GS1 HUG

Thank you for not smoking

Global Healthcare User Group
GS1 HUG™ ~ Minneapolis ~ June 2006

Communication and Coordination

Rich Hollander - Pfizer & Jim Willmott - Smiths Medical

Hosted by:

Medtronic
Alleviating Pain · Restoring Health · Extending Life

The global language of business

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HUG

HUG Acronyms

HUG = Healthcare User Group

Helping Us Grow
Horizons Unlimited Group
Help Understand Guide
Handheld Users Group
Helping Unite Generations
Healthcare UnderWriters Group
Health Utilities Group
Hampton Roads User Group
HEASARC* User's Group
Heater Unit, Gas
High Desert User Group
Heavy Utility Gloves
HTE Users Group
Humanity United in Givin
Highland Users Group
Hodgkins United Group
Horizon Users Group
Holga User Group
Honeywell Users Group
Hydrologische Untersuchungsgebiete der Schweiz
HAZUS User Group
Hagerstown Users Group
Help Uncover the Gem
Holiday Utility Gift
Haxial User Group
Helping Understand Grief
Host Users Group
Harrington Users Group
Housing Unlimited Group
Harvard University Graduate
Harvard University Geohome
Helsinki University Geodesy
Helsinki University Geography
Helsinki University Geophysics
Herndon Unique Gifts
Hints Ultima Games
Hofstra University Geology

* High Energy Astrophysics Science Archival Research Center

http://acronyms.thefreedictionary.com/

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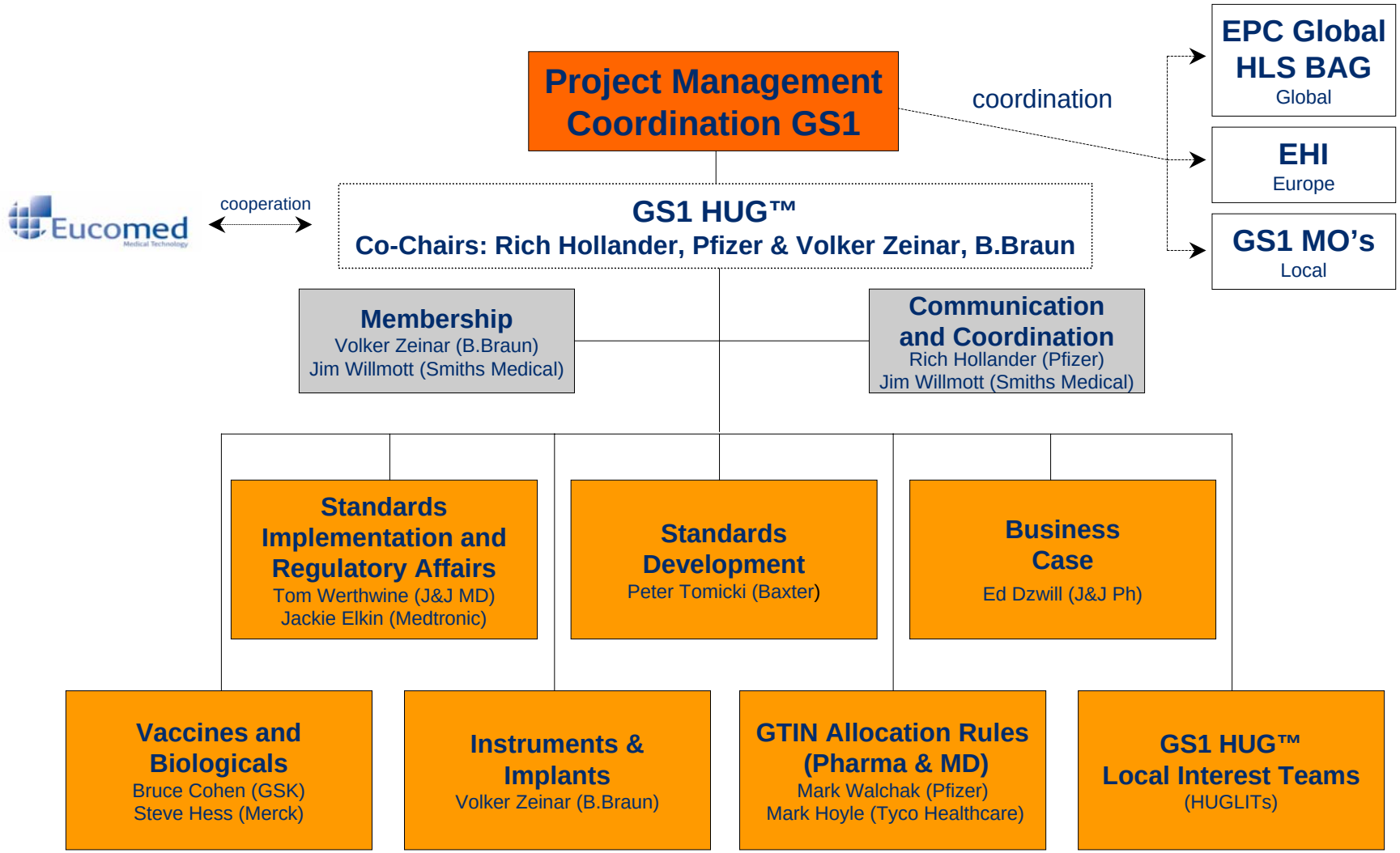
GS1 HUG™ Organisation



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Communication and Coordination

Objectives:

Lead and organise internal and external communications of the HUG to establish the HUG as the leading voice in the area of automatic data identification in the Healthcare Industry.

Scope:

- Identify key areas for which we establish recommendations and end-users to address
- Build Communication and Coordination infrastructure

Deliverables:

- Communication strategy
- Press releases
- Newsletters
- Structure and content of website

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Eucomed Medical Technology

Voice of the Medical Technology Industry in Europe and Beyond

Membership ~ 60 Companies and 26 Associations

This represents about 80% of the industry in Europe (turnover)

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Eucomed Medical Technology

GS1 HUG™ + Eucomed ETF (eBusiness Task Force)

- Currently members from each group are working together to agree a process of cooperation
- HUG will attend ETF meetings and ETF will attend HUG meetings
- Information will be regularly exchanged between each group
- A number of ETF members will be identified to act as representatives to the HUG

- A delegation of HUG Leadership & Work Team members & ETF members will meet the Department of Health (UK) on the 26 July to discuss UK NHS strategy with regard to auto-ID. A pre-meeting will take place in London at the ABHI *(Association of British Healthcare Industries)*

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GS1 HUG™ Website:

GS1 Healthcare User Group

Mission and Vision

Our **mission** is to lead the healthcare industry to the effective utilization and development of global standards with the primary focus on automatic identification to improve patient safety.

Our **vision** is to become the single source for regulatory agencies and trade organizations (manufacturer, wholesaler, hospital and pharmacy) to seek input and direction for global standards in the healthcare industry.

Find out more about the HUG: download the HUG brochure

Join GS1 HUG

To join, please contact Ulrike Kreysa at ulrike.kreysa@gs1.org.

- View list of existing members
- Find out more about the HUG

News

23 May 2006: The most recent HUG newsletter has just been published. Find out about recent developments in the HUG and full reports from the March 2006 HUG meeting in Rome. View all HUG Newsletters.

27 March 2006: The third meeting of the global GS1 Healthcare User Group (HUG) took place in Rome, (Italy) from 21 - 23 March 2006. View meeting summary.

View past news items

Future Meetings

Next HUG Conference
13 - 15 June 2006
Minneapolis, USA
Register now!

Find out more about the conference

This conference will be hosted by:

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GS1 Healthcare User Group

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News

Announcements

- **23 May 2006:** The most recent HUG newsletter has just been published. Find out about recent developments in the HUG and full reports from the March 2006 HUG meeting in Rome. View all HUG Newsletters.
- **27 March 2006:** The third meeting of the global GS1 Healthcare User Group (HUG) took place in Rome, (Italy) from 21 - 23 March 2006. View meeting summary.
- **16 March 2006:** The March 2006 HUG newsletter has just been published. Find out about recent developments in the HUG, new work teams and regional activiites in South America. View all HUG Newsletters.
- **05 December 2005**: The second meeting of the global GS1 Healthcare User Group (HUG) took place in Princeton (US) from 29 November - 1 December 2005. View meeting summary.
- **28 September 2005**: Yesterday two industry co-chairs were elected by the HUG work team leaders, one from a pharmaceutical company, one from a medical device company. Rich Hollander (Pfizer) and Volker Zeinar (B.Braun) will represent the HUG group towards third parties.
- **16 September 2005**: The most recent HUG meeting took place in Brussels from 13 - 15 September 2005. View meeting summary.

Press Releases

- **18 November 2005**: Patient safety is the focus of the healthcare industry and regulatory bodies. The second meeting of the global GS1 Healthcare User Group (HUG) focused on gaining an understanding of global regulatory requirements regarding patient safety as well as reporting progress the group has made since the kick-off meeting in May. View full press release.
- **18 July 2005**: Healthcare industry works together to improve patient safety. Leading global companies from the pharmaceutical and medical device industry have formed a global GS1 Healthcare User Group (HUG). Its objective is to lead the utilisation and development of global standards for the healthcare industry, with the primary focus on automatic product identification to improve patient safety. View full press release.

