



Welcome
Advisor Live® Webinar:
USP Compounding Standards Updates
Summary and Impact

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Advisor Live[®] Webinar

USP Compounding Standards Updates

Summary and Impacts

June 13, 2019

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AUDIO

Dial in to our operator assisted call 888.221.1827



NOTES

Download today's slides from the event post at premierinc.com/events.



QUESTIONS

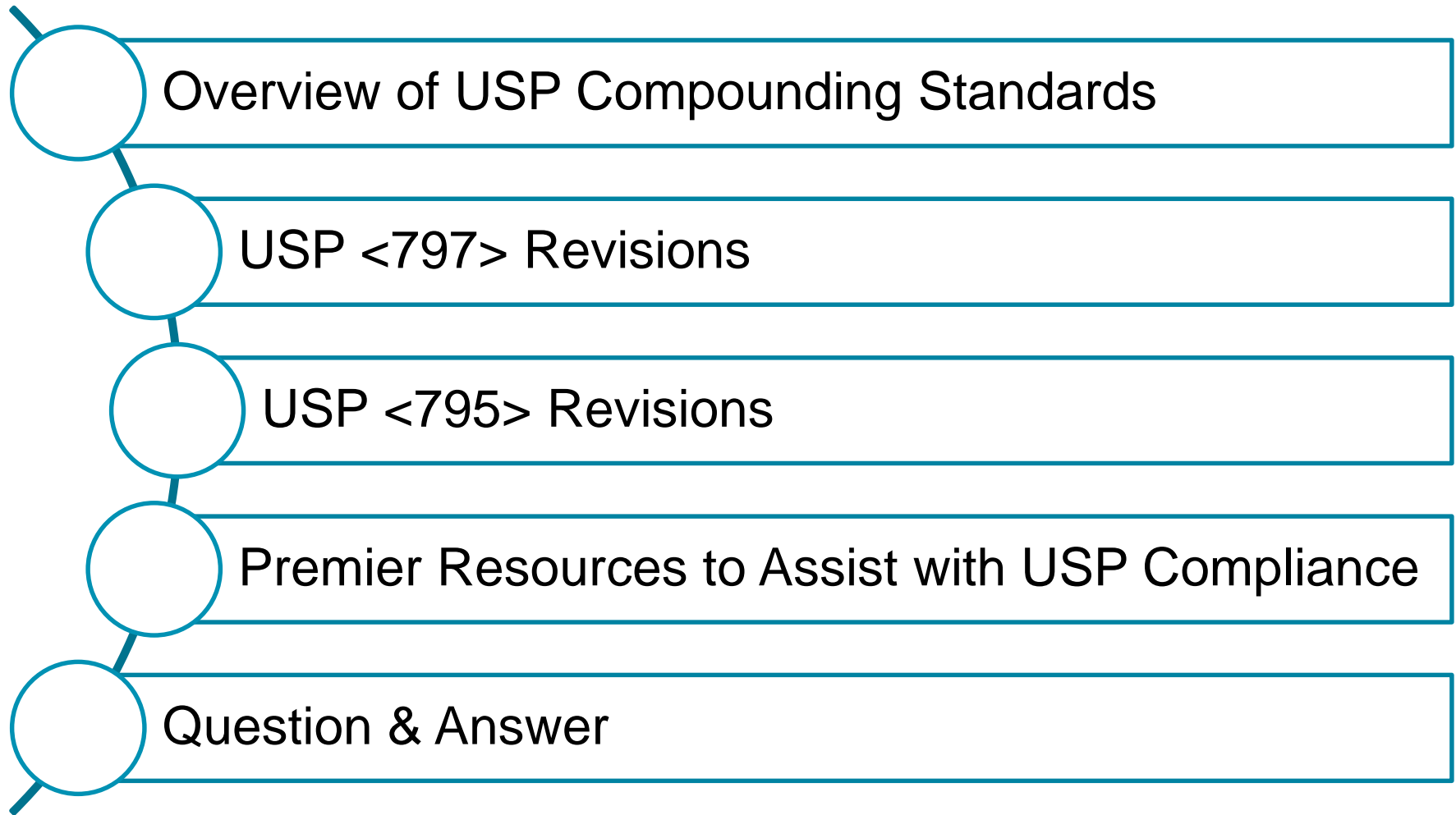
Use the “Questions and Answers”



RECORDING

This webinar is being recorded.

