

University of Virginia

Alaris® System Implementation

Go-Live Questions

When are we converting from our old technology to the Alaris® System?

The Go Live date for converting from our old technology to the Alaris® System is April 26, 2016. Some departments will receive their pumps either the evening before go-live or early the next morning day of go-live to allow them to start their first patients of the day with the new Infusion Pumps.

Command Center number for go-live day is 434-760-5132 for questions that may come up.

I was not able to attend training, what should I do?

Complete the CBL that can be found in NET LEARNING under Alaris pump and review the training video with an Infusion pump follow along with the instructor. A Super Trainer will need to check you off as having completed the teaching points for each module.

What if I have an unstable patient when it is time to change over devices?

If there is any instability with your patient at the time to change over the patient to the new device, we want you to take the necessary steps ensuring patient safety. Wait until there is a better time to transition the over patient to the new pumps.

Where can I find resources for questions about the device?

Each pump will come equipped with the Quick Reference cards for the pump and modules. Each of the units has designated Super Trainers to help their peers with questions about the device. The pump library can be found on the pharmacy website.

Starting on Go Live there will be a CareFusion Specialist available for the next 7 days 24 hours a day who can be reached at:

- **434-760-5131 from 700 AM to 700 PM**
- **434-760-7568 from 700 PM to 700 AM**

Where do I put the old devices once my patient is changed over to the Alaris® System?

Each unit will identify a designated area for the placement of the "blue" devices so they can be removed from the clinical units.

Who will be needed on nursing units when the Go-Live team arrives?

We ask that the Department Manager, CNS and Super Trainers be available on the unit when the carts are scheduled to arrive on the units. A detailed plan will need to be developed on how to change over their pumps.

Are there any major practice changes I should be prepared for upon Go-Live?

All of the practice changes have been shared with you in your training classes. PNSO has provided an overview of the policy/procedure changes that have been updated for the new infusion pump.

The continuous infusion of narcotics will no longer occur on the CADD pumps. The Large Volume Pump will be the module by which these infusions should be delivered on. The use of a lock box with these infusions is mandatory. These medications will have noted within EPIC MAR that lock box and no port tubing is to be used with the medication. These will be supplied by the Patient Equipment Department. Please leave both the PCA module and Lock Box's unlocked once the medication has been wasted. These

Boxes need to be returned to the Patient Equipment Department

Have Super Users been trained for all shifts on each nursing unit?

Each of the units has been asked to have Super Trainers available to cover each of their shifts for at least the first 24 hours. They need to be available to complete the Competency Verification Report (CVR) with the staff.

Will we be changing all IV meds at Go-Live?

We are going to try to change over all of the IV medications during the day of go-live. If a patient is too unstable to do such then we ask that the changeover happen as soon as possible that day. Pumps will be left for the patients to be changed over the course of the day as patient condition permits and certain medications are completed.

When should I switch to the new tubing on my patient?

As you setup your new pump, you should be switching to the new tubing indicated for the LVP, PCA and Syringe modules. In consultation with Infection Control it is recommended that you start with a new infusion and tubing. **Do not respike** the bag to prevent contamination. Please use messaging with the Pharmacy to be prepared with the necessary medicated infusions for your patient's change over. This will allow for a smooth transition.

Using the Device

Will the device remind me to unclamp my secondary medication set?

Yes, it will remind you.

I need to order a device. Who do I call? What do I call it?

You would enter the PC Unit and the type of module into the Service Tracking request site for the following:

IV Pump- PC unit (White)

IV Pump-LVP (Blue)

IV Pump-PCA (Purple)

IV Pump-Syringe (Gray)

The device that was changed out was in isolation, what do I do?

Leave the device in the room until it can be wiped down based on the type of precaution that the patient was on. Remove it from the room once it has been cleaned down. Place the device in the soiled holding area for pick up by Patient Equipment Department.

How should the Alaris® System be cleaned between patients?

If an Infusion pump is going to be used after it had been in contact with another patient it will need to be wiped down with PDI (Purple Top) Sani Cloth or 0.1% Bleach Wipes in case that require it.

If a patient transfers between units, who is responsible for resetting the profile?

If a patient transfers between units the profiles will not need to be changed as long as the patient remains within in the same profile. So, if a patient is transferred from the NICU Service to the Pediatric Service, the

Pediatric unit would need to reset the profile on the pump from NICU to Pediatrics. This is done by powering down and then powering on the IV pump.

How will the Alaris® System be used with parenteral nutrition in the NICU?

The LVP module will be used to deliver parenteral nutrition in the NICU.

Will the Alaris System be used for breast milk and enteral feeds in the NICU, PICU and Peds Acute Units?

Not at this time, the Med Fusion 3500 pumps will continue to be used to deliver these products in these areas for the appropriate patient population. Each clinical area in the Children's Hospital will have a designated amount of these pumps for use in enteral feedings.

Will the Alaris System be used for Inhaled Medications given by Respiratory Therapy?

Not at this time, a designated amount of Med Fusion 3500 pumps will continue to be used by Respiratory Therapy for inhaled medications.

Where can I find a copy of the Alaris® System Directions for Use?

These will be delivered to each unit at the time of go-live. Quick guide reference laminated sheets will be attached to each PC Unit.

Will any of the Alaris® System modules be attached or will they all be standalone?