Newsletters

- May 2006 / No. 3
- March 2006 / No. 2
- November 2005 / No. 1

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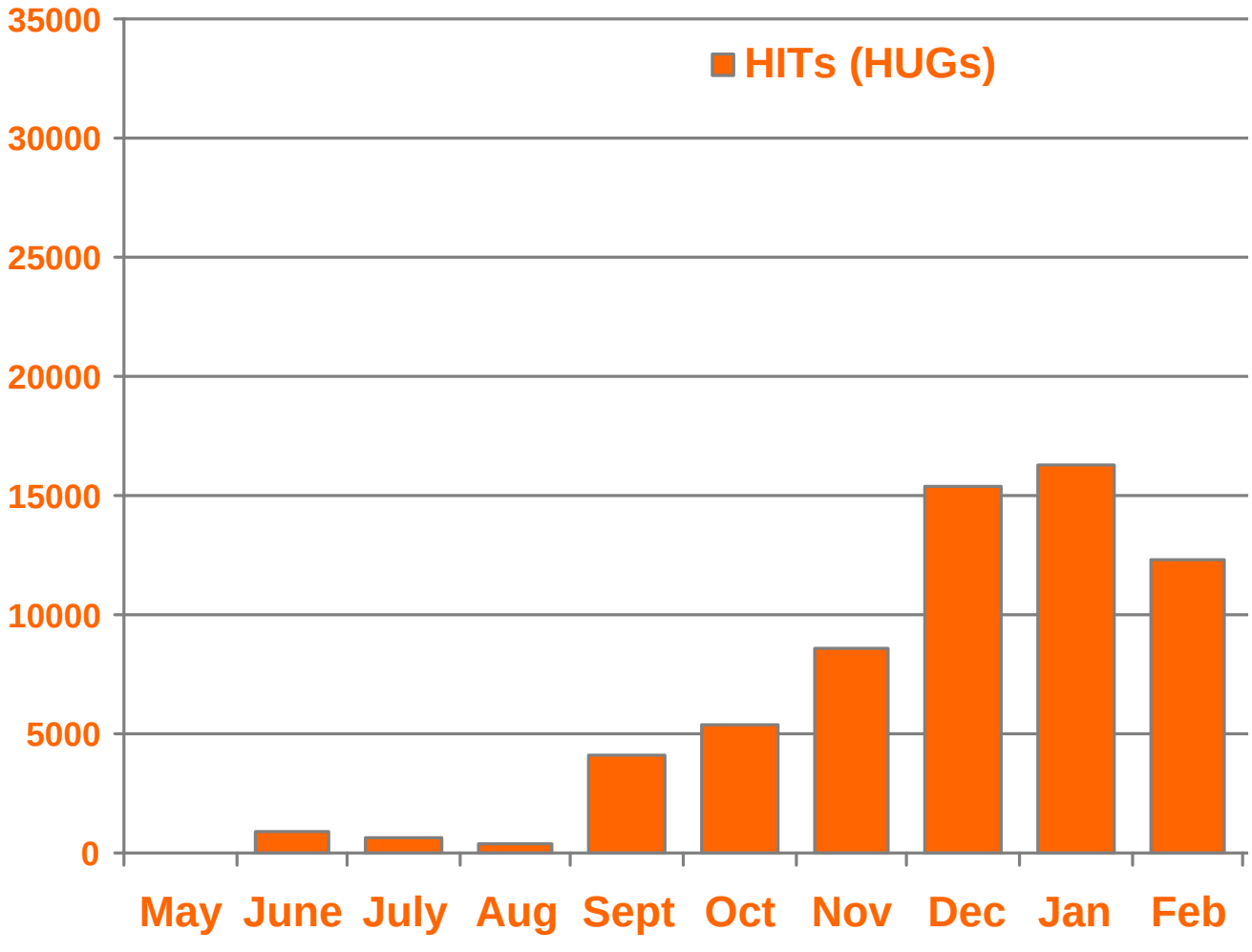
GS1 HUG™ Website:



Joe Horwood
GS1 webmaster

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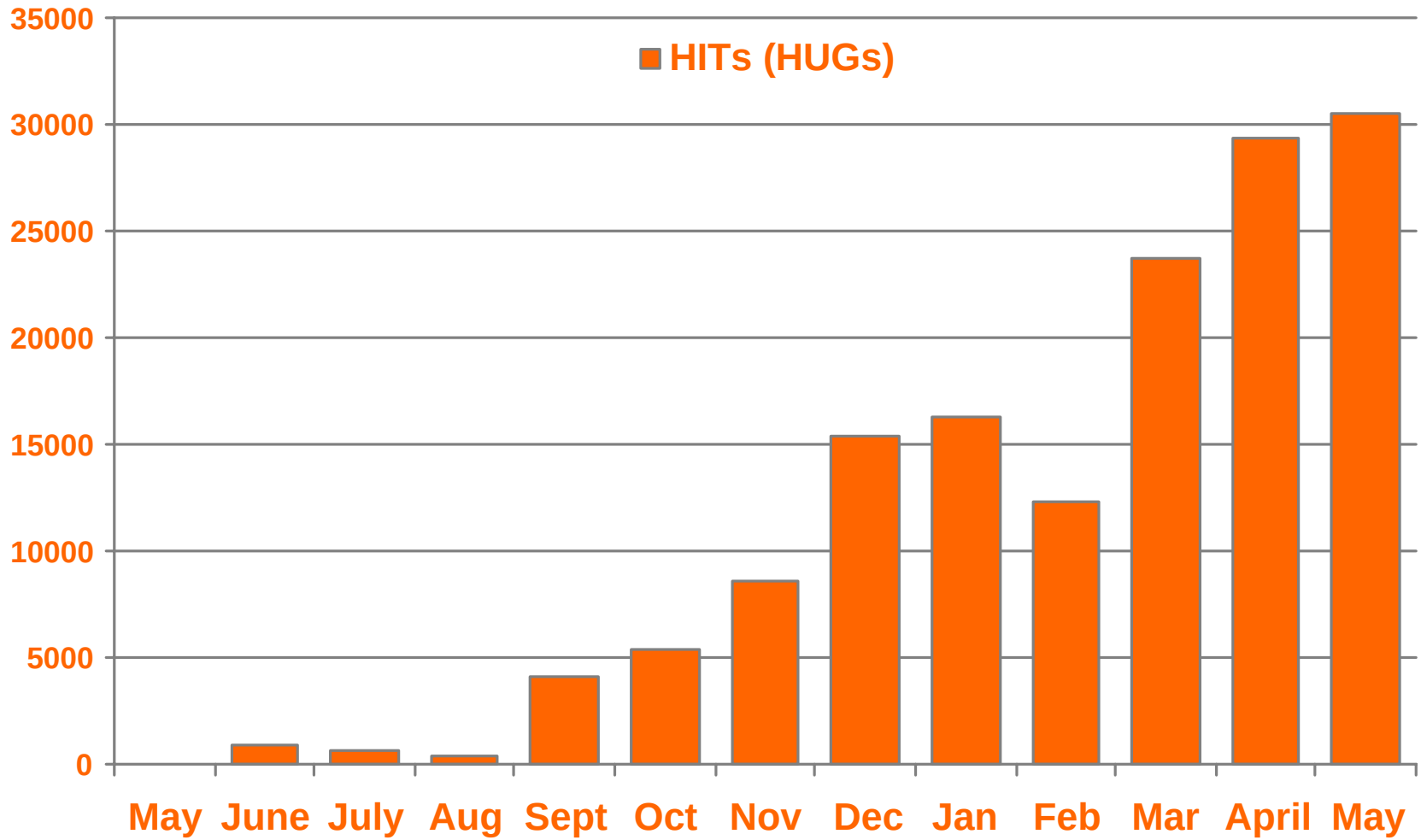
GS1 HUG™ Website:



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HUG Press Releases:

Monday, 18th July 2005

HEALTHCARE INDUSTRY WORKS TOGETHER TO IMPROVE PATIENT SAFETY

Leading global companies from the pharmaceutical and medical device industry have formed a global GS1 Healthcare User Group (HUG). Its objective is to lead the utilisation and development of global standards for the healthcare industry, with the primary focus on automatic product identification to improve patient safety.

Baxter, Boston Scientific, B.Braun, 3M, GSK, Hospira, Johnson & Johnson, Medtronic, Merck, NACDS, Pfizer, Smiths Medical and Tyco have participated in the kick-off-meeting, which took place on 23 May 2005 in Princeton, New Jersey and have committed to participate actively in the group. It is the first time that the healthcare industry is aligning around a global solution to enhance automatic product identification for the benefit of patients worldwide. The work of the HUG will improve the performance of the healthcare supply chain for drugs and medical devices through the collaborative development and endorsement of recommended voluntary GS1 standards and best practices.

