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ACHC.

USP<800> UPDATE

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 PHARMACY

OBJECTIVES

- Identify what drugs are considered hazardous
- Recognize engineering controls discussed in USP<800>
- Recognize USP's implementation timeline for Chapter <800> and revisions to <795> and <797>

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History

- Concern over exposure to hazardous drugs (HDs) is not new!
 - 1986 – first OSHA guidelines for cytotoxic drugs
 - 1990 – ASHP technical assistance bulletin on handling cytotoxic and hazardous drugs
 - 2004 - NIOSH Alert - Preventing Occupational Exposures to Antineoplastic and Other Hazardous Drugs in Health Care Settings
 - 2008 – USP Chapter <797> included sterile hazardous drug guidance
 - March 2014 – USP Chapter <800> draft released
 - February 2016 – final version of Chapter <800> released
 - December 1, 2019 – “Effective Date” for <800> Hazardous Drugs – Handling in Healthcare Settings

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 PHARMACY

WHY SHOULD I CARE? - INDUSTRY EVIDENCE

- 1999: Pharmacists, techs, & nurses handling HDs
 - 40% higher risk of stillbirths and spontaneous abortions
- 2010: Healthcare Worker Study (including pharmacy)
 - Chromosome 5&7 abnormalities
 - Breast and prostate cancer both linked to C-5
- 2014: Pharmacy student dies of fentanyl overdose at a compounding pharmacy
 - After only four days on the job
- 2014: Evaluation of manufacturing practices finds drug residue on external packaging of containers of 5-FU and cisplatin

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WHY SHOULD I CARE? – EXTERNAL FACTORS

- HD protection is growing as a regulatory requirement
 - State Boards of Pharmacy
 - FDA
 - OSHA – Controlling Occupational Exposure to Hazardous Drugs
- Growing interest in waste-streams
- Liability?

Hartford News

OSHA cites New Haven pharmacy for multiple violations

Posted: 10/23/2014, 03:00pm | WTNH

New Haven, Conn. (WTNH) — The Occupational Safety and Health Administration (OSHA) has cited a New Haven pharmacy for multiple violations during their most recent inspections following a July chemical spill that sent four employees to the hospital.

In all, OSHA's proposed fines total \$77,220.

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 PHARMACY

WHAT IS A “HAZARDOUS” DRUG???

- NIOSH HDs are:
 - Carcinogenic
 - Teratogenic
 - Reproductive toxicity
- NIOSH Classification:
 - Group 1 (Table 1) - Antineoplastics
 - Group 2 (Table 2) - Other drugs that nonetheless meet NIOSH criteria
 - Group 3 (Table 3) - Substances mainly posing reproductive risk

NIOSH List of Antineoplastics and Other Hazardous Drugs in Healthcare Settings, 2016

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CHAPTER <800> COVERS:

- List of HDs
- Areas where exposure may occur
- Personnel responsibilities
- Facility and engineering controls
- Environmental quality and control
- Personal Protective Equipment (PPE)
- Hazard Communication Program
- Personnel training
- Receiving HDs
- Labeling, packaging, transport, disposal
- Dispensing final dosage forms
- Compounding
- Administering
- Deactivation, decontamination, cleaning, disinfecting
- Spill control
- Documentation and SOPs
- Medical Surveillance



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CONTAINMENT REQUIREMENTS

- What qualifies?
- What are environmental requirements?
- Engineering controls?
- Additional equipment?



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WHAT REQUIRES CONTAINMENT?

- NIOSH-list drugs that must follow <800>'s containment requirements:
 - HD API
 - **Antineoplastics** requiring *further manipulation*
- NIOSH-list drugs that **do not** have to follow containment requirements *if an assessment of risk is performed and implemented*:
 - Final dosage forms of compounded HD preparations
 - Conventionally manufactured HD products that require no further manipulation other than counting or repackaging (caution – automated devices that generate dust, manufacturer exceptions)
 - Non-antineoplastic HD dosage forms on the NIOSH list



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ASSESSMENT OF RISK

- Assessment of Risk must include the following:
 - Type of HD
 - Dosage form
 - Risk of exposure
 - Packaging
 - Manipulation



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ASSESSMENT OF RISK

- Must list each drug and dosage form individually:
 - May have same information for multiple drugs or dosage forms
- Must document **what** alternative containment strategies or work practices are being employed
- Must be reviewed every 12 months:
 - Review must be **documented!**



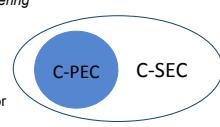
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CONTAINMENT IN USP<800>

- C-PEC – *Containment Primary Engineering Control*
- C-SEC – *Containment Secondary Engineering Control*

▪ Remember – requirements are different for sterile and non-sterile!