The modules will not be attached as each department has different module demands. Ordering of the PC Unit and modules will be separate in Service Tracking.

What are the major changes between our current technology and the Alaris® System?

The Alaris System has improved their guardrails to ensure patient safety with infusions. The library is composed of four areas: continuous infusions, intermittent infusions, PCA and fluids. This makes for a more robust library, which includes anti-infectives, chemotherapy, and study drugs. The Alaris System is wireless, which will allow pharmacy to remotely update drug library. In Phase two, the pump will enhance patient safety further with bi-directional data flow with EPIC MAR.

Will there be a designated quota of Alaris® Systems for each unit?

The plan is to replace all of the "blue" Alaris that are currently within the Medical Center, TCH and Off site Centers.

Data Set Questions

What profile do I work in? (Provide a list of profiles with corresponding units)

There are three profiles that can be use:

Adult – services all of the adult patient populations

NICU – services the NICU patient population and those patient who are receiving care from Neonatology Service outside of the NICU

Pediatrics - services the PICU and Acute Care Pediatric population who are receiving care from Pediatrician.

Module-specific Questions

Can I run blood on the Alaris Large Volume Module (LVP)?

Yes, blood can be run on the LVP module. At no time should a pressure bag be used while infusing blood on the pump. Only those units who have been infusing blood currently through the pump can continue their practice of running blood on the new pump.

What is the procedure for Continuous Controlled Substance Infusions?

With new Alaris System, CADD pump will no longer be used for the continuous infusion of controlled substances. Large volume module will be used with a lock box for administration of these infusions. Pharmacy will designate on MAR that a lock box and no port tubing are required with specific infusions.

The exception will be patients who are unstable requiring constant 1:1 care with a destination of an ICU or patients who are admitted directly to the ICU from the OR under the supervision of the anesthesiologist or the resident. Otherwise, the expectation is that once the patient stabilizes requiring less direct supervision outside of ICU, becomes a boarder in the ED waiting for an ICU bed or is admitted to an ICU then the lock box will be required to prevent medication diversion.

The tubing fill will be 23ml when priming a new tubing set which needs to be accounted for on the EPIC flowsheet.

What should I do if I receive a Guardrails® alert?

Determine the level of the Guardrails alert as there two alerts. First alert is to inform you at you have reached a soft alert which indicates that you have exceeded the soft limits for the drug and asks the user if they wish to continue. The second is a hard alert which cannot be exceeded under any circumstance and requires re-programming. Hard alerts have been selected for agents that pose significant patient safety risks if programmed.

Who should I call if I have questions about the data set profiles (i.e., the drug library)?

Your clinical pharmacist should be contacted for questions regarding the data set profiles.

What if I can't find a drug in the Guardrails® drug library?

Contact your clinical pharmacist for assistance.

What is the process for suggesting revisions to the Guardrails® drug library?

The library and all modifications must be approved by the Pharmacy and Therapeutics (P&T) Committee. To submit a library revision, please use the following form on the pharmacy website.

http://www.medicalcenter.virginia.edu/intranet/pharmacy/forms/infusion_pump_change_request_form_apr_2016.html (here).

Are chemo drugs included in the Guardrails® drug library, if so, under which profile?

Chemotherapy drugs are included in the Guardrails® drug library located under either the Adult or Pediatric Profiles.

Will all drugs be available in the Guardrails® drug library?

The goal for the pumps is that all drugs administered by IV infusion are available in the library.

How will emergency drugs be handled in the Guardrails® drug library?

The Emergency (Code) drugs have been set up under the ZZ section of the Guardrails® drug library.

How would I know if there was a drug library change?

On the home screen of the PC unit in the upper portion of the screen is "UVA with a date" this refers to the date of the last update. In order to be sure that the pump is current with the latest version of the drug library it is important to power down the pump after use of the pump. Do not attempt to update a pump while a patient is receiving an infusion on the pump.

What is the policy for PCAs? Are there any changes to our current policy?

The policy for PCA remains the same other than a change in device name from CADD to PCA. The library has changed to having only three types of PCA available to the patient. It is to be used only for Patient Controlled Analgesia not Provider Controlled Analgesia. Please consult with your unit clinical Pharmacist to assist you and the LIPs on the ordering of PCA.

A designated access code furnished by Pharmacy will allow for PCA programming changes to occur outside of the chamber without needing the PCA key. Please use the "key" drawer in Pyxis for the access code.

Priming of the PCA tubing requires a fill of 3ml which needs to be accounted for on the EPIC flowsheet.

How will PCA keys be obtained?

PCA keys for the new pumps will be available in Pyxis under "Key".

How will we obtain PCA syringes?

These will be through your Pyxis machine either in the matrix drawers or the towers depending on the unit that you work on. On the day of go live you will see a mix of CADD cassettes and PCA syringes. The CADD cassettes will be removed shortly after go live.

Will CADD pumps be available for PCA infusions?

PCA infusions will be on the CareFusion Alaris PCA module only. Approximately a week later the CADD pump library will be transitioned to addressing the CADD Epidural Library only.

Will CADD pumps be available for Epidural or Neuroaxial infusions?

Yes, both Epidural and Neuroaxial infusions will continue to be on CADD pumps. The library will be adjusted to focus on these types of infusion post Go Live.

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