The main focus areas for the group are the following:

- Prevention of Medical errors
- Product Authentication
- Tracking and Tracing
- Increase total Supply Chain efficiency

More follows…

November 2005

PATIENT SAFETY IS THE FOCUS OF THE HEALTHCARE INDUSTRY AND REGULATORY BODIES

Assuring patient safety worldwide was the focus of the second meeting of representatives of the world's leading pharmaceutical and medical device companies and health regulators from the EU and major countries. The participants agreed to drive an industry initiative to develop global barcoding and e-commerce solutions for health care products based on GS1 standards.

Speakers from the European Commission (DG Enterprise and DG Sanco), the European Agency for the Evaluation of Medicinal Products (EMEA), the USA Food and Drug Administration (FDA), the Italian Ministry of Health, the National Patient Safety Agency of the NHS, United Kingdom and the Regional Healthcare Service Area of Andalucía, Spain presented their work and views about patient safety. The participants and speakers appreciated the opportunity to have an open discussion and to exchange information exchange and agreed to carry the work of the HUG forward by working together more closely.

Delegates from 22 leading global pharmaceutical and medical device companies and 10 GS1 Member Organisations discussed the HUG work plan and listened to the requirements of regulatory bodies. The HUG is concentrating particularly on ensuring that appropriate data structures are selected in order to meet common business needs, and to help ensure data standardisation in healthcare. If standardisation is applied globally, systems to improve patient safety will be developed and implemented quicker than if individual countries were to pursue

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HUG Newsletters:

GS1 HUG

The global Healthcare User Group
GS1 HUG™ - Newsletter No. 3

Welcome to the third edition of the **GS1 HUG™ Newsletter**! This newsletter aims to inform you regularly about our activities and progress in the global Healthcare User Group, GS1 HUG™. We look forward to receiving your comments, feedback and questions, possibly for inclusion in future newsletters.
More information can be found on our website http://www.gs1.org/hug/

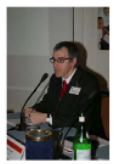
Third meeting of GS1 HUG™ global Healthcare User Group in Rome, Italy.

The GS1 Healthcare User Group, GS1 HUG™ met from 21 to 23 March 2006 for the third time, discussing and developing global healthcare business requirements to improve patient safety.

The 3-day conference provided valuable perspectives, from various parties in the healthcare supply chain, into a wide range of business issues requiring GS1 standards in support of their resolution. The issues discussed ranged from prevention of dispensing errors, visibility into healthcare costs, e-commerce to serialization. Work teams had the opportunity to meet and have more in depth discussions about how to begin aligning towards existing global standards for each area or conversely, to identify standards that do not yet exist and need developing.

This time the meeting took place in Rome and was hosted by GS1 Italy, supported by sponsorship through Pfizer. Alvaro Fusetti, the CEO of GS1 Italy, and Dr. Bergamaschi, from the Italian Ministry of Health, welcomed the 80 delegates from global manufacturers, wholesalers, hospitals, associations, regulatory bodies, GS1 member organisations and GS1 Global Office.

Alvaro Fusetti, GS1 Italy gave a short introduction into the GS1 organisation and explained the broad GS1 product and service portfolio with BarCode, eCom, GDSN and EPCglobal. He also underlined the importance of the work in the healthcare industry for GS1.



Dr. Bergamaschi introduced the traceability project of the **Italian Ministry of Health** and the current status. The second phase of the project has now started. The first promising results can be seen and a technical working group has been formed, to which GS1 is invited to participate.

Rich Hollander, HUG Co-Chair, Pfizer provided an overview of the HUG, including its formation, mission and vision, present focus areas, guiding principles and work teams.

Afterwards the HUG work team leaders from **Smiths Medical, Medtronic, Johnson & Johnson Medical Devices and Pharmaceuticals, Baxter, GSK, Merck and B. Braun** broadened this understanding by providing more information about the objectives, actions and status of their work teams.

> **"Our target was to use international and most shared systems of reference. For the codification system the choice is GS1. "**
>
> Pascal Mariotti, University Hospital of Lyon

Mark d'Agostino, VP of GS1 Standard Development, expressed the commitment of GS1 to develop the standards the healthcare industry needs and appreciated the commitment of the HUG to the GSMP, the GS1 Standard Development process.

GS1 HUG

Le global Healthcare User Group
GS1 HUG™ - Newsletter No. 3

Voici le N° 3 de la Newsletter du GS1 HUG™.

Cette publication a pour but de vous informer régulièrement sur les activités et les avancées du Groupe international de l'industrie pharmaceutique et des dispositifs médicaux GS1 HUG™.
Adressez-nous vos commentaires, vos remarques et questions, qui pourront être inclus dans nos futures Newsletters.
Vous aurez plus d'informations en consultant notre site web www.gs1.org/hug/.

Troisième réunion du Groupe international des industriels de produits de santé (GS1 HUG™) à Rome, Italie.

Le GS1 HUG™ s'est réuni pour la 3ème fois du 21 au 23 Mars 2006 pour traiter des besoins internationaux en matière de gestion des processus pour améliorer la sécurité des patients.

Cette réunion s'est tenue à Rome, organisée par GS1 Italie et parrainée par Pfizer. Alvaro Fusetti, Président Directeur Général de GS1 Italie, et le Dr. Bergamaschi, du Ministère Italien de la Santé ont accueilli les 80 experts mondiaux représentants les fabricants, grossistes, hopitaux, associations, organismes de réglementation, organisations membres de GS1, et le Bureau mondial de GS1.

Alvaro Fusetti, GS1 Italie a fait une brève présentation de l'organisation GS1 et expliqué le porte-feuille complexe de produits et services de GS1 avec BarCodes, eCom, GDSN et EPCglobal. Il a également souligné l'importance des travaux de l'industrie médicale pour GS1.

Le **Dr. Bergamaschi** a présenté le projet de traçabilité du **Ministère Italien de la Santé**. La seconde phase du projet a commencé. Les premiers résultats positifs sont déjà visibles, et un groupe de travail technique a été consti-tué, auquel GS1 est invité à participer.

Rich Hollander, Vice-président de HUG, Pfizer a présenté la mission et les objectifs du HUG, ses travaux en cours, et son mode de fonctionnement.

Ensuite, les autres partenaires du HUG qui sont **Smiths Medical, Medtronic, Johnson & Johnson Medical Devices and Pharmaceuticals, Baxter, GSK, Merck and B. Braun** ont developpé ces aspects et fournis plus d'informations sur les objectifs et actions de chacun de leurs groupes de travail.

Mark d'Agostino, VP du Développement des Standards de GS1, a confirmé l'engagement de GS1 à développer des standards répondant aux besoins de l'industrie pharmaceutique et des fabricants de dispositifs médicaux.Dans ce sens il se félicite de l'engagement du HUG aux travaux du GSMP, le Processus de Développement des Standards de GS1.

Suivi et repérage dans le milieu médical clinique Suisse

Christian Lovis, Chef de l'unité Informati-que Clinique de l'Hôpital Universitaire de Genève, Suisse, a présenté un intéressant aperçu de l'utilisation de la technologie RFID pour améliorer les soins aux patients et l'efficacité dans son hôpital. La technologie est principalement utilisée dans les aspects logistiques liés aux soins, tels que les contrôles d'accès, pour le contrôle de la distribution de linge avec la réception et la distribution des produits, mais aussi pour

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Articles:

WHAT WE NEED IS...

A global auto ID standard can help solve counterfeit issues

by Rich Hollander
Senior Director, Packaging Services, Global Manufacturing, Pfizer Inc.

There are pressing issues in health care today for which automatic identification—linear or two-dimensional bar codes or radio frequency identification (RFID)—is part of the solution. Specifically, I'm talking about dispensing errors, counterfeiting and diversion or fraud.

The Food and Drug Administration believes that part of the solution to counterfeiting, diversion and fraud is to serialize every package, capture that data as the package moves through the supply chain and authenticate the package at each step. The FDA also believes the use of RFID technology is the most promising technology to enable this to happen.

"They're all trying to solve the same business issues with different approaches, though. That's a problem. It's not efficient."

I believe serialization is a very strong solution. Previously, it was difficult to deploy in mass and too many proprietary solutions were available to set any standards.

But when the pharmaceutical industry started hearing about the electronic product code back in 2001, we said, "Oh, now there might be something." The EPC could be that unique serial number as it, and the supporting infrastructure, is being developed with open standards.

Global commonalities

Dispensing errors, counterfeiting and diversion are business issues facing not only U.S. drug manufacturers. There is a need for a clear understanding of these common issues globally. The European Commission and other individual markets are starting to promulgate regulations, forcing standards in the area of automatic identification. They're all trying to solve the same business issues with different approaches though. That's a problem. It's not efficient. Our global sourcing strategies become difficult to implement if we have to cater to different market needs for this.

To start the process for global standards development, GS1 (previously the Uniform Code Council and EAN International) recently established a global Healthcare User Group.

The idea here is that HUG will help align the health care industry to the effective use of global standards for automatic identification. These standards largely exist today; we just need to direct parties on how to effectively use them to address these issues. Where standards still need to be developed, HUG will initiate accordingly with the appropriate group within GS1.

Through an organization like HUG, we can develop technical solutions that will work for everyone.