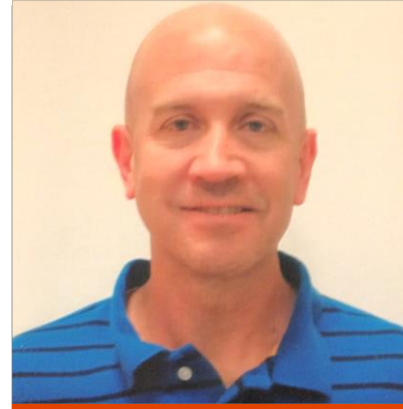
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USP Compounding Standards

Updated June 1, 2019



USP Compounding Standards

USP <795>: Non-sterile compounding

- Describes requirements for the compounding process, facilities, equipment, components, documentation quality controls and training to promote patient safety.

USP <797>: Sterile Compounding

- Helps to ensure patients receive quality preparations that are free from contaminants and are consistent in intended identity, strength and potency. It describes a number of requirements, including responsibilities of compounding personnel, training, environmental monitoring, storage and testing of finished preparations.

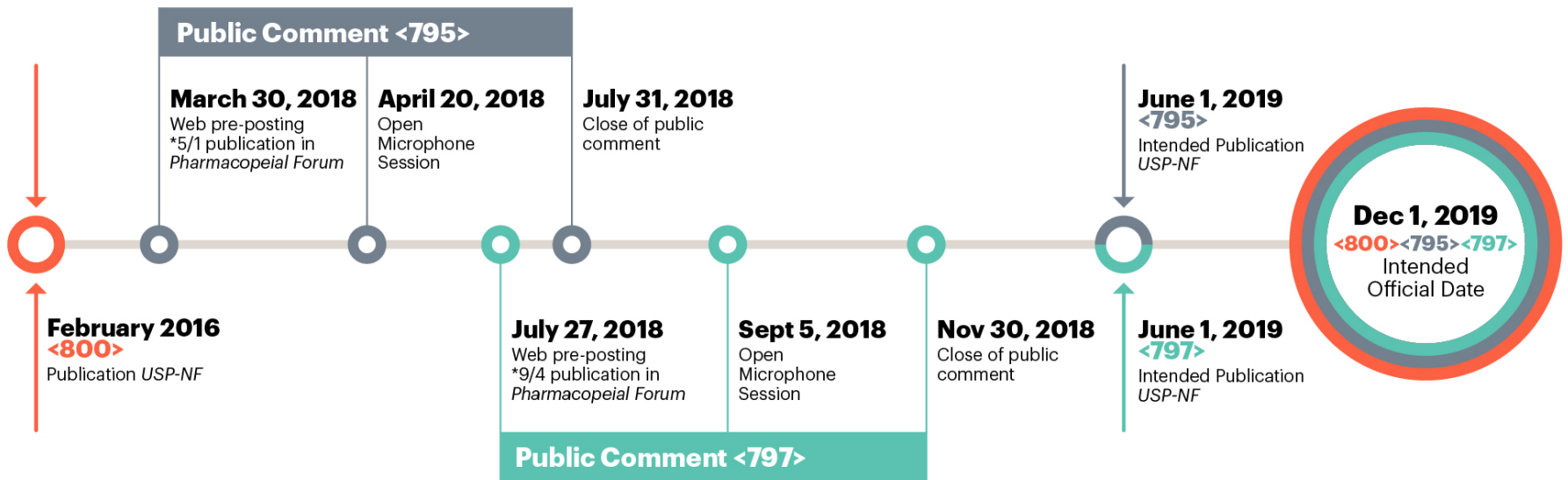
USP <800>: Hazardous Drugs

- Provides standards for safe handling of hazardous drugs to minimize the risk of exposure to healthcare personnel, patients and the environment.

