

Appendix 1: Intrathecal SACT Assessment Questions

Core General Questions - must be completed by all staff.

1. "Intrathecal" must never be abbreviated to IT on a prescription form

True / False

2. Intrathecal SACT must be administered in a designated area where no other SACT is being given or stored

True / False

3. Only registered consultants, ST3 and above or staff in a non-consultant career grade can prescribe intrathecal SACT

True / False

4. If approved to be scheduled on the same day, intrathecal SACT must be issued before any intravenous chemotherapy is given to the patient

True / False

5. Intrathecal SACT can be prescribed on any SACT prescription form

True / False

6. Any nurse trained in intravenous SACT can be involved in the checking procedures for the administration of intrathecal SACT

True / False

7. The register of designated staff should be available to all personnel involved in intrathecal SACT

True / False

8. Intrathecal SACT may only be administered outwith normal working hours in exceptional circumstances

True / False

9. Since 1985 there have been at least 13 patients who died or were paralysed through the accidental intrathecal administration of Vincristine intended for intravenous administration

True / False

10. For adults, doses of vinca alkaloids may be prepared as a bolus syringe

True / False

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FOR QUESTIONS 11-18 PLEASE SELECT THE MOST APPROPRIATE ANSWER(S)

- 11. How frequently must registered staff involved in prescribing, supply, administration and checking of intrathecal SACT be assessed?
 - a) Every year
 - b) Once on the register they do not need reassessed
 - c) Every two years
 - d) Twice per year
- 12. Who can collect intrathecal SACT?
 - a) A Doctor who is named on the intrathecal SACT register
 - b) Anyone from the ward can collect as long as they sign for receipt
 - c) A Nurse, who is named on the intrathecal register
 - d) A Pharmacist who is named on the intrathecal SACT register
- 13. Who is allowed to administer intrathecal SACT to adult patients?
 - a) Any doctor or nurse named on the intrathecal register
 - b) Nurses named on the intrathecal register
 - c) Consultants, ST3 and above and staff grades/associate specialists in Haematology named on the intrathecal register
 - d) Any Consultant
- 14. Can intravenous bolus doses of SACT and intrathecal SACT be administered to the same patient on the same day?
 - a) Yes
 - b) No
 - c) Yes, but only if they are an in-patient
 - d) Yes, but only if they are an out-patient
- 15. If the answer to question 14 is YES, what precautions must be taken?
 - a) There must be a significant separation in time between administrations
 - b) The administering doctor must sign the appropriate section of the SACT prescription to confirm bolus intravenous SACT has been administered
 - c) The intrathecal SACT will only be released from pharmacy after pharmacy has received confirmation that the bolus intravenous SACT has been administered
 - d) All of the above
- 16. Where can intrathecal SACT be stored on a ward?
 - a) With the rest of the SACT injections
 - b) In a designated area
 - c) No intrathecal SACT will be stored on the ward
 - d) In the controlled drug cupboard

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- 17. What members of staff must be involved in the administration checking procedure for intrathecal SACT
 - a) Two members of staff named on the intrathecal register ie doctor/doctor or doctor/nurse
 - b) One doctor named on the intrathecal register
 - c) A doctor and nurse, only one named on the intrathecal register
 - d) Any SACT trained nurse
- 18. What checks must be made and recorded before administering intrathecal SACT?
 - a) Patient's name, date of birth and patient CHI number
 - b) Drug name
 - c) Drug dose and volume
 - d) Drug expiry date
 - e) All of the above

PAEDIATRIC SPECIFIC QUESTIONS FROM RHC INTRATHECAL POLICY - MUST BE COMPLETED BY ALL STAFF

- 1. Where can you check who is authorised to administer intrathecal SACT within the Women and Children's Directorate?
 - a) The NHS GG&C Paediatric intrathecal register of authorised personnel
 - b) The national intrathecal register
 - c) By asking them
 - d) The GG&C adult register
- 2. What grade(s) of medical staff, within Women & Children's Directorate, can be on the intrathecal register and therefore authorised to prescribe intrathecal SACT?
 - a) Consultants only
 - b) Specialist registrars and consultants only
 - c) ST4 and above, staff in a non consultant career grade and Consultants
 - d) Selected ST3s, ST4 and above, staff in a non consultant career grade and consultants
- 3. What grade(s) of medical staff, within Women & Children's Directorate, can be on the intrathecal register and therefore authorised to administer intrathecal?
 - a) Consultants only
 - b) Specialist registrars and consultants only
 - c) ST4 and above, staff in a non consultant career grade and consultants
 - d) Selected ST3s, ST4 and above, staff in a non consultant career grade and consultants
- 4. In which clinical areas are staff able to access the NHS GG&C Paediatric Intrathecal Register?
 - a) All areas where intrathecal chemotherapy is routinely administered
 - b) All wards and departments
 - c) Theatres only