Generally, the right technical solution will also minimize cost; be scalable at the global level; and have optimal impact on the business issue. By harmonizing around global standards, we can implement solutions faster than if each market would individually mandate their own.

Visit www.gs1.org/hug to learn more about the GS1 HUG™ and to find out how you can participate and benefit. FADP

With Pfizer since 1990, Rich Hollander has responsibility for all areas of global package design and development for Pfizer's Animal Health, Consumer Healthcare and Human Health businesses. Hollander is an active leader on various committees, work groups and task groups aimed at addressing issues within pharmaceutical packaging. He currently serves as co-chair and communications chair for the GS1 Healthcare User Group (www.gs1.org/hug).

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Benefits of barcoding in the pharmaceutical industry

The use of barcodes on drugs and medical devices will be an important step to improve patient safety and will allow the tracking of medicinal products before, during and after a medical procedure

One of the main concerns in healthcare today is patient safety. In 2000, the Institute of Medicine (IOM) published its report *To Err is Human*[1] and an increasing number of publications are reporting on medical errors, which happen across the world.[2–4] Automatic identification technology (barcoding) is one of the tools that is acknowledged in reducing such errors.[5] It is contributing to improving efficiency and increasing accuracy of data entry into automated systems. The possibility of capturing data via barcode scanners, in conjunction with computerised databases, enables healthcare professionals to verify whether the right drug was used at the right time for the right patient in the right dose on the right route ("five patient rights"). Barcoding has the potential to be not only cost-effective but to save lives while producing a strong return on investment.

Medical errors and usage of barcodes

A barcode is a graphic representation of data that is machine-readable. Barcodes are a fast, easy and accurate way of capturing and entering data. They do not contain descriptive data, but are just a reference number to a computer file with the relevant data.

In a hospital, barcodes can be used to improve processes in the following areas:

- Patient registration and admission for:
  - Patient forms.
  - Patient labels and wristbands.
  - Patient records.
  - Patient accounting and billing.
- Patient safety, clinical care delivery and patient tracking by using barcodes for:
  - Pharmaceuticals down to unit dose level.
  - Medical devices down to unit of use level.
  - Identification of hospital staff and patients.
  - Order requisitions, test/results and patient charts/medical records.
- Product, supply and material management for:
  - Inventory control/tracking.
  - Materials tracking and logistics.
  - Tracking of reusable/refurbished equipment and supplies.
  - Reverse supply chain (eg, product recalls and warnings).

Taking into account the significant benefits of automatic product identification, the Department of Health and Human Services in the USA has issued a final rule requiring electronically readable barcodes on the packaging of hospital administered pharmaceutical products, biologicals and blood products. This will be introduced in April 2006.[6]

Already, in 40 countries worldwide, mandates for automatic product identification exist today – others are in the phase of developing regulations for barcoding of healthcare products, acknowledging the advantages for patient safety.[7,8] While studies conducted in Veteran Affairs hospitals (USA) in the 1990s showed that the use of barcodes reduced medication administration error rates by up to 86%, only a small number of hospitals have recently started to use this technology to improve patient safety. Current estimates indicate that only 2–6% of hospitals in the USA are using barcodes to reduce medication administration errors.[8] It is expected that the number of hospitals will increase significantly in the near future, with more products carrying a barcode and more publications reporting the benefits of barcodes.[10–12]

Global standards for pharmaceuticals and medical devices

The healthcare industry has recently recognised the need for global standards in healthcare and in May 2005, leading global companies from the pharmaceutical and medical device industries formed the global GS1 Healthcare User Group (GS1 HUG™).[13] Its mission is to lead the healthcare industry to the effective utilisation and development of global standards, with the primary focus on automatic identification to improve patient safety. The group currently has 34 members from manufacturers, hospitals, regulatory bodies and associations who are committed to working towards a global solution to enhance automatic product identification for the benefit of patients worldwide. The main focus areas are as follows:

- Prevention of medical errors.
- Product authentication.
- Tracking and tracing.
- Increasing total supply chain efficiency.

The work of the GS1 HUG™ will improve the performance of the healthcare supply chain for pharmaceuticals and medical devices, through the collaborative development and endorsement of recommended voluntary GS1 standards and best practices. The group includes representatives from all types of stakeholders in the healthcare supply chain – more participants from hospitals are very welcome to join and contribute. Working groups are developing global voluntary guidelines for the marking of pharmaceuticals and medical devices; special teams are also working on marking of vaccines and biologicals, instruments and implants. The GS1 HUG™ is concentrating particularly on ensuring that appropriate data structures are selected in order to meet common business needs and to help ensure data standardisation in healthcare. If standardisation is applied globally, systems to improve patient safety will be developed and implemented quicker than if individual countries were to pursue separate solutions. The next GS1 HUG™ meeting will take place in Rome from 21 to 23 March 2006. For participation and other details please contact the author.

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Traceability and counterfeiting

Other aspects that have to be considered are the effects of barcoding on streamlining the supply chain and inventory control. In combination with electronic messaging, full supply chain control and effective traceability of the products is possible. This will help to prevent counterfeiting – a topic which, today, worries the healthcare industry and regulatory bodies and is increasing in importance across the world.

Counterfeiting is a bigger issue in developing countries,[14] but even in the USA the number of cases investigated by the FDA has increased significantly in the last year.[15] Increasingly, in Europe too, concerns are raised that through the more open markets and the rise of "drugs through the internet", fake products can enter the supply chain.[16] However, traceability and integrity of the supply chain can be ensured through additional data for product identification such as expiration date, lot/batch number and serial number. Only when this data is available throughout all processes and partners in the supply chain will it be possible to combat counterfeiting effectively. With new barcode symbologies (eg, Data Matrix and RSS), it is possible to carry all this information even on very small items and packages.

Most importantly, the use of barcodes on drugs and medical devices will be an important step to improve patient safety. Furthermore, it allows the tracking of medicinal products before, during and after a medical procedure. Data can also be captured in the electronic patient record with little manual input, enabling traceability in the case of recalls but also better calculation of costs for the treatment. ■

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BAR CODING OF MEDICAL DEVICES

By Ulrike Kreysa

The term 'medical device' is used for a wide range of products, from a syringe to a heart valve to an infusion pump. Medical devices, like pharmaceuticals, are essential in the treatment of patients and play an important role in the healthcare system. The medical device industry is a fast growing one, with the most important markets being the US, Japan and Germany[1]. A high percentage of healthcare costs are generated by medical devices, and through the rapid progress in technical innovation, the global market figure for 2006 is expected to exceed US$260 billion[2].

Global medical device market is expected to exceed US$260 billion in 2006

At the same time, a number of the issues affecting medical devices are similar to the ones affecting the pharmaceutical industry:

Counterfeiting

There are few official numbers about the counterfeiting of medical devices but for pharmaceutical products the US Food and Drug Administration (FDA) estimates that 10% of them worldwide are falsified[3]. Medical device manufacturers are also reporting counterfeiting of their products, which causes effects on the safety of device users and patients, as well as effects on the manufacturers themselves (e.g. by loss of sale and loss of reputation when counterfeit products fail that have been branded with their company's trademark). A safe and secure supply chain is needed which prevents counterfeiting of products and enables proper traceability of medical devices from the manufacturer to the patient. This will prevent illegal re-processing and re-packaging of products as well as the infiltration of falsified and unsafe products. Through the tracking and tracing of the items, effective alerts and product recalls will be possible.

Counterfeiting of products can be prevented with a safe & secure supply chain

Medical errors

In 2000, the Institute of Medicine (IOM) published its report *To Err is Human*[4] about the causes of medical errors and how one can prevent them. Automatic identification technology (bar coding) was one of the tools the IOM recommended to help prevent medical errors. As a consequence, in February 2004, the US Department of Health and Human Services issued a final rule requiring electronically-readable bar codes on the packaging of hospital administered pharmaceutical products, biologicals and blood products to be applied by April 2006[5]. To date, no such rule has been released for medical devices, despite pressure from the largest American hospital chains such as Premier and the American Hospital Association[6]. However, the FDA has organised an official meeting to discuss unique device identification, where stakeholders were given the opportunity to express their opinion[7].

From April 2006, all US pharmaceutical product packaging must have an electronically-readable bar code

Gary Hartley
Manager for strategic initiatives
GS1 NZ

Scannable technology

Bar coded pharmaceuticals save lives

Research shows machine-readable product identification is key to preventing medical errors, improving patient safety, helping combat counterfeiting and lowering costs throughout the health sector. But GARY HARTLEY argues New Zealand has fallen behind the rest of the world in mandating bar codes on pharmaceuticals.

Bar codes; most of us don't think about them very often but they are one of the most ubiquitous "products" around and it is hard to imagine a world without them. Bar codes were "invented" over 30 years ago in response to an industry-led need to be able to uniquely identify products moving through various supply chains in an automated manner.

GS1 is a global organisation dedicated to the design and implementation of global standards, technologies and solutions to improve the efficiency and visibility in supply and demand chains. GS1 is a neutral, not-for-profit standards (and related services) organisation.