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NON-STERILE HD COMPOUNDING

Containment Secondary Engineering Control (C-SEC):

- Dedicated room for HD compounding
- Negative pressure -0.01 to 0.03 inches water
- 12 ACPH
- Unclassified air
- Externally vented



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NON-STERILE HD COMPOUNDING

Smooth, seamless, and impervious surfaces:

- Avoid particle board
- Floor laid seamlessly
- Epoxy drywall or other wall material
- Coved moldings
- Impervious ceiling tiles and lighting fixtures

Must be able to stand decontamination with sodium hypochlorite solution



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NON-STERILE HD COMPOUNDING

- Primary Engineering Controls (PECs)
 - Class I Biological Safety Cabinet
 - (BSC) or
 - Containment Ventilated Enclosure (CVE)
- Air Handling
 - Externally Vented air
 - High Efficiency Particulate Air (HEPA) Filters in Series

HD Storage
Refrigerator
Sink
Designated Doffing Area



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CLASS I BSCS FOR NON-STERILE COMPOUNDING

- Protect the operator from exposure to HDs
- Do not protect HDs from exposure to the compounder



Image used with permission of AirClean Systems

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Class I BSC – Externally Vented

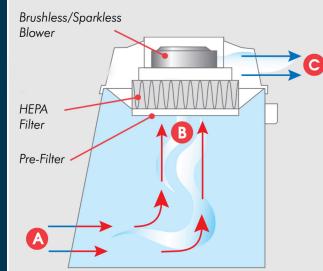


Image courtesy AirClean Systems

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Class I BSC – Redundant HEPA Filter

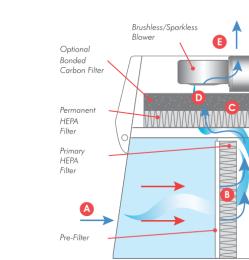


Image courtesy AirClean Systems

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KEY POINTS ABOUT C-PECS – NS

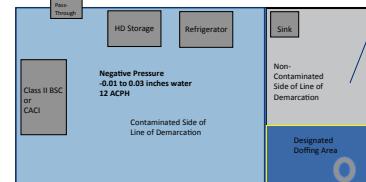
- C-PEC may be either externally vented or go through redundant HEPA filters in series
- These devices can include:
 - Class I or II BSCs
 - Vented balance safety enclosures
 - Compounding Aseptic Containment Isolators (CACIs)
- The C-PEC must operate continuously if it supplies some or all of the negative pressure for the C-SEC



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STERILE HD COMPOUNDING – CATEGORY 1



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CONTAINMENT SEGREGATED COMPOUNDING AREA (C-SCA)

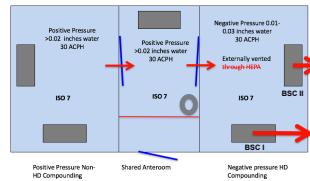
- Surfaces: Smooth, seamless, and impervious
- Pressure: 0.01-0.03 inches negative water column
- Air changes: 12 per hour
- Unclassified air
- May be used for storage (sterile HDs) and compounding
- Only for Category 1 CSPs
 - ≤12h room temperature
 - ≤24h refrigerated



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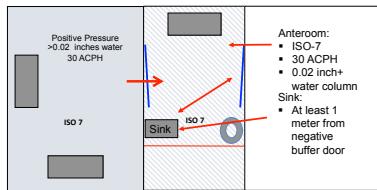
DESIGNS FOR BOTH CATEGORY 1 & 2 COMPOUNDING



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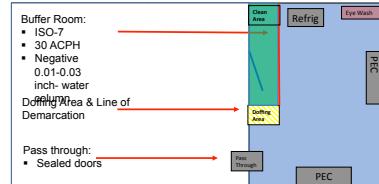
THE SHARED ANTEROOM