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- d) Pharmacy Aseptic Unit
- 5. Who is authorised to collect intrathecal SACT from the Aseptic Unit?
 - a) Medical staff who are on the intrathecal register and are administering the drug
 - b) Any member of staff who is on the intrathecal register
 - c) Anyone, as long as they sign for receipt
 - d) No one. Pharmacy staff should deliver directly to ward/theatre
- 6. What type of prescription form must SACT chemotherapy be prescribed on?
 - a) A fluid chart with no other drugs prescribed on it
 - b) The once only section of an in-patient prescription form
 - c) Either the GG&C approved intrathecal prescription or validated ChemoCare prescription.
 - d) A Directorate specific intrathecal drug prescription form.
- 7. If outpatients are scheduled to receive intravenous bolus chemotherapy and intrathecal chemotherapy on the same day, in what order should they be released to staff?
 - a) Intravenous dose then intrathecal dose
 - b) Intrathecal dose then intravenous dose
 - c) Both can be released at the same time.
 - d) Out-patients should never be scheduled to receive intrathecal and intravenous bolus chemotherapy on the same day
- 8. If out-patients are scheduled to receive intravenous bolus chemotherapy and intrathecal chemotherapy on the same day, what must pharmacy receive before releasing the intrathecal chemotherapy?
 - a) The signed intravenous SACT administration record
 - b) The intrathecal SACT administration chart
 - c) The patient prescription form
 - d) The patient fluid chart
- 9. If intrathecal chemotherapy is being administered in a designated area with local anaesthesia, what precautions should be taken?
 - a) No precautions necessary
 - b) Local anaesthesia should be drawn up using a 2 mls syringe
 - c) Local anaesthesia should be drawn up using a 2 mls syringe and removed from trolley before proceeding with intrathecal chemotherapy administration
 - d) Local anaesthesia should be drawn up using a 2 mls syringe, removed from trolley before proceeding with intrathecal chemotherapy administration and a final visual and verbal check of chemotherapy carried out before administration
 - e) No precautions necessary but a final visual and verbal check of chemotherapy should be carried out before administration

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CLINICAL PHARMACY STAFF ONLY QUESTIONS

- 1. Which members of the pharmacy staff are allowed to prepare intrathecal SACT?
 - a) Pharmacists whose name appear on the intrathecal register as authorised to perform dispensing
 - b) Any pharmacist
 - c) Technicians whose name appear on the intrathecal register as authorised to perform dispensing
 - d) Any technician or pharmacist working in the Aseptic Preparation Unit
- 2. What checks must be made before an intrathecal SACT item is final released from the pharmacy? There is more than one correct answer. Please circle all correct answers.
 - a) The prescriber is named on the intrathecal register
 - b) The prescription is written on the pre-printed intrathecal prescription
 - c) A clinical pharmacist has verified that the prescription details are correct
 - d) A clinical pharmacist named on the intrathecal register has verified that the prescription details are correct
- 3. What are the special label requirements for intrathecal SACT?
 - a) A) "Not for Intravenous Use"
 - b) B) "For Intrathecal Injection" on the syringe
 - c) C) "For Intrathecal Injection" on the syringe, and over-wrapped and labelled "For Intrathecal Injection"
 - d) D) There are no special labelling requirements

| 4. | Where in the pharmacy department is the prepared intrathecal SACT stored before issue? |
|----|--|
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| | |

- 5. Who can issue intrathecal chemotherapy? Please circle all correct answers.
 - a) Any member of staff working in the Aseptic Preparation Unit
 - b) Technicians named on the intrathecal chemotherapy register
 - c) Pharmacists named on the intrathecal chemotherapy register
 - d) Any pharmacist
- 6. What checks must be made and recorded before administering intrathecal chemotherapy?
 - a) Patient's name, date of birth and patient unit number
 - b) Drug name
 - c) Drug dose and volume

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- d) Route of administration (i.e. intrathecal)
- e) Drug expiry date
- f) All of the above



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Appendix 2: Sign-off Sheet

| TRAINEE NAME: | | | |
|--|---|---------------------|--------------------|
| JOB TITLE: | | | |
| DEPARTMENT: | | | |
| | | | (4) |
| I have read and intrathecal asses | understood the relevant ess sment policy. | sential reading con | tained within the |
| | | | |
| Trainee Signature: | | Date: | 130 |
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| Intrathecal chemot competent | herapy assessment completed | successfully (100%) |) & trainee deemed |
| Name: | (0) | 6) | |
| Signature: | | Date: | |
| (Senior Paediatri Practitioner/Educat | c Haem/Onc pharmacist, | Medical trainer, | Advanced Nurse |
| Practitioner/Educat | 01) | | |
| Review Date (2 year | ars): | | |
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| | y is signed below | corption training L | octore meratirecar |
| | | | |
| Name of person en | tering onto database: | | |
| Signature: | | Date: | |

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