More than 30 years on, GS1's suite of standards has broadened to include electronic commerce tools such as XML, EDI messaging; next-generation technologies and solutions such as data synchronisation (the Australian catalogue is built on a GS1 system); electronic product code (EPC) global using radio frequency identification (RFID) technologies; and product traceability.

GS1 operates in more than 20 industry sectors and sectors ranging from fast moving consumer goods (FMCG) to healthcare, transport and logistics and defence.

Along with its member organisations, GS1 plays a leading role in supply and demand chain management improvement worldwide for large, small and medium-sized organisations. Formed in 2004 from the joining together of European Article Numbering (EAN) International and the Uniform Code Council (UCC), GS1 has a presence in 101 countries driven by more than a million companies who execute more than five billion transactions a day.

GS1 in healthcare

GS1 is widely recognised as the leading standards organisation in the global healthcare industry. In 56 countries worldwide, GS1 standards have been chosen as the key to identify pharmaceutical products uniquely. A number of major regulatory bodies have mandated them, including those in the US, Japan, Brazil and the UK among others.

In July 2005, the GS1 global Healthcare User Group (HUG) was established as a voluntary global group of GS1 members and invited supply chain participants from around the world. Its objective is to lead the utilisation and development of global standards for the healthcare industry, with the primary focus on automatic product identification to improve patient safety.

The group is comprised of senior executives from global pharmaceutical companies, hospitals, logistics organisations and regulators. ▸

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HUG

Communication and Coordination

Mehr Sicherheit für Patienten

Die Healthcare User Group will eine führende Rolle hinsichtlich der effektiven Nutzung und Entwicklung von globalen Standards übernehmen. Primäres Ziel ist die Verbesserung der Patientensicherheit.

Arzneimittelfälschungen und Fehler bei der Verabreichung von Medikamenten oder Applikation von Medizinprodukten bedrohen heute die Sicherheit von Patienten weltweit.

Im Jahr 2000 veröffentlichte das Institute of Medicine (IOM) in den USA seinen viel beachteten Bericht „To Err is Human", und seither hat eine wachsende Anzahl von Publikationen weltweit über Medikationsfehler berichtet. Durch das Scannen von Barcodes können Daten schnell und sicher erfasst werden und in automatischen Systemen sowohl mit der ursprünglichen Verordnung verglichen als auch dokumentiert werden. So wird sichergestellt, dass dem richtigen Patienten das richtige Arzneimittel in der richtigen Dosierung zum richtigen Zeitpunkt korrekt appliziert wird. Barcoding spart nicht nur Kosten, es kann auch Leben retten!

Arzneimittelfälschungen sind ein anderes bedeutendes Problem im heutigen Gesundheitswesen. Alle Partner in diesem Bereich machen große Anstrengungen, um die Sicherheit der medizinischen Versorgungskette zu gewährleisten. Durch automatische Produktidentifizierung in Kombination mit elektronisch übermittelten Daten kann eine volle Rückverfolgbarkeit der Produkte sichergestellt werden , wodurch Arzneimittelfälschungen wirksam bekämpft werden.

Führende Hersteller von Arzneimitteln und Medizinprodukten wie 3M, Baxter, B.Braun, GSK, Johnson & Johnson, Medtronic, Merck, Novartis, Pfizer, Smiths Medical und Tyco Healthcare haben die Bedeutung von globalen Standards im Gesundheitswesen erkannt und sich daher im Mai 2005 zu der globalen Healthcare User Group (GS1 HUGTM) zusammengeschlossen. Ihre Zielsetzung ist die Übernahme einer führenden Rolle im Gesundheitswesen hinsichtlich der effektiven Nutzung und Entwicklung von globalen Standards, primäres Ziel ist die Verbesserung der Patientensicherheit.

In der permanent wachsenden internationalen Gruppe arbeiten inzwischen Mitglieder aus allen Bereichen des Gesundheitswesens wie Hersteller, Großhändler, Krankenhäuser, Regierungsbehörden und Verbände zusammen, um eine globale Lösung zur automatischen Identifizierung von medizinischen Produkten zu erarbeiten. Dabei konzentrieren sie sich auf folgende Themen:

- Verhinderung von Medikationsfehlern
- Produkt Authentication – Authentifizierung und Fälschungssicherheit
- Tracking & Tracing - Rückverfolgbarkeit
- Effizienzsteigerung in der gesamten Versorgungskette

In den Arbeitsgruppen der GS1 HUGTM werden globale Empfehlungen zur Kodierung von Arzneimitteln und Medizinprodukten für alle relevanten Verpackungsebenen bis hin zur Unitdose bzw. Unit-of-use entwickelt. Dadurch werden eine Verbesserung der Patientensicherheit und eine Optimierung der gesamten Versorgungskette durch erhöhte Transparenz, Genauigkeit und Schnelligkeit erreicht.

Die GS1 HUGTM wird eine globale Standardisierung von Datenstrukturen zur Produktidentifizierung im Gesundheitswesen verwirklichen. Weitere Informationen sind auf der HUG Website www.gs1.org/hug/ erhältlich.

Führende Hersteller von Arzneimitteln und Medizinprodukten haben sich zur Healthcare User Group zusammengetan.

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Le secteur de la santé développe l'utilisation du système GS1

Le système GS1 est utilisé de manière intensive en Suisse depuis de nombreuses années, en particulier pour l'identification des emballages de vente de médicaments et celle des acteurs de la santé (comme les pharmacies, médecins et hôpitaux). Depuis son introduction, des applications efficaces ont démontré la pertinence de ce choix et son impact modérateur sur les coûts: logistique entre fabricants et grossistes, contrôle des stupéfiants, et, plus récemment, facturation aux assureurssanté dans le cadre du TARMED.
Le potentiel du système GS1 n'a cependant de loin pas été épuisé. Des développements en production à l'étranger incitent à rechercher de nouveaux avantages du système GS1. Le domaine de la sécurité des patients fait partie de ceux-ci. Quelques aspects intéressants à ce sujet sont passés en revue.

L'identification du séjour du patient
Un article paru en décembre 2005 dans la revue «Swiss Medical Informatics» documente comment le séjour du patient (en anglais: patient episode) est identifié. En Irlande, la traçabilité des médicaments dérivés du sang depuis le fournisseur jusqu'au receveur à son domicile a fait l'objet d'un important projet. Les patients souffrant d'hémophilie doivent en effet être traités avec des médicaments à la fois sensibles et onéreux tout au long de leur existence; une traçabilité sans faille s'impose dès lors dans le circuit de ces médicaments. Le centre de compétence national irlandais a décidé d'utiliser le système GS1 pour l'identification des acteurs, lieux et produits dans ce domaine. Le même article mentionne que le Centre hospitalier universitaire de Dijon a procédé à une expérience pilote sur la gestion des déplacements dans le service des urgences. Il s'agissait d'objectiver la charge de travail des brancardiers. Un déploiement ultérieur dans l'hôpital sera facilité par cette expérience, lorsque les travaux de construction autour d'un site unique auront été achevés.
En Suisse, les hôpitaux de Genève, Lausanne et Thoune sont en train de mettre en place l'identification du séjour de patient au moyen du GSRN (Global Service Relationship Number). La capacité de numérotation du GSRN est très importante et permet d'intégrer des numérotations existantes dans un identifiant unique à structure standardisée. Les transferts de patients entre hôpitaux travaillant avec la même structure d'identification seront facilités. Il s'agit d'une contribution à une augmentation de la sécurité du patient.

P^r Christian Lovis, responsable Unité d'informatique clinique, Service d'informatique médicale des HUG
«Les HUG disposent d'une identification standardisée de séjour et de localisation des patients. Il s'agit là de la colonne vertébrale du système d'information hospitalier. Par ailleurs, une démarche commune avec les Hospices cantonaux vaudois vise à mettre progressivement en place des outils d'interopérabilité efficaces, permettant de tirer profit des informations que les fournisseurs mettent sur les approvisionnements hospitaliers, comme les prothèses ou les médicaments, et ainsi optimiser la logistique et la sécurité des patients au moyen du système GS1.»

D^r Marc Oertle, Spital Thun-Simmental AG
«Die Verwendung von GSRN für die Identifikation der Patienten und des Personals ist für uns eine erste Etappe in der Implementierung des GS1-Systems im Spital. In naher Zukunft sollen zudem die Patienten mit einem RFID-Wristband identifiziert werden, was Verwechslungen reduzieren lässt und den berechtigten Spitalmitarbeitern direkten Zugang zum Patientendossier ermöglicht.»