USP <825>: Radiopharmaceuticals

- Provides the minimum standards for the preparation, compounding, dispensing, and repackaging of sterile and non-sterile radiopharmaceuticals for humans and animals that occur as part of state-licensed activities.

USP Compounding Standards Timeline



Note: The current version of General Chapters <795> and <797> published in USP-NF are official.



USP <797> Sterile Compounding

Summary of Updates and Potential Impacts

- Chapter structure and summary tables
- Compounding definition
- New categories
- Clarified current practice → CGMPs

In Scope	Out of Scope
Repackaging	Radiopharmaceuticals
Allergenic extracts	Administration
	Preparation per approved labeling
Hazardous Drugs	

Clean room suite	Segregated Compounding Area (SCA)
ISO 5 PEC (any type)	ISO 5 PEC (any type)
ISO 7 room	N/A
ISO 7 or 8 ante room	N/A
Minimum 0.020" w.c.	No pressure requirement
≥ 20 or ≥ 30 ACPH (15 from HVAC)	No ACPH requirement
Cleanable surfaces and finishes	Cleanable surfaces and finishes
Sink placement clean or dirty side of LOD	Sink accessible but ≥ 1m from PEC and not within the perimeter of SCA
Category 1 or Category 2 CSPs	Category 1 CSPs only

USP <797> Categories and Beyond Use Dates (BUDs)

Table 10 establishes the longest permitted BUDs for Category 1 CSPs. Category 1 CSPs may be prepared in an SCA or cleanroom suite (see 4.2 Facility Design and Environmental Controls).

Table 10. BUDs for Category 1 CSPs

Storage Conditions		
	Controlled Room Temperature (20°–25°)	Refrigerator (2°–8°)
BUD	≤12 hours	≤24 hours

Table 11 establishes the longest permitted BUDs for Category 2 CSPs. Category 2 CSPs must be prepared in a cleanroom suite (see 4.2 Facility Design and Environmental Controls).

Table 11. BUDs for Category 2 CSPs

Preparation Characteristics		Storage Conditions		
Compounding Method	Sterility Testing Performed and Passed	Controlled Room Temperature (20°–25°)	Refrigerator (2°–8°)	Freezer (–25° to –10°)
Aseptically processed CSPs		Prepared from one or more nonsterile starting component(s): 1 day	Prepared from one or more nonsterile starting component(s): 4 days	Prepared from one or more nonsterile starting component(s): 45 days
	No	Prepared from only sterile starting components: 4 days	Prepared from only sterile starting components: 10 days	Prepared from only sterile starting components: 45 days
	Yes	30 days	45 days	60 days
Terminally sterilized CSPs	No	14 days	28 days	45 days
	Yes	45 days	60 days	90 days

Continuous with daily documentation:

- Pressure (if applicable), temperature, humidity

Minimum of every 6 months for classified areas:

- Airborne particle testing
- Viable airborne sampling

Minimum of monthly for classified areas:

- Viable surface sampling

Incubation standards: dual phase temperatures**Action levels:**

- Same threshold levels, but no requirement to ID microorganism unless levels exceeded
- Corrective action plan regardless of findings



For compounding personnel:

- Testing and demonstration initial and every 12 months
- Media fill initial and every 6 months
- Gloved fingertip and thumb sampling initial and every 6 months
- Same incubation standards as environmental monitoring

For other personnel:

- Training and demonstration required
- Frequency determined by training program
- Oversight by designated person



USP <795> Non-Sterile Compounding

Summary of Updates and Potential Impacts

Reorganized chapter

- Mirrors sections in USP <797> and <800>

In Scope	Out of Scope
Any alteration of a drug or bulk drug substance beyond the manufacturer's labeling	Radiopharmaceuticals
	Administration
	Reconstitution
	Repackaging
	Splitting tablets
Hazardous Drugs	

Designated area for nonsterile compounding:

- No carpet, cleanable surfaces
- Minimize cross-contamination
- Temperature monitoring
- Sink accessible and clean

Equipment:

