“Label all medications, medication containers (e.g., syringes, medicine cups, basins), or other solutions on and off the sterile field in perioperative and other procedural settings.”

**Rationale of Goal:** This new NPSG is a risk reduction activity that is consistent with safe medication practices and addresses a recognized risk point in the safe administration of medications in any procedural settings (e.g., OR, Cath Lab, bedside procedures). Errors have resulted from medications and solutions removed from their original containers and placed into unlabeled containers.

**What are the required changes?** Changes required for medications and solutions both on and off a sterile field include:

- A label will be applied when any medication or solution is transferred from the original packing to another container unless the medication or solution is administered and/or disposed of immediately by the person preparing that medication or solution
- A label will be applied when the medication is used slowly over the course of a procedure, even if the person administering the medication prepared it
- A label will be applied when the medication is prepared by a staff member other than the administering provider
- A label will be applied when the medication is prepared in bulk for the day’s cases
- A label will be applied when the provider preparing the medication participated in another function prior to administration

**Frequently Asked Questions:**

1. **Does this new NPSG 3D only apply in the Operating Room?** No, it applies to any setting in which procedures are conducted (e.g., pre-op holding areas, medical surgical units, clinics, Post Anesthesia Care Unit, Cath Lab, CT Scan, MRI, Endoscopy, Echo Lab, Cancer Center Infusion Treatment Area).

2. **Are there any exceptions to the labeling requirement?** If during a procedural process, a medication or solution is poured, drawn into a syringe, or otherwise used from its original container and immediately administered or disposed of in some fashion by the person preparing that medication or solution, labeling is not required. If, however, the medication or solution that has been removed from its original container will be used over the course of a procedure, the receiving container (e.g., syringe, basin, cup) must be labeled.

3. **What information does the label need to contain?** Labels need to include the following information:
   - Drug/solution name, strength, amount (if not apparent from the container)
   - Diluent for all compounded IV admixtures
   - Expiration time if less than 24 hours (consult pharmacy or package information for stability of drugs used)

4. **Is it acceptable to label a syringe by taping the vial (from which the medication was drawn up in) to the syringe?** No, this is not acceptable as a label.

5. **Is it acceptable to “pre-label” a syringe or basin?** No. The label should be prepared and applied at the time the medication or solution is being prepared. Pre-labeled syringes or basins carry the risk of placing the medication/solution into a syringe/basin that is pre-labeled for a different medication/solution.

6. **When do intravenous fluid bags need to be labeled?** When they contain an additive(s).
Practice Implications of “Medication Labeling” at Stanford Hospital & Clinics

**Best Practices:**

- When drawing up a medication from its original container into a sterile syringe, withdraw only the amount you plan to administer. Labeling is not required if immediately administered or disposed of by the person preparing that medication or solution.

- If a medication or solution is removed from its original container and is used over the course of a procedure, then the receiving container must be labeled (for example, IV anesthetic agents, prep solutions, normal saline used to rinse cardiac valves, local anesthetics, clotting agents).

- Immediately discard all medications and solutions found unlabeled.

- At shift change or break relief, review all labeled medications and solutions both on and off a sterile field with entering and exiting personnel.

- When two or more qualified individuals participate in the preparation and administration of a medication or solution, verify all labels both verbally and visually with the two (or more) qualified individuals.

- Discard all containers containing solutions and medications (e.g., IV bags, syringes, basins, cups) at the end of a procedure.

**Examples of Procedural Solutions and Medications That Require Labeling**

<table>
<thead>
<tr>
<th><strong>Solutions</strong></th>
<th><strong>Drugs</strong></th>
</tr>
</thead>
<tbody>
<tr>
<td>• Saline</td>
<td>• Midazolam</td>
</tr>
<tr>
<td>• Sterile Water for Irrigation</td>
<td>• Fentanyl</td>
</tr>
<tr>
<td>• Dye contrast</td>
<td>• Heparin</td>
</tr>
<tr>
<td>• Lidocaine</td>
<td>• Anesthetics</td>
</tr>
<tr>
<td>• Povidone-iodine (Betadine)</td>
<td>• Meperidine</td>
</tr>
<tr>
<td>• Chlorhexidine (ChlorPrep)</td>
<td>• Propofol</td>
</tr>
<tr>
<td>• Hydrogen Peroxide</td>
<td>• Kenalog</td>
</tr>
<tr>
<td>• Dakin’s Solution</td>
<td>• Botox</td>
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</tbody>
</table>

**Figure 1.** Sterile syringe labeled appropriately for moderate sedation procedure.

**Figure 2.** Labeled cup on sterile field. *(NOTE: Labels & pens for sterile procedure trays are forthcoming).*

Remember the Motto:

“Either waste it or label it!”