Le GS1 Healthcare User Group (GS1 HUG™)
Au cours du premier semestre 2005, des entreprises du domaine de la santé ont constitué le GS1 HUG™. Les objectifs sont notamment d'augmenter la sécurité des patients et l'efficacité des chaînes de distribution au moyen du système GS1. Ce groupe composé initialement de représentants de quelques six des plus importants fournisseurs, rassemble maintenant plus de 30 fournisseurs. Une vingtaine de services de santé et d'associations régionales de la branche s'y sont joints. Lors de la réunion du mois de mars 2006 à Rome, deux représentants hospitaliers suisses ont participé intensément aux travaux du HUG™: le professeur Christian Lovis et Hervé Ney, responsable de la stérilisation centrale des Hôpitaux universitaires de Genève. Hervé Ney copréside le groupe de travail sur le marquage des instruments chirurgicaux avec Volker Zeinar de B. Braun Medical. Pour le GS1 HUG™, un des défis

les plus importants que le monde de la santé doit affronter actuellement, est de répondre à des réglementations croissantes en nombre et en intensité. Les solutions standardisées, globales et non pas nationales, régionales voire individualisées sont privilégiées par l'industrie. Le marquage des instruments chirurgicaux à l'unité fait partie de la recherche de solutions uniformes au niveau de la structure de l'identifiant.

Benoît Landanger, Landanger SA, Chaumont (France)
«Notre PME est un important fournisseur d'instruments chirurgicaux en France et à l'exportation. Nous avons commencé en 2006 de marquer systématiquement tous nos instruments avec un Datamatrix incluant le GTIN et le numéro de série des instruments. Sur demande des hôpitaux, nous fournissons la même information dans une puce RFID, intégrée dans l'instrument en cours de fabrication. L'identification standardisée de chaque instrument individuel permet aux hôpitaux de mettre en place une traçabilité à l'unité jusqu'au patient, ce qui est devenu une exigence réglementaire en France. Le choix du système GS1 résulte de son caractère ouvert et de son adoption dans une norme expérimentale de l'association française de normalisation (AFNOR).»

Un cluster santé en Suisse, le GS1 HUGLIT (HUG Local Implementation Team)
Tous les acteurs ne peuvent pas participer pleinement aux travaux du GS1 HUG™, ni aux travaux de GS1 Europe dans le domaine de la santé. Par conséquent, et sur le modèle du GS1 HUG™, GS1 Suisse a constitué en hiver 2006 un groupe de travail poursuivant les mêmes objectifs que le groupe global, mais à une échelle plus proche du terrain. Participent à ce groupe depuis sa constitution:

- Alloga Schweiz
- Amedis - UE
- B. Braun Medical
- Galexis
- Novartis Pharma Schweiz
- Pfizer
- Sanofi-Aventis
- ZLB Behring

Le groupe aborde maintenant une phase d'élargissement auprès d'autres membres de GS1 Suisse, fabricants, distributeurs, hôpitaux. L'échange d'informations entre le marché suisse et les groupes de travail globaux, puis ultérieurement avec des projets pilotes définis par les utilisateurs va pouvoir se développer.

Rich Hollander, Senior Director of Packaging Services for Pfizer's Global Manufacturing
«The Swiss HUGLIT is an exceptional opportunity for the Global Healthcare User Group to communicate with its local components: manufacturers, distributors and users as hospitals. We want to take this opportunity to know market needs and secure implementation of the GS1 standard in full consistency with our global approach.»

Nous sommes en phase avec l'Europe
En janvier 2006, EUCOMED (l'association européenne des fabricants de dispositifs médicaux) a organisé un workshop avec des représentants hospitaliers sur le thème de la traçabilité. Un des objectifs était de déterminer l'état de préparation des hôpitaux quant à l'utilisation des informations que les fournisseurs offrent dans des codes à barres GS1. En matière de traçabilité, ce sont le GTIN, le numéro de lot et la date de péremption. Parmi les orateurs invités, Silvano Campani, responsable des transports, communications et approvisionnements, a exprimé les attentes et travaux du CHUV, qui a pris la décision stratégique d'utiliser le système GS1 pour améliorer les flux logistiques et la gestion des stocks au sein de l'établissement.
L'Association européenne des pharmaciens d'hôpitaux (EAHP) a tenu son congrès annuel en mars 2006 à Genève. De nombreux débats autour de la sécurité du patient et des processus de médication ont été tenus dans ce contexte. D^r Pascal Bonnabry, pharmacien chef des Hôpitaux universitaires de Genève, a animé un workshop sur le thème de «code à barres et RFID: de la théorie à la pratique». Suivi par des salles combles, le workshop a débouché sur un dialogue constructif entre orateurs et public, ce dernier comprenant les avantages d'un système d'identification uniforme et global. De nombreux pharmaciens hospitaliers européens se sont engagés à parler du système GS1 avec leurs fournisseurs. Ils attendent de cette solution uniforme une meilleure gestion de leurs stocks. De plus ils disposeront d'un instrument complémentaire favorisant la maîtrise de l'administration des médicaments. ■

Christian Hay
Délégué santé, GS1 Suisse

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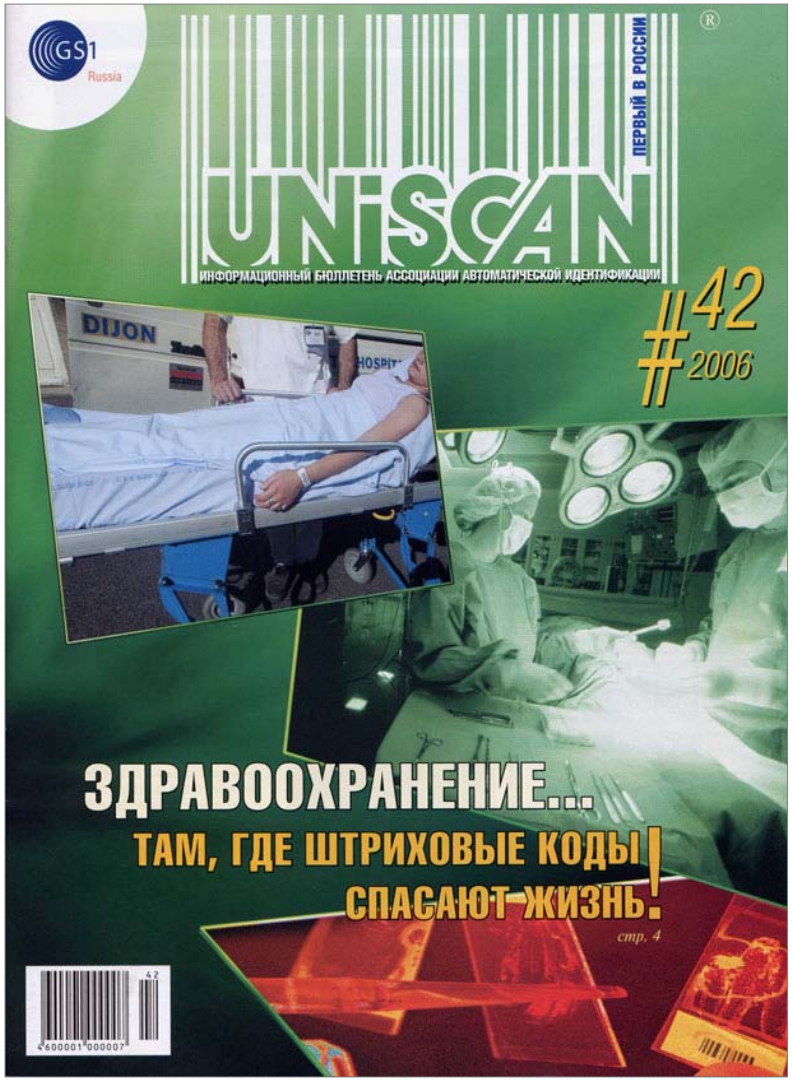

ШТРИХОВОЕ КОДИРОВАНИЕ

Добавляя *композитный компонент*, можно закодировать вторичные данные, например, дату истечения срока годности и номер партии. Композитный компонент не может считываться в любом направлении и требует соответствующих сканеров. Композитный компонент не может применяться один; он должен применяться в сочетании с другой линейной символикой (например, EAN/UPC, GS1-128 или RSS).

по охране здоровья животных для идентификации ветеринарных лекарственных средств. Она будет печататься на индивидуальных упаковках единиц зарегистрированных ветеринарных лекарственных препаратов. Фармацевтические объединения оказывают предпочтение этому новому стандарту GS1, поскольку он может хранить множество информации вплоть до уровня единичной дозы и не занимает много места на упаковке или предмете торговли.

(01)04012345678901
(17)050101(10)ABC123

Рисунок 4. Пример RSS с композитным компонентом, кодирующим GTIN, номер партии и дату истечения срока годности.

DataMatrix

DataMatrix – это символика для предметов торговли небольшого размера, где традиционная символика штрихового кода применяться не может, или символика для медицинских/хирургических средств, где отсутствует традиционная поверхность или пространство для печатания знаков. DataMatrix кодирует номера GTIN и может содержать дополнительные элементы данных, относящиеся к этому конкретному предмету торговли. Это двухмерный штриховой код, способный хранить до 2000 символов. Символика DataMatrix требует двумерного сканера; с помощью обычного линейного сканера штрихового кода считать ее невозможно.

Когда пространство ограничено, можно применять штриховые коды в виде матрицы данных

(17) 050101 (10) ABC123
(01) 04012345678901

Рисунок 5. Пример DataMatrix.

