

NPS Goal 3.04.01 FAQ's: Medication Labeling in Perioperative and Procedural Areas

1. Does the requirement to label medications only apply to the operating room?

No. The requirement applies to all surgical and procedural areas that use medications or solutions. Examples include radiology, imaging services, endoscopy units, cardiac catheterization lab, EP lab.

2. What information should be on the labels?

- Drug name
- Strength
- Quantity
- Diluent and volume (if not apparent from container)
- Expiration date when not used within 24 hours
- Expiration time when expiration occurs in less than 24 hours

Note: the date and time are not necessary for short procedures as defined by the hospital.

3. Are there exceptions to the labeling?

Yes, if the medication is drawn up and immediately administered with no intervening step or break in the process, labeling is not required.

4. If a clinician draws up two medications into two separate syringes, then administers both medications, do the syringes need to be labeled?

Yes

5. What is the procedure when the person preparing the medication or solution is not the person who will be administering it?

Two individuals should verify the medication or solution labels both verbally and visually.

6. What should be done with medications or solutions found unlabeled?

They should be discarded immediately.

7. When should I discard labeled containers on the sterile field?

You should discard labeled containers at the end of the procedure. Note: This does not apply to multiuse vials that are handled according to infection control practices.

8. What is the procedure when staff who are responsible for the management of medications changes e.g. change of shift?

Entering and exiting staff should review all medications and solutions both on and off the sterile field.

9. How will the Joint Commission surveyor evaluate our compliance with labeling

- **Observe** if possible
- **Ask** when you label and what is included on the label.