

# The Use of Mitomycin in the PACU: A Competency for Nurses

## The Problem

- Intravesical Mitomycin was being administered to selected Transurethral Resection of Bladder Tumor (TURBT) patients in the PACU.
- Antineoplastic therapy requires adherence to guidelines for the safe administration of Chemotherapy
- The Institute for Safe Medical Practices (ISMP) identifies Mitomycin as a High Risk Medication with increased patient harm when used in error.
- A current guideline for use was not available to the nurses in the PACU, therefore safe handling precautions were not being adhered to during ordering and administration.

## Aim/Goal

- To ensure that best practices were demonstrated in the care of patients receiving Intravesical Mitomycin in the PACU
- To provide PACU nurses with the tools required to practice safely.

## The Team

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 Holly Dowling, RN, Unit Educator  
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## The Interventions

A multidisciplinary work group formed in August 2011 to address the issue. Work included:

- Assessing the current state:
  - Collaboration with Oncology Unit Educators as subject matter experts (SME) to assess the current state.
  - Gain knowledge of best practice from the SME.
- Creating a safe care process:
  - Consent
  - Orders
  - Handoffs
  - Handling

MD Office	Holding Area	OR	Pharmacy	PACU
Decision for Surgery, Parental Mitomycin	Consent	Ordering, 2 RN verification	Obtain in yellow disposable container	2 RN verification, Administration utilizing closed drug system, Safe handling, Patient education for Discharge

**New process for The Administration of Intravesical Mitomycin in the PACU**

## The Interventions (continued)

- Development of an Education Plan
  - Manufacturer's representative in-serviced staff on the use of a closed-system drug transfer device.
  - In-services were held with simulation of a chemo spill and return demonstration of safe handling procedures assessed.
  - A Mitomycin reference book was developed
  - Mitomycin box to be taken to the bedside was assembled
  - Annual competency was developed and distributed to the staff

## The Results/Progress to Date

- The guidelines for Mitomycin ordering and administration were successfully implemented in the East Campus PACU in November, 2011.
- Surgeon's informed consent now includes the administration of Mitomycin.
- Closed loop communication is being utilized between the OR, Pharmacy and PACU Nursing staff to ensure safe patient care.
- A 3-way Foley catheter is utilized to ensure a closed system of medication administration.
- Staff are practicing appropriate safe handling methods, including the safe disposal of the medication.
- Entire staff has completed the annual Mitomycin competency.

## Lessons Learned

- A process is in place if the surgical consent does not reflect the use of Mitomycin perioperatively.
- A multidisciplinary approach utilizing strengths from each group member to successfully implement change that improves patient care may apply to other issues in the PACU.

## Next Steps/What Should Happen Next

- Annual competency to maintain consistent standard of care.
- Mitomycin administration in the PACU needs to be incorporated into a BIDMC policy for the administration of an Antineoplastic medication outside of the hematology oncology area.
- Mitomycin competency spread through sharing with OR nurses.
- Plan in place to develop a patient education sheet, and teach-back to educate residents rotating to BIDMC.

