



⑩ Nilson Gonçalves Malta

- ⑩ Pharmacist
- ⑩ Post Grad. Hospital Administration
- ⑩ 12 years of experience in automation
 - ⑩ Software design, testing, training and implementation
 - ⑩ Automated systems implementation

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⑩ HIAE numbers (2010)

- ⑩ More than 8.600 active employees (2011)
- ⑩ Morumbi Unit
 - ⑩ 614 beds (2011)
 - ⑩ 167.389 patients-day
 - ⑩ 108.543 ambulatory consults in the Urgent Care
 - ⑩ 28 operation rooms (2 Surgery Centers)
 - ⑩ 33.171 surgeries
 - ⑩ 3.448 labours
 - ⑩ The world most important liver transplant Center in 2010 – 198 procedures.



Organization Accredited
by Joint Commission International

How do we do at Einstein

- Use of GS1 DataMatrix identifying each vial or ampoule (when ready identified by the pharmaceutical company) (about 120.000 /mo.);
- Tablets deblistering and re-packaging (about 180.000 /mo.);
- Ampoules and vials re-labeling (about 250.000 /mo.);
- Unit Dose dispensing system (oral solids and injectables);
- Electronic ordering;
- Pharmacist review of 100% of all inpatient orders;
- **Result:** JCI and ISO 9000 accreditations.

"When you control the process, every error seem to be bizarre."

Bertil Lenderink



- Hospital Pharmacist Tilburg 1982 – 2007
- Clinical Pharmacist – Informatician
- All Care 4 IT
- First unit-dose distribution pharmacy
- Development Theriak (Closed loop CPOE)
- First European hospitals using 100% BCMA
- Chairman IT committee NVZA
- Advisory board GS-Logic NL
- Advisor Nictiz , several software companies





Statement



Medication safety in a closed loop manner within institutions, or even in community, is only possible when there is also an electronically readable code with essential information for supplier and patient on the direct (primary) package of all medications.

The GS1 data-matrix barcode is by far the best solution



Pharma @ point of care



Name

- Feargal Mc Groarty

Organisation

- St. James's Hospital, Dublin, Ireland

Roles

- Project Manager - responsible for managing a programme to implement an integrated haemophilia patient management process using GS1 barcode standards
- Project manager – HSSU instrument tracking system

GS1 activities

- Clinical Co – Chair Healthcare Providers Advisory Council (HPAC)
- Previous Co-Chair – “Barcoding plasma derivatives – Implementation guide”

Goals

- To move GS1 from theory to practice/implementation
- Demystify GS1 acronyms!
- Provide end users with useful information on what is exactly required to implement barcode scanning at the point of care