Недавно DataMatrix была рекомендована Международной федерацией

Глобальные стандарты для лекарственных средств и медицинской техники

Медицинская промышленность недавно признала необходимость в Глобальных стандартах для здравоохранения, и поэтому в мае 2005 г. ведущие мировые фармацевтические компании и компании по производству медицинской техники образовали всемирную Группу пользователей здравоохранения GS1 (GS1 Healthcare User Group - GS1 HUG™). Ее задача - привести медицинскую промышленность к эффективному использованию и развитию Глобальных стандартов, уделяя основное внимание автоматической идентификации для повышения безопасности пациентов.

GS1 HUG была создана в мае 2005 г. и в настоящее время насчитывает 34 члена

Цель GS1 HUG™ состоит в том, чтобы стать единственным источником, где регулирующие органы и торговые организации (производители, оптовые продавцы, больницы и фармацевтические предприятия) будут получать инструкции и информацию по

новости - информация

THE WINTER 2006 BIOMETRICS SUMMIT

Применение идентификационных технологий в государственных целях и бизнесе: опыт и полученные уроки.

28 февраля - 2 марта 2006 г. в Майами (США) состоялся зимний саммит The Winter 2006 Biometrics Summit.

14-й Международный форум был посвящен использованию биометрических решений: отпечатки пальцев, системы распознавания лица, верификация подписи, голоса, сканирование радужной оболочки глаза, смарт-карты и геометрия руки.

Цели саммита:

- понять основные биометрические технологии на примерах реальных применений от пользователей (как они работают, затраты и преимущества, слабые и сильные стороны);
- открыть для себя применение биометрии в различных областях (государственные и финансовые структуры, транспортирование и контроль за государственными границами);
- повысить эффективность и безопасность, а также снизить затраты, благодаря применению биометрических технологий;
- узнать, что думают пользователи о биометрии и смарт-картах;
- познакомиться с вопросами этики и охраны частной жизни;
- интегрировать биометрию с другими технологиями идентификации для повышения безопасности.

(По материалам www.allconferences.com)

WAL-MART ГОРЯЧО ПОДДЕРЖИВАЕТ GEN2

По данным журнала DC Velocity, руководитель направления RFID компании Wal-Mart Саймон Лангфорд (Simon Langford) высказал ряд положительных замечаний по поводу RFID на Научном заседании, проходившем в Массачусетском технологическом институте (MIT). Он подтвердил, что технические спецификации Gen2 демонстрируют улучшение производительности и «очевидный шаг вперед» по сравнению с Gen1. Он также заявил, что к концу 2006 г. гигант розничной торговли Wal-Mart намерен поставить

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HUG

Work Together Toward a Global Auto-ID Standard

Commendable as they are, FDA's efforts to promote patient safety through mandated bar coding and encouraged RFID tagging are not enough. And, even if every ministry of health around the world were to do the same, it still wouldn't be enough.

Why? Because country-specific regulations may satisfy the needs of those countries, but they often clash—or simply just don't click—when products move across borders throughout the global supply chain. When it comes to automatic identification, codes developed for one tracking system won't necessarily be recognized by another. How can a manufacturer of products supplied to the global marketplace keep up with all the regulations and still be able to track and trace its own products with ease?

By working with other manufacturers to harmonize auto-ID standards. In this month's roundtable discussion (p. 48) with pharmaceutical and medical device packagers, these professionals describe their voluntary work toward harmonization in the GS1 global Healthcare User Group (HUG). "Multinational companies are struggling to keep up with individual market needs that keep being put out there in the form of regulations that are divergent from one another," says Rich Hollander, senior director of packaging services for Pfizer. "The HUG was formed to develop global standards in the healthcare industry when it comes to automatic identification."

The HUG's efforts could very well obviate the need for auto-ID regulations. "We are seeing more and more interest from people who do not want mandates, such as regulatory bodies and governments," says Peter Tomicki, global packaging project manager for Baxter and a HUG participant. "They would like to see one harmonized approach and then basically say, 'Go follow that.' We have seen participation from countries around the world. We are gaining traction in the industry."

And the HUG may even challenge some regulations. In its bar code rule, for instance, FDA requires that the National Drug Code be encoded in a linear bar code. "The HUG does not agree," says Hollander. "We would like to allow the use of a two-dimensional bar code for reasons that were not articulated very effectively back in the rule-making process. The HUG is in the process of writing a letter to FDA to formally request that it reconsider the two-dimensional code."

Our best hope against threats to patient safety lies with the product manufacturer. The HUG's efforts are significant, precisely because stakeholders, not regulators, are doing the work. "If the healthcare industry can come up with global standards that make sense and meet the needs of stakeholders, we will have a powerful approach," says Tomicki.

Daphne Allen, Editor
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Pharmaceutical Packaging Roundtable

12187

Striving Toward a Global Code

To stop counterfeiting and to control medical errors around the world, auto-ID standards need harmonizing.

Automatic identification technologies involving bar codes and RFID are being looked at as powerful weapons in the fight against counterfeiting, diversion, and medical errors. FDA in particular has mandated bar codes for drugs supplied to hospitals and is pursuing RFID to develop an electronic drug pedigree.

But given the global nature of the pharmaceutical industry as well as the worldwide threats of counterfeiting and diversion, FDA's work may not be enough. Global standards shared throughout the healthcare industry may be the key to identifying and authenticating products.

The GS1 Healthcare User Group (HUG; www.gs1.org/hug) is a voluntary group of specialists who have come together to develop automatic identification standards specific to the needs of the healthcare industry. In this exclusive roundtable discussion with *PMP News* editor Daphne Allen, several of the GS1 HUG leadership team members and work team leaders discuss the group and its hopes to unify automatic identification standards throughout the world.

Participants include Steve Hess, senior director of packaging technology for Merck; Rich Hollander, senior director of packaging services for Pfizer; Ulrike Kreysa, group manager, healthcare solutions, GS1 Solutions, GS1 Global Office; Peter Tomicki, global packaging project manager for Baxter; and Mark Walchak, senior manager, global package technology and testing, for Pfizer.

Can you explain a little bit about GS1 HUG and what are some of the current tasks at hand?

Hollander: The GS1 HUG was formed about a year ago to help bring together the medical device and pharmaceutical product communities to understand how to best apply automatic identification tools to address issues involving patient safety. When we talk about patient safety, we are talking about everything from prevention of dispensing errors to serialization to enable the authentication, tracking, and tracing of high-risk products subject to counterfeiting. In the past year, we have met three times formally—once each in Brussels, Princeton, NJ, and Rome. During that time we have worked to understand the specific requirements for patient safety around the world. Not just from a user perspective—that is the product manufacturer—but also from the rest of the supply chain.

Are you taking the framework that was already established by the Uniform Code Council Inc. (UCC) and EAN International and developing it into global standards?

Kreysa: EAN International and UCC came together 1½ years ago and formed the new organization GS1, which is a really global organization. Before, there were different member organizations around the world in more than 100 countries, all with different names. The biggest ones were UCC and some member organizations in Europe and Japan. They all have decided to form one global organization called GS1.

Hess: One thing that attracted me to this organization was the approach of trying to leverage the entire portfolio of GS1 technologies. The HUG was not focused solely on using a single technology to solve all problems. Also, there are lots of other initiatives that are very U.S.-centric, but I was attracted to the HUG's global approach. I think that is just so powerful.

Does this mean that there will be one harmonized approach to bar coding or electronic product coding for healthcare products?

Walchak: One of the things that we are trying to do is to have a standardized system for assigning numbers that will be used from a unit-dose aspirin all the way up to an MRI machine. It would cover any OTC or prescription drug and all medical devices. We will have a standardized system that can be used universally.

Tomicki: The scope of the HUG is really across all industries within healthcare—devices, pharmaceuticals, biologics, vaccines, and all the subindustries within those. I think it is across all of healthcare and it is in concert with the GS1, which is across all other industries as well. It makes sense to align healthcare as one industry as best as we can so that it is not

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HUG

Economic Times, Delhi
2 June 2006

A standardised approach in adoption of best practices like use of barcodes with GS1 standards in various healthcare applications by Indian hospitals is essential to enhance patient safety. It would also shape the strategy for future applications like EDI (electronic data interchange) at a later date.

But now, realising the importance and urgency, GS1 has recently facilitated the formation of a global GS1 Healthcare User Group (HUG). Its objective is to lead the utilisation and development of global standards for the healthcare industry, with the primary focus on patient safety through use of standards & technologies in automatic product identification. Baxter, Boston Scientific, B Braun, 3M, GSK, Hospira, Johnson & Johnson, Medtronic, Merck, NACDS, Pfizer, Smiths Medical and Tyco are part of this global initiative.

A health check for Indian hospitals

GUEST COLUMN

RAVI MATHUR

- With the rise in medical tourism, India has to assure the world that it can provide quality healthcare at an affordable price
- Use of modern IT tools like barcode will facilitate patient safety and efficient asset management within hospitals
- Quality, accreditation and standards of care ensure the best healthcare practice

AS THE Indian healthcare sector grows at a frantic pace transforming into a $17 billion industry with an annual growth rate of 13% a year, what is clear is a picture of the Indian healthcare industry which is no longer limited to only hospitals and patient safety. Today it has grown its dimensions with new concepts like medical tourism flourishing within this industry at the growth rate of 15% per annum, raking in over $2 billion as additional revenue by 2012. Last year alone, around 1.5 lakh medical tourists visited India generating $2.3 billion annually.