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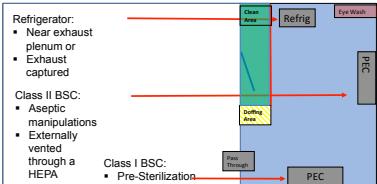
THE BUFFER ROOM



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THE BUFFER ROOM



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STERILE HD COMPOUNDING

- Smooth, seamless, and impervious surfaces
- Avoid particle board
- Floor laid seamlessly
- Epoxy drywall or other wall material
- Coved moldings
- Impervious ceiling tiles and lighting fixtures
- Must be able to stand decontamination with sodium hypochlorite solution
- Can ruin stainless steel if not inactivated



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CLASS II BSC TYPES

- Type A1:
 - 75 ft./min. inflow velocity
 - Exhaust into lab or canopy:
 - Into lab would be non-compliant
 - 70% of the air recirculated/30% exhausted
 - Have positive-pressure exhaust ducts - NOT SUITABLE FOR HDs
- Type A2:
 - 100 ft./min. inflow velocity
 - Exhaust into lab or through canopy:
 - Into lab would be non-compliant



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CLASS II BSC TYPES

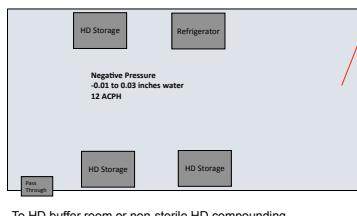
- Type B1:
 - 100 ft./min. inflow velocity
 - Exhaust to outside via direct duct connection
 - 30% of the air recirculated/70% exhausted
 - Suitable for minute quantities of volatile drugs
- Type B2:
 - 100 ft./min. inflow velocity
 - Exhaust to outside via direct duct connection
 - 100% of the air is exhausted
 - Suitable for volatile drugs



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A SEPARATE HD STOREROOM



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OTHER EQUIPMENT

- Spill kits
- Eye washes:
 - OSHA requirement: Handling materials that are "corrosive"
 - ANSI: Eye wash where employees are exposed to HDs
- Closed system transfer devices **should** be used:
 - MUST be used for administration if the dosage form allows
- Plastic-backed prep mat on surface of PEC
- Dedicated equipment is required:
 - Mortars
 - Pestles
 - Spatulas



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USP <795> AND <797> UPDATE TIMELINE

www.usp.org/compounding/updates-on-standards, accessed 3/9/2018



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STAY ABREAST OF USP CHANGES

- Expected date of final publication is June 1, 2019; becomes official December 1, 2019:
 - Harmonizes with USP<800> official date
- Sign up for updates at www.usp.org/hqs-signup-form
- Follow FAQs on USP website



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QUIZ TIME!

Per USP<800>, what is the 'starting point' for defining a drug as hazardous?

1. OSHA Technical Manual
2. NIOSH List
3. Safety Data Sheets
4. Pharmacist's judgment



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QUIZ TIME!

Which hazardous drugs **CANNOT** be exempted from the containment requirements of USP <800> by performing an assessment of risk?

1. HD APIs
2. Final dosage forms of compounded HD preparations
3. Antineoplastics requiring further manipulation
4. 2 & 3



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Which hazardous drugs **CANNOT** be exempted from the containment requirements of USP <800> by performing an assessment of risk?

1. HD APIs
2. Final dosage forms of compounded HD preparations
3. Antineoplastics requiring further manipulation
4. **1 & 3**



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QUIZ TIME!

Per USP<800>, external venting of the C-PEC is required for **nonsterile** compounding.

1. True
2. False



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QUIZ TIME!

Per USP<800>, external venting of the C-PEC is required for **nonsterile** compounding.

1. True
2. **False**



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QUIZ TIME!

Per USP<800>, external venting of the C-PEC is required for **sterile** compounding.

1. True
2. False



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QUIZ TIME!

Per USP<800>, external venting of the C-PEC is required for **sterile** compounding.

1. **True**
2. False



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QUIZ TIME!

The implementation date of USP<800> and revised <795> and <797> is:

1. June 1, 2018
2. June 1, 2019
3. December 1, 2019
4. If I close my eyes it will go away....



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QUIZ TIME!

The implementation date of USP<800> and revised <795> and <797> is:

1. June 1, 2018
2. June 1, 2019
3. **December 1, 2019**
4. If I close my eyes it will go away....



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THANK YOU

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