



Safety Notice 001/16

9 May 2016

Distributed to:

- Chief Executives
- Directors of Clinical Governance
- Associate Director, Private Health Care

Action required by:

- Chief Executives
- Directors of Clinical Governance

We recommend you also inform:

- Directors of Medical Services
- Directors of Nursing and Midwifery
- Directors of Pharmacy
- Drugs and Therapeutic Committees and subcommittees

Expert Reference Group

Content reviewed by:

- Medication Safety Expert Advisory Committee
- Pharmaceutical Services Unit

Clinical Excellence Commission

Tel. 02 9269 5500
Fax. 02 9269 5599

Email:
cec-quality@health.nsw.gov.au

Internet Website:
<http://www.health.nsw.gov.au/quality/sabs>

Intranet Website
<http://internal.health.nsw.gov.au/quality/sabs/>

Review date

April 2018

Changes to Medicine Ingredient Names - April 2016 to April 2020

Purpose

To advise health services and clinicians that the Therapeutic Goods Administration (TGA) will be changing some medicine ingredient names used in Australia to align with names used internationally.

To advise health services and clinicians of the actions required to minimise the risk of medication error due to changes in medicine ingredient names.

To inform health services and clinicians of the list of medicine ingredient name changes.

Issue

- Not all medicine ingredient names are changing. A list of medicine ingredient names that will be changing is available from the TGA at <https://www.tga.gov.au/updating-medicine-ingredient-names>¹.
- There will be a transition period for changes to medicine ingredient names, from April 2016 to April 2020. Different manufacturers of the same medicine may implement the change on packages and labels at different points in time.
- Some changes are significant while others are minor:
 - Medicines containing adrenaline and noradrenaline will start to include the international names, epinephrine and norepinephrine (in brackets), on labels and information leaflets. Adrenaline and noradrenaline will remain the approved names in Australia.
 - Some medicines with significant changes will be dual labelled (i.e. both the new and old ingredient name displayed) on the product label until 2023 e.g. frusemide will become furosemide (frusemide)
 - Others with significant changes will not be dual labelled e.g. hexamine hippurate will become methenamine hippurate.
 - Minor changes include names with minor spelling change e.g. amlodipine besylate will become amlodipine besilate; amoxicillin will become amoxicillin.
 - Some salt, hydration and excipient ingredient names will also be updated.
- The changing of affected medicine names in clinical resources such as MIMS, Therapeutic Guidelines and software in dispensing and prescribing systems is expected to occur gradually.

Minimising the risk of medication error

Complete a local risk assessment and develop a local plan to identify and mitigate any potential medication errors resulting from the changes.

Continued overleaf

Suggested actions by Local Health Districts/Networks

1. Ensure that this safety notice and the link to the TGA website is distributed to all clinical staff involved in the prescribing, administration, dispensing or supply of medicines.
2. Develop a local plan to minimise the risk of medication error resulting from the changes.
3. Provide details of the plan to cec-medicationsafety@health.nsw.gov.au by 30th June 2016.
4. Drugs and Therapeutic Committees review the plan annually until the changes are complete.

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Minimising the risk of medication error continued

Local plans should include strategies to:

- minimise clinician and consumer confusion through education and the provision of lists of medicines, likely to be encountered, affected by the changes. Education efforts should target all clinician groups and staff affected by the name changes. These include but are not limited to: prescribers, pharmacists, nurses and staff working in nuclear medicine and diagnostic imaging.
- provide ready access to the full list of medicine ingredient names that are changing
- review all local guidelines and resources, including documents provided to patients, containing medicine ingredient names that are changing and update them to include both the old and new name during the transition period
- include both the old and new name on shelf labels where medications are stored during the transition period. Where a significant name change requires a change in the storage sequence, strategies should be implemented to ensure that medicines can be easily located
- communicate with patients about name changes and update any local programs that produce medication lists for patients
- identify any local electronic medication systems that are not centrally supported by NSW eHealth and ensure that local updating schedules are maintained (updates should be provided by vendors regularly).

Further Information

1. Therapeutic Goods Administration, 17 March 2016 Updating medicine ingredient names
<https://www.tga.gov.au/updating-medicine-ingredient-names>