With the increase in medical tourism, it is important for India to assure the world that it is capable of providing quality healthcare services at an affordable price. To ensure this, Indian healthcare organisations are beginning to explore international standards organisations such as JCAHO or its international wing, JCI, in order to demonstrate to the western world that they meet their expectations of standard of care. They are also beginning to focus on the use of standards and technology in the healthcare supply chain that forms the backbone to ensuring quality healthcare service.

As Indian hospitals equip themselves with implementing best practices in healthcare in terms of hospital processes, equipment & technologies, the requirement for harnessing modern IT tools with open, interoperable and multi sectoral standards increases to allow the efficient use of information systems. Over the past many decades, many industries have been successfully using tried and tested tools like barcoding with unique and universal product identification standards. Globally also the healthcare industry has been leveraging these tools for various hospital applications.

Use of modern IT technologies like barcode would facilitate patient safety, inventory & FIFO (first in-first out) management of hospital supplies and efficient asset management within hospitals. Using barcodes will also facilitate patient tracking, patient record retrieval, and automated billings in a hospital.

One of the most important uses is however in the case of medicine recalls, as it helps in providing a focused and limited withdrawal of a sole offending batch/pallet/consignment (as the case may be) which would be traced out, thereby resulting in invaluable savings in terms of money as well as brand equity — a benefit not only for the manufacturer, the industry but also for the safety of the consumer.

A standardised approach in adoption of best practices like use of barcodes with GS1 standards in various healthcare applications by Indian hospitals is essential to enhance patient safety. It would also shape the strategy for future applications like EDI (electronic data interchange) at a later date.

Regulatory organisations like US FDA (Food & Drug Administration), have also taken pro-active measures by mandating the use of barcodes following international identification standards of pharmaceutical products, medicines, medical devices & implants, blood bags & products etc to reduce the high but avoidable incidence of medication errors.

Institute of Medicine 2001 & Health Grade 2003 reports cite approx 100,000 deaths annually in USA alone due to medication errors, with the incidence much higher in developing countries. Traditionally, hospitals have been slower to modify their business models and adapt to changing business environments and conditions when compared to other industries. Information systems have also followed this trend resulting in hospitals being more focused on infrastructure that has become more efficient rather than business processes that remain uneconomical.

But now, realising the importance and urgency, GS1 has recently facilitated the formation of a global GS1 Healthcare User Group (HUG). Its objective is to lead the utilisation and development of global standards for the healthcare industry, with the primary focus on patient safety through use of standards & technologies in automatic product identification. Baxter, Boston Scientific, B Braun, 3M, GSK, Hospira, Johnson & Johnson, Medtronic, Merck, NACDS, Pfizer, Smiths Medical and Tyco are part of this global initiative.

Now it is no longer a matter of debate that words like quality, accreditation and standards of care are, or need to be, part of the standard lexicon of any healthcare organisation that is worth its salt. Hence it is not a matter of 'if' but 'when' Indian hospitals will recognise the urgency of adopting a standardised supply chain that will play a critical role in bringing-in best practices and ultimately saving lives.

(The author is CEO, GS1 India, an affiliate of GS1 International, Belgium. GS1 India is a joint industry-government initiative, bringing international practices to supply chain management in India.)

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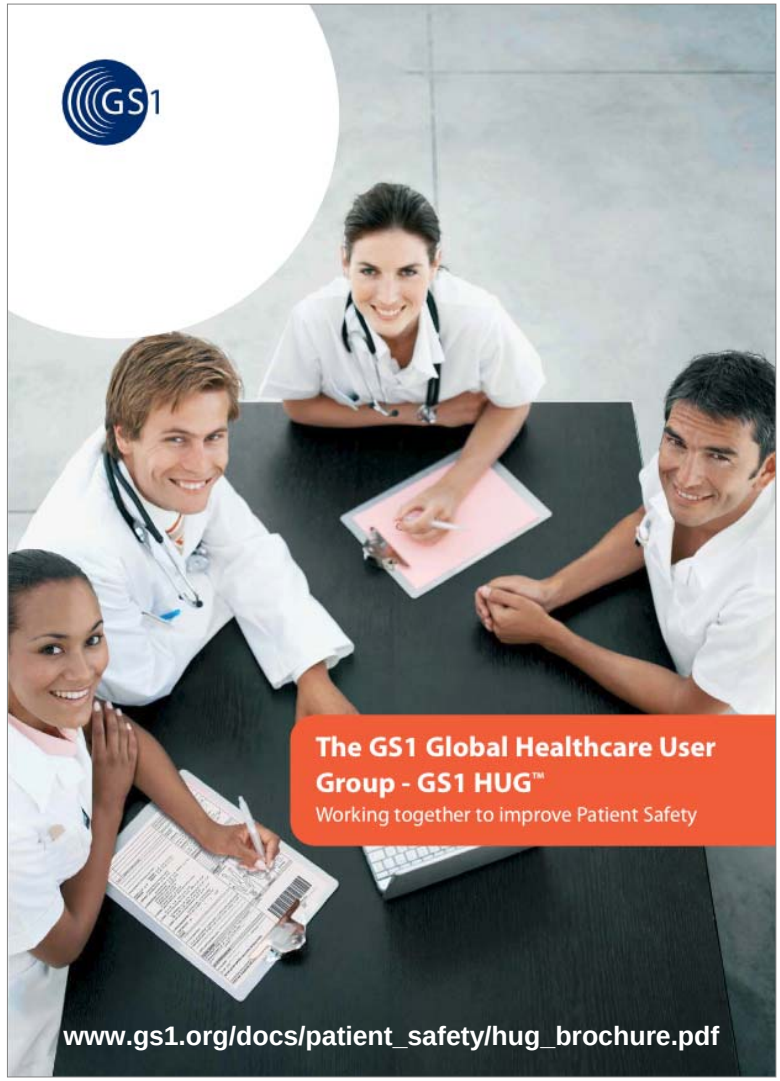
HUG

Communication and Coordination

HUG Brochure:



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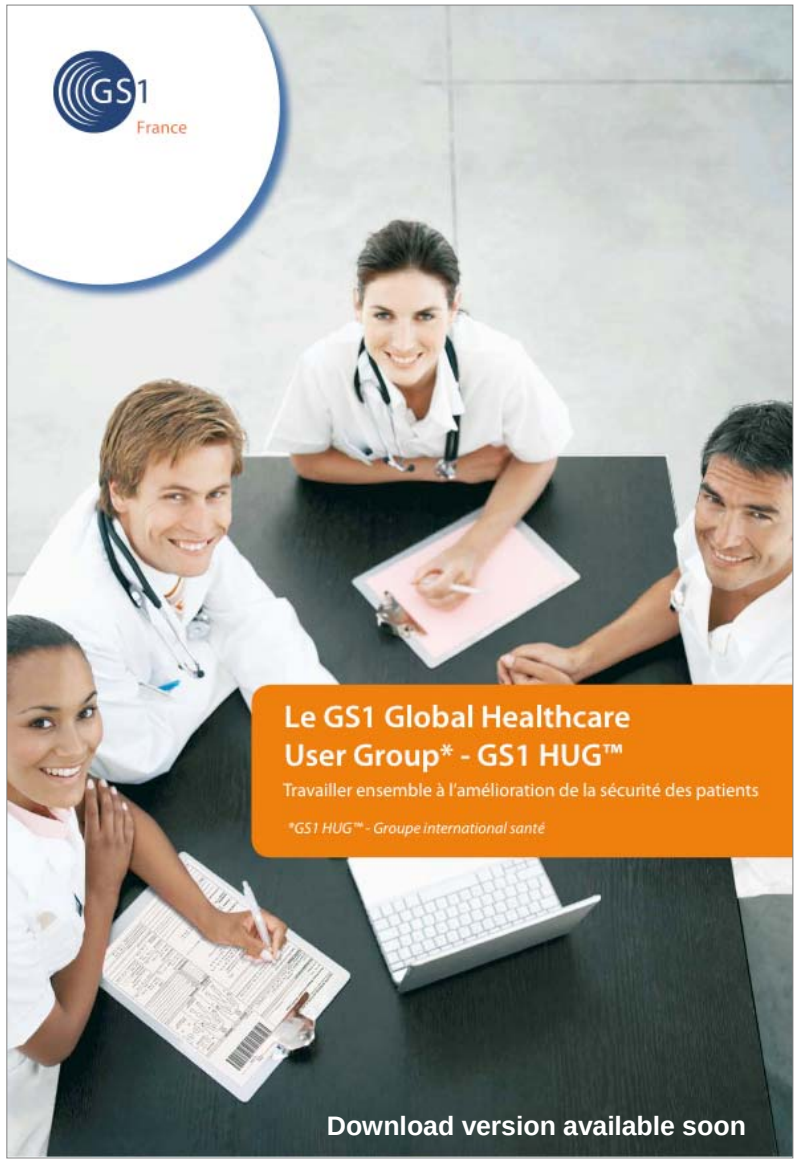

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