

PREVENTION OF WRONG DOSE ERRORS

CHEMOTHERAPY ERROR PREVENTION RECOMMENDATIONS FOR CHEMOTHERAPY PRESCRIBING AND PREPARATION

CHEMOTHERAPY ORDERS:

- Develop a list of required elements, including patient data, that each set of chemotherapy orders must contain.
- Use standardized preprinted order forms or computerized prescriber order entry systems with built-in approved protocols and alerts.
- Never give verbal orders for chemotherapy (fax or e-mail orders instead).
- Use a high-quality fax machine to receive chemotherapy orders and avoid faxing "copies of copies."
- Handwrite chemotherapy orders in printed block letters.
- Write, imprint, or enter the patient's full name on chemotherapy order forms.
- Write or enter the date and time the chemotherapy orders are generated, and state the date and time chemotherapy is to be administered if different from the order date and time.
 Use military time, print "AM" and "PM" or use another identifier, such as "12 noon" to avoid confusion.
- **Review** the patient's allergy and drug-related adverse event history.
- Calculate or confirm body surface area calculation.
- Review the patient's data (e.g., diagnosis and stage of disease, laboratory test results, patient's weight)
 and select the initial treatment protocol. For subsequent treatments, review patient data to determine if
 dose escalation or reduction is indicated.
- **Review the patient's treatment records.** Confirm that there has been an appropriate time interval since the patient's last treatment. Determine the patient's cumulative chemotherapy dose when indicated.
- **Review the patient's response to treatment** and identify treatment-related toxicity that may require dose adjustment or a new treatment plan.
- Specify drug name, dose, route, and rate. For continuous chemotherapy infusions, state daily dose and total dose to be administered.
- Specify sequencing of chemotherapy agents to be administered when applicable.
- Spell out generic names of chemotherapy agents.
- Spell out the word "units."
- Use a consistent dose form, such as milligrams (mg), for all doses.
- Do not use trailing zeros for any dose >1 mg (e.g., 2 mg).
- Always place a leading zero in doses <1 mg (e.g., 0.8 mg).
- Double-check dose calculations.
- Check to see that chemotherapy orders are complete and include antiemetics, hydration, protective
 agents, and growth factors when indicated. Order test doses of chemotherapy if applicable. Specify patient
 monitoring parameters and frequency when indicated.
- Sign the orders and include contact information (e.g., phone or pager number) when required.

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