- Closed system processing device i.e. Containment Ventilate Enclosure (CVE), Biologic Safety Cabinet (BSC), single use glove bag
 - Evaluate need and develop SOP for use
 - Certify every 12 months
 - Cleaning SOP

USP <795> Categories and BUDs

- Eliminated categories of compounded products related to complexity
- Expanded requirements for extending BUD beyond regs in absence of data
- Provisions for shorter or extended BUD

Table 3. Maximum BUD by Type of Preparation in the Absence of a USP-NF Compounded Preparation Monograph or CNSP-Specific Stability Information

Type of Preparation	BUDs (days)	Storage Temperature ^a
Non-preserved aqueous dosage forms ^b	14	Refrigerator
Preserved aqueous dosage forms ^b	35	Controlled room temperature or refrigerator
Nonaqueous dosage forms ^c	90	Controlled room temperature or refrigerator
Solid dosage forms ^d	180	Controlled room temperature or refrigerator

^a See *Packaging and Storage Requirements* (659).

^b An aqueous preparation is one that has an A_w of > 0.6 (e.g., emulsions, gels, creams, solutions, sprays, or suspensions).

^c Any preparation other than solid dosage forms that have a reduced A_w of ≤ 0.6 (e.g., suppositories, ointments, fixed oils, or waxes).

^d Capsules, tablets, granules, powders.

- Training and demonstration of core competencies every 12 months
- Hand hygiene and garbing
 - Gloves required, additional PPE per SOP
- Cleaning and sanitizing

Table 1. Minimum Frequency for Cleaning and Sanitizing Surfaces in Nonsterile Compounding Area(s)

Site	Minimum Frequency
Work surfaces	<ul style="list-style-type: none"> • At the beginning and end of each shift, after spills, and when surface contamination is known or suspected • Clean and sanitize the work surfaces between compounding CNSPs with different components
Floors	Daily, after spills, and when surface contamination (e.g., splashes) is known or suspected
Walls	Every 3 months, after spills, and when surface contamination (e.g., splashes) is known or suspected
Ceilings	When visibly soiled and when surface contamination is known or suspected
Storage shelving	Every 3 months, after spills, and when surface contamination (e.g., splashes) is known or suspected

Policies and Procedures

- Document, document, document!

Master Formulation Records (MFR) and Compounding Records (CR)

- MFR: Describes procedures for preparation, BUD, references
- CR: Documents the steps and components used

Designated Person

- Oversight of compliance with all aspects of each chapter

QA and QC Plan

- Adherence to SOPs
- Prevention and detection of errors and other quality problems
- Evaluation of complaints and adverse events
- Investigations and corrective actions



