Connecting The Dots

Promoting Breastfeeding Friendly Prescribing in a Baby Friendly Health Initiative Accredited Hospital

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Pharmacy Department, Ballarat Health Services
Case Study

- JH
- 27-year-old Caucasian female
- Pregnant
  - 37+6/40 gestation
  - Gravida 3, Para 2
  - Uncomplicated to date
- Past medical history:
  - Rosacea, endometriosis, obesity
Current Presentation

- Admitted for LUSCS
  - polyhydramnios (AFI 37 cm) and macrosomia (>98%) with non reassuring CTG
- Tachycardic perioperatively (HR 120), which persisted post LUSCS (HR 150)
- ECG: rapid atrial fibrillation
- Amiodarone 2 x 150mg IV (HR post 110)
- Advised not to breastfeed by medical staff
• Clinical Pharmacy review
• Remained tachycardic despite IV metoprolol (HR 180)
• Successful cardioversion (HR 80)
  – Commenced on bisoprolol and perindopril
  – Advised to stop breastfeeding again
• Consultation between cardiology and pharmacy
  – Change to metoprolol and enalapril to support breastfeeding
Additional examples

• Mothers advised not to BF whilst taking flucloxacillin for mastitis

• Rheumatology patient advised not to BF due to specialist advice to initiate meloxicam

• A mother advised not to BF following incorrectly interpreted advice from a tertiary Medicines Information Centre
Connecting The Dots ...

- **Aims:**
  - To highlight BF status on prescription forms
  - alert sticker
  - To provide support/guidance for clinical decision making
  - clinical practice guideline

- Collaboration with Lactation Consultants
- Endorsement from BHS Women’s & Children’s PIC
• Aim to provide guidance in relation to:
  – the use of medications during breastfeeding
    • Factors affecting medication transfer into breastmilk
    • General considerations for prescribing
  – the resources available to guide medicine choice for breastfeeding women
    • During office hours
    • After hours
Alert Sticker Design

- Asked BFHI for permission to use their logo
  - Process not yet in place for ‘appropriate’ use of logo outside of organisation
Alert Sticker Design

• We tried designing ourselves...

I INTEND TO BREASTFEED

REFER TO CPGxxx FOR GUIDANCE
Alert Sticker Design

• We approached Ballarat Grammar
**REGULAR MEDICATIONS**

### Year 20

<table>
<thead>
<tr>
<th>Date</th>
<th>Medication (Print Generic Name)</th>
<th>Route</th>
<th>Dose</th>
<th>Time of Day</th>
<th>Time Level Taken</th>
<th>Drug Level</th>
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**VARIABLE DOSE MEDICATION**

<table>
<thead>
<tr>
<th>Route</th>
<th>Frequency</th>
<th>Indication</th>
<th>Prescriber Signature</th>
<th>Print Your Name</th>
<th>Contact</th>
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**WARFARIN**

- **Medication**: (Marevan/Coumadin)
- **Status**: Brand

<table>
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<tr>
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<th>Prescriber to enter individual doses</th>
<th>Target INR</th>
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**DOSE TIME**

- **1600 (pm)**

**Dose**

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### ENTER administration times

**Date**

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**VTE Avoidance**

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**AS REQUIRED**

**PRN**

**MEDICATIONS**

See front page for details

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**REGULAR MEDICATIONS**

### Year 20

**DATE & MONTH**

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**AFFIX PATIENT IDENTIFICATION LABEL HERE & OVER LEAF**

**UR No:**

**NOT A VALID PRESCRIPTION UNLESS IDENTIFIERS PRESENT**

**Family Name:**

**Given Names:**

**Address:**

**DOB:**

Sex [ ] M [ ] F

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1st Prescriber to Print Patient Name and Check Label Correct:

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The Australian Council for Safety and Quality in Health Care acknowledges the significant contribution of the Queensland Health Medication Management Services.
Visual Literacy: Using Images to Increase Comprehension

• Text requires more processing analysis than visual images
  – Requires decoding to have meaning
  – The brain first must compare letters and word-forms with shapes stored in memory
Revisions

- Remove shading
- Change shape
- Remove unnecessary text

Breastfeeding Mother

Refer to CPG0088 for guidance
### REGULAR MEDICATIONS

**YEAR 20**  
**DATE & MONTH**

#### VARIABLE DOSE MEDICATION

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**DOSE TIME 1600 (4pm)**  

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**COMPLETED ADMINISTRATION TIMES**  
**Below 25**  
**Above 65**

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### AS REQUIRED "PRN" MEDICATIONS

**YEAR 20**  
**DATE & MONTH**

#### ENTER administration times

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**AS REQUIRED**

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### AFFIX PATIENT IDENTIFICATION LABEL HERE

**UR No:**  
**NOT A VALID PRESCRIPTION UNLESS IDENTIFIERS PRESENT**

**Family Name:**  
**Given Names:**  
**Address:**

**DOB:**  
**Sex ☐ M ☐ F**

1st Prescriber to Print Patient Name and Check Label Correct: ___________________________
Where to from here...

• Alert Sticker
  – Forms Committee approval
  – Quotes for printing
    • External print shop vs BHS print shop vs ward printing
• CPG ratification
• Medication Safety Committee
• Implementation and education
Special Thanks To...

• Judy Russell, Clinical Nurse Consultant Lactation, Ballarat Health Services

• Eben Ejdne, Ballarat and Queen’s Anglican Grammar

• Monash Health Drug Information Centre

• The Women’s Hospital Drug Information Centre
Aim: to give every baby the best start in life by creating health care environments where breastfeeding is the norm and practices known to promote the health and wellbeing of all women and babies are followed.

Baby Friendly’ accreditation is a quality assurance measure that demonstrates a commitment by the facility to offer the highest standard of maternity care.

To be accredited as ‘Baby Friendly’, hospitals must comply with the global standard, 'Ten Steps to Successful Breastfeeding', established by WHO and UNICEF.
A logo is used to communicate a message

A good logo should be:

- Simple: easily recognizable, versatile, memorable
- Timeless: Will it still be effective in 10, 20 years?
- Versatile: is the logo effective if it is printed...
  - In one color? In reverse colour?
  - The size of a postage stamp? As large as a billboard?
- Appropriate: for the intended audience
Medicines and Breastfeeding

• It is universally agreed that human milk is best for human infants
• Medications do transfer into human milk to some extent; most don’t enter breast milk in amounts hazardous to a breastfed infant
• Breastfeeding mothers can safely use most prescribed medications, some may be preferred within a class over others