
- Correct compounding procedures are used
- **Deficiencies in compounding can be rapidly identified and corrected**
- **Separate compounding from quality evaluation**

# Verification of Compounding Accuracy and Sterility

- Compounding procedures and sterilization methods correspond to correctly designed and verified written documentation.
- Verification requires-
  - Planned testing
  - Monitoring
  - Documentation
    - Sterility Testing USP <71> [Low & Medium Risk]
    - Use of Biological Indicators [High Risk]

# Verification of Compounding Accuracy and Sterility

- What this means is a review of...
  - (for) Visual examination for particulates
  - The prescription order
  - The written compounding procedures
  - The preparation records
  - The expended materials
- What you are looking for is...
  - Accuracy and correctness of identities and amounts of ingredients
  - Aseptic mixing
  - Proper sterilization, packing and labeling
  - ...the expected physical appearance of the CSP before dispensing or administration.

# Standard Operating Procedures-

- Each compounding site shall have written, properly approved SOPs designed to ensure the quality of the environment in which the CSP is prepared.
  - There are 23 recommendations within the chapter.
  - This list is obviously not all-inclusive!

# Standard Operating Procedures-

- SOPs:
  - Must reflect current practices.
  - Available to all employees.
  - Must tie to any forms or documents in use.
  - Must be consistent throughout the organization.
  - Must be reviewed and updated regularly.
  - Must be the basis of any “controlled processes” developed for the organization.

# Verification of Automated Compounding Devices (ACDs) for Parenteral Nutrition Compounding



BBraun Pinnacle™ Device



Baxa EM-2400™ Device

# Verification of Automated Compounding Devices (ACDs) for Parenteral Nutrition Compounding

- If used and maintained properly ACDs can provide improved accuracy and precision of the compounding process over traditional manual compounding methods.
  - Personnel must maintain daily records and review these records over time for device accuracy.
  - Follow manufacturer's recommendations for the device and its software.

# Finished Preparation Release Checks and Tests

- Physical Inspection
- Compounding Accuracy Checks
- Sterility Testing
- Bacterial Endotoxin (Pyrogen) Testing
- Identify and Strength Verification of Ingredients

# Storage and Beyond-Use Dating

“USP <797> Matrix”

<b>Low Risk Level CSPs</b>	<b>Low risk Level CSPs w/ 12hr or Less BUD</b>	<b>Medium Risk Level CSPs</b>	<b>High Risk Level CSPs</b>
48 Hours Room Temperature	12 Hours Room Temperature	30 Hours Room Temperature	24 Hours Room Temperature
14 Days Refrigerated	N/A	9 Days Refrigerated	3 Days Refrigerated
45 Days Frozen	N/A	45 Frozen	45 days Frozen

# Maintaining Sterility, Purity, and Stability of Dispensed and Distributed CSPs

- The compounding facility is responsible for the proper packaging, handling, transport, and storage of CSPs.
- This includes the appropriate education, training, and supervision of the compounding personnel assigned to these functions.
  - Cold chain transport
  - Tamper evident packaging
  - Redispensed CSP policies

# Quality Assurance Program

- Requires formalized policies, controlled processes and clear procedures used in preparing CSPs
- One element of quality that is not routinely performed in pharmacies is documentation, or “written proof” that compounding is occurring properly.



# “Controlled Process”-

- “A written description of specific training and performance evaluation program for individuals involved in the use of aseptic techniques for the preparation of sterile products must be developed for each site.”<sup>1</sup>
- “Controlled processes” are based upon best practices and have been analyzed for possible points of failure. They are not based upon oral history or perceived “*Secundum Artum.*”

- 1- USP General Chapter <797> Elements of Quality Control –pg 35

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**Review**

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\* Introduction: USP <797> Pharmaceutical Compounding- Sterile Preparations © USP

# Bibliography-

- General Chapter USP <797> - [www.usp.org](http://www.usp.org)
- Controlled Environmental Testing Association (CETA) – [www.CETAinternational.org](http://www.CETAinternational.org)
- Pharmacy Purchasing and Products Magazine- [www.pppmag.org](http://www.pppmag.org)
- Impact of USP Chapter <797>: Results of a National Survey Am J of Health Syst Pharm 2006;63(14):1336-1343 (Candy TA, Schneider PJ, Pedersen CA.)
- Blueprint for implementing USP <797> for compounding sterile preparations Am J of Health Syst Pharm 2005;61(18):1928-1938 (E. Kastango)
- Pharmacy Practice News-Special Report (Oct 2008) Outsourcing Compounding Services to meet USP <797> Requirements: An Overview (M. Sanborn)
- ASHP / Baxter discussion guide on USP Chapter <797> for Compounding Sterile Preparations- (Buchanan et.al.)

# QUESTIONS?



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