Premier Resources

Support Services for USP Compliance



Get Ready and Stay Ready with Premier's Support

General advice and updates

- Blog posts and webinars

Subject Matter Experts

- Resource, references and FAQs

Preparation Checklists

- Quick reference tools

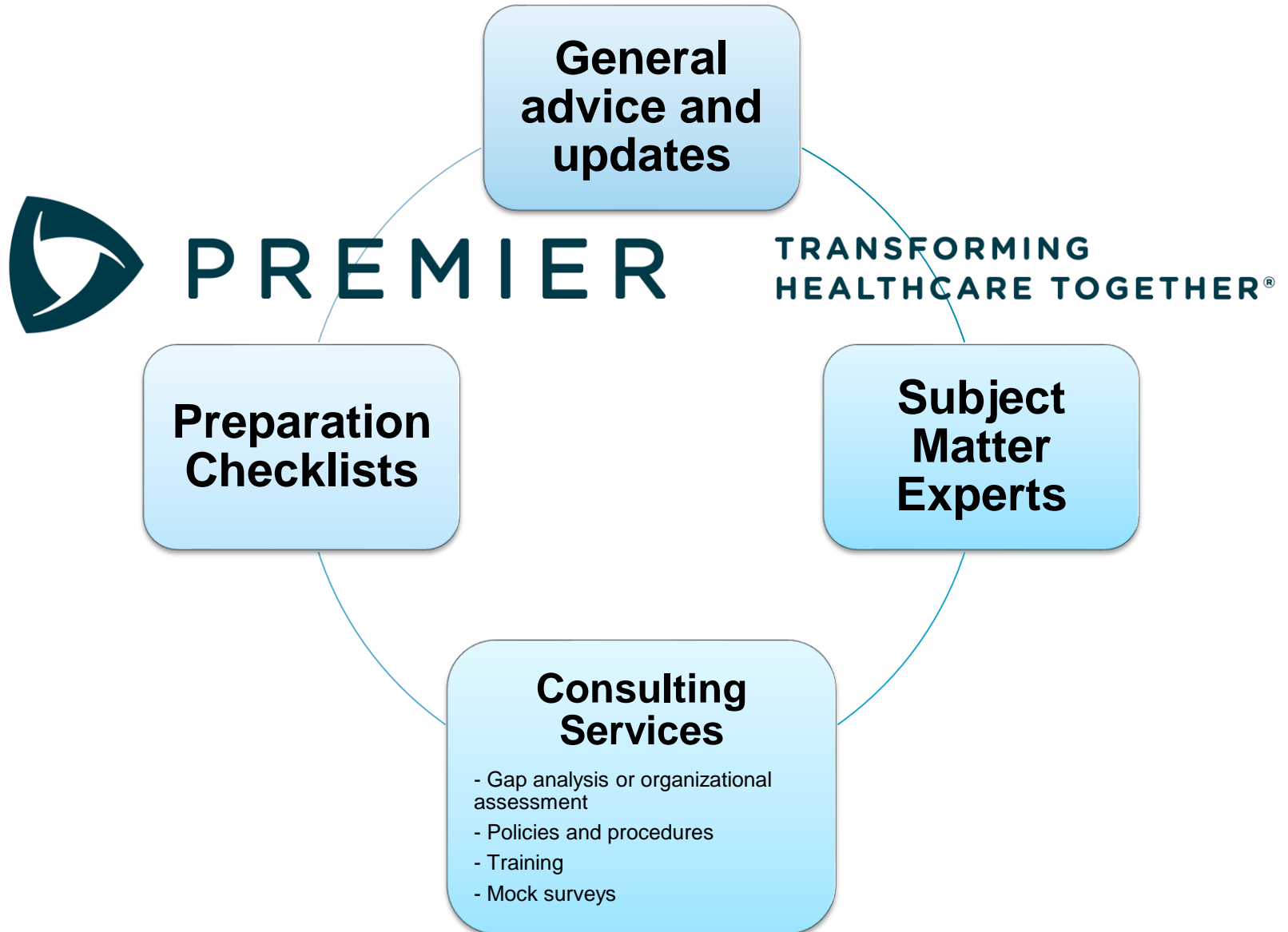
Consulting services

- Gap analysis or organizational assessment
- Policies and procedures
- Training
- Mock surveys



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Alternate Site Programs



Cleanroom PPE, Cleaning Supplies, and Consumables

Current Suppliers:

- Acute Care Pharmaceuticals (PPPH21ACP01)
- Contec, Inc. (PPPH21CON01)

Current Supplies Include:

Shoe covers, non-shedding	Beard covers
Hair covers/hair bonnets	Masks, sterile
Goggles	Coats, non-shedding
Coveralls, non-shedding	Gloves, sterile
Gloves, chemotherapy, sterile	Gowns, non-shedding
Wipes, lint-free	Alcohol pads/wipes
70% sterile isopropyl alcohol	Sporicidals
Other disinfectant agents	Media fill kits
Floor mops, non-shedding	Chemo spill kits
Floor wipers, non-shedding	





Current Suppliers:

- The Baker Company (PPPH22BAK01)
- NuAire, Inc. (PPPH22NUA01)

Includes:

- Laminar airflow workbenches
- Compounding aseptic isolators (CAI)
- Compounding aseptic containment isolators (CACI)



Key Considerations:

- Warranty and service guarantees
- Size configurations
- Accessories

Wireless Temperature and Air Pressure Monitoring- various Suppliers



Medication and Laboratory Grade Refrigerators & Freezers

- Helmer- (PPPH20HLM01)
- NorLake- (PPPH20NLK01)

Cleanroom workflow software Suppliers:

- DoseEdge- Baxter (PPPH20BAX05)
- i.v.Soft- Omnicell (PPPH20OMN01)



Cleanroom compounding robotic Suppliers:

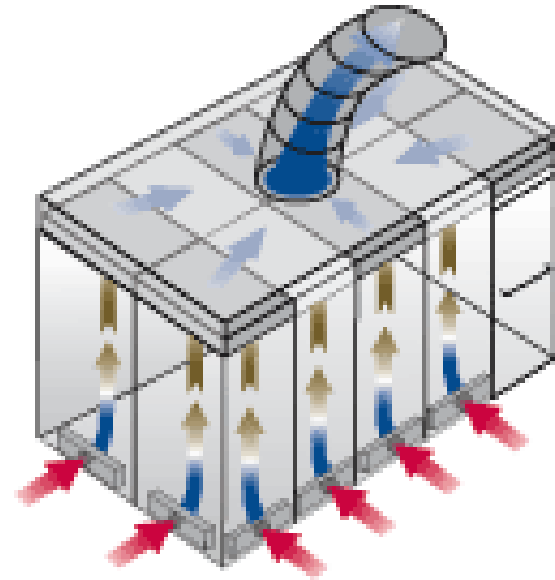
- i.v.Station- Omnicell (PPPH20OMN01)
- i.v. Station- ONCO- (PPPH20OMN01)
- RIVA- ARxIUM cGMP robot- (pending)



Air Quality Certification and Testing Services:
Medical Technology Associates-MTA (PPPH21ETN01)
Technical Services Solutions-TSS (PPPH21TSS01)



Outsourced Services: Cleanroom Planning & Design



Cleanroom Planning and Design:

- Aseptic Enclosures- (PPPH21APK01)
- Carter Health- (PPPH21CTR01)



Outsourced Services- 503A and 503B Compounding



Outsourced I.V. Admixture Service Suppliers:

- AIS Healthcare- (PPPH21AIS01)- 503A intrathecal pain pump refills
- CAPS- (PPPH21BBM01)- 503A for TPN and 503B injectables
- Fagron Sterile Services- (PPPH21FSS01)- 503B ophthalmics and drug shortages
- Leiters- (PPPH21LTR01)- 503B injectables, ophthalmic meds, drug shortages
- Nephron- (PPPH21NAP01)- 503B injectables and drug shortages
- PharMEDium- (PPPH21PMD01)- 503B injectables
- QuVa- (PPPH21QVA01)- 503B injectables and drug shortages
- SCA- (PPPH21SCA01)- 503B injectables and drug shortages



Questions?

[Preparation Checklists for USP <795> <797> <800>](#)

[GPO Contracts](#)

[USP Compliance Services for Non-Acute Sites of Practice](#)

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- [Jennifer Valentine](#) – non-acute sites of practice
- [Chris Jones, RPh](#) – GPO contracts
- [Soumi Saha, PharmD, JD](#) – advocacy

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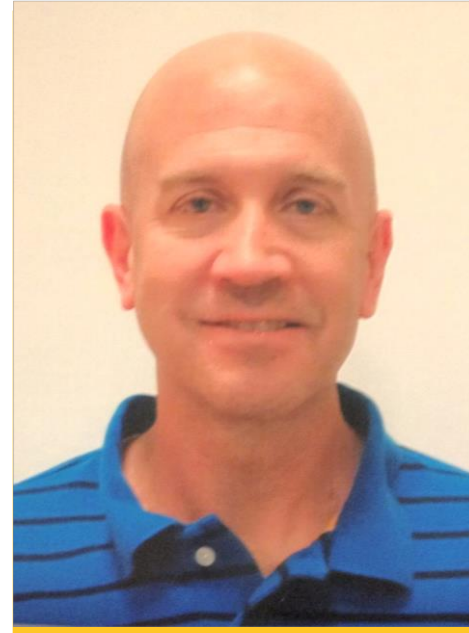
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