

## Sunderland joint formulary – Checklist for safe dispensing of insulin.

### **Note:**

High strength insulins and biosimilar insulins are for specialist initiation only. They should not be initiated in primary care. After initiation, they may need to be prescribed by GPs and this document provides guidance to support patient safety when they are prescribed and dispensed.

At the time of publication, high strength insulins, and biosimilar insulins are non-formulary products within Sunderland.

### **Reinforce the benefits of carrying an insulin passport**

- Ask the patient if they have an insulin passport (or an insulin credit card)
- Provide an insulin passport if not already in possession of one
- Encourage them to carry the passport and explain the benefits
- Check the patient's prescription against the insulin passport information and the product at the point of dispensing

### **General recommendations**

- **All insulins should be prescribed by brand name.**  
Return any prescription that does not specify brand name to the prescriber.
- **Dose conversion** - If a patient is switching between different products – check whether a dose conversion is required, and whether this has been calculated correctly.

### **Ensuring that the patient receives the correct strength insulin product**

- Be aware that several higher strength preparations of insulin i.e. 200units/ml and 300units/ml are available in addition to standard 100units/ml strength.  
Currently these are Humalog<sup>®</sup> (insulin lispro), Tresiba<sup>®</sup> (insulin degludec) or Toujeo<sup>®</sup> (insulin glargine).

**Challenge any prescription for these insulins that does not specify the strength, to establish what is required.**

Prescribers are being asked to include the strength of insulin on all insulin prescriptions, however it will take time to implement this.

### **Minimise the risk of picking errors**

- Ensure that storage arrangements for high-strength insulins facilitate correct selection of the medicine
- Ensure that the electronic dispensing system allows clear differentiation between different strength insulins
- Carefully check the strength of insulin selected from the picking list on the electronic dispensing system
- Carefully check the strength of the insulin dispensed against the strength on the prescription and the patient's insulin passport

### **Ensure that patients can use their insulin product**

- Ensure that patients have been trained on the use of any new insulin

- If different short and long-acting insulins are prescribed together, the differences in appearance and use between devices must be highlighted to the patient.
- Check that patients/carers are able to read the strength of the insulin and the dose counter of the pen device before dispensing
- Tell patients to closely monitor their blood sugar levels when starting a new insulin

## **Appendix 1 – Implementation of the NPSA insulin passport in Sunderland CCG**

The National Patient Safety Agency (NPSA) advises that healthcare professionals who prescribe insulin must issue patients with a NPSA insulin passport and support them in its use and in keeping it up to date.

### **Information in the insulin passport**

- details of the patient's insulin product(s) – including brand name and strength
- emergency information informing others that a patient has diabetes and injects insulin;
- information for others that tells them what to do if a patient is found ill or has lost consciousness;
- contact names and telephone numbers;
- other medication that the patient is using.

### **How the insulin passport should be used.**

Patients should be asked to:

- Know the details of their insulin product(s) and to keep this information up-to date in their insulin passports;
- Carry their Insulin Passport with them so that the information is available in an emergency
- Show the insulin passport to health professionals to confirm details of their current insulin when they are collecting a prescription or their medicines dispensed from the pharmacy.
- Make sure that they receive the correct insulin product(s) by checking all prescriptions and dispensed insulin against the information in their Insulin Passport.
- Question any changes, as the names of insulin products can look and sound very similar and that can result in errors;
- Make sure that they know, and anyone administering insulin to them knows, the correct dose and frequency of their insulin therapy (this information is not included in the Insulin Passport);

The NPSA patient information booklet '*Diabetes: insulin, use it safely*' can be used to support patients in the use of the passport. It directs patients to show the Insulin Passport to healthcare professionals during the prescribing and dispensing process and provides further information for patients about safe use of insulin.

**All health professionals are responsible for checking the information in the insulin passport before prescribing, dispensing or administering insulin.**

**Any discrepancies between the information held by the health professional and that in the insulin passport, must be reconciled before proceeding with prescribing, dispensing or administration.**

Factors beyond the control of patients or healthcare professionals may mean it is not possible to use a patient's Insulin Passport for the purposes of validating the correct insulin product(s). While every effort should be taken to confirm the accuracy of prescribing and dispensing, the risks in this situation should be acknowledged and all actions to promote patient safety recorded.

## Appendix 2 – Example prescriptions

### Example 1

Pharmacy Stamp	Age 55 D.o.B	Name (including forename) and address John Smith 22 Front Street Anytown	
By not to stamp over age box	Number of days' treatment N.B. Ensure dose is stated	NP	Pricing Office
Pack & quantity	Humulin I 100units/ml suspension for injection 3ml cartridges  Dose as directed  Supply 10x3ml		
Signature of Doctor Dr Jones	Date 7/7/16		
For dispenser No. of Prescrs. on form	Dr Jones      123456789 Anytown Medical Centre Anytown AN7 TWN		
<b>NHS</b> PATIENTS – please read the notes overleaf			

## Example 2

Pharmacy Stamp	Age 62 D.o.B	Name (including forename) and address Julie Brown 14 Second Road Anytown	
By not to stamp over age box	Number of days' treatment N.B. Ensure dose is stated	NP	Pricing Office
Pack & quantity	Tresiba FlexTouch 200units/ml solution for injection 3ml pre-filled pen  Dose as directed  Supply 5x3ml		
Signature of Doctor Dr Jones	Date 7/7/16		
For dispenser No. of Prescns. on form	Dr Jones      123456789 Anytown Medical Centre Anytown AN7 TWN		
<b>NHS</b> PATIENTS – please read the notes overleaf			

### Example 3

Pharmacy Stamp	Age 36	Name Kate Simpson The Cottage Jeffers Farm Anytown		
By not to stamp over age box	Dispenser's endorsement	Number of days' treatment N.B. Ensure dose is stated	NP	Pricing Office
Pack & quantity	Toujeo 300units/ml solution for injection 1.5ml pre-filled SoloSTAR pen  Dose as directed  Supply 10x1.5ml			
Signature of Doctor Dr Jones	Date 7/7/16			
For dispenser No. of Prescs. on form	Dr Jones      123456789 Anytown Medical Centre Anytown AN7 TWN			
<b>NHS</b> PATIENTS – please read the notes overleaf				

## Example 4

Pharmacy Stamp	Age 47 D.o.B.	Name (including forename) and address Doug Green 411 Bell Street Anytown	
By not to stamp over age box		Dispenser's endorsement NP	Pricing Office
Pack & quantity	Abasaglar Kwikpen 100units/ml solution for injection 3ml pre-filled pen  Dose as directed  Supply 5x3ml		
Signature of Doctor Dr Jones		Date 7/7/16	
For dispenser No. of Prescs. on form	Dr Jones      123456789 Anytown Medical Centre Anytown AN7 TWN		
<b>NHS</b> PATIENTS – please read the notes overleaf			

### Appendix 3 – Credit card information

In secondary care, some patients may be issued with credit card information produced by the manufacturer regarding the insulin they use. Below are several examples:  
(NB Secondary care will update insulin passports when treating patients).



**Lantus® SoloStar®**  
100 units/ml  
solution for injection in a pre-filled pen  
insulin glargine  
Subcutaneous use  
5 pens of 3 ml  
sanofi aventis

Name:

Date of Birth:

SANOFI DIABETES 

**I have diabetes and use  
Lantus® SoloSTAR®  
(Insulin glargine)**


NHS Number:

Other Insulins:

Emergency Contact:

24/7 Sanofi Diabetes Care Line Freephone 08000 35 25 25  
If your insulin prescription is changed, please destroy this card  
and collect a replacement.


Date of preparation: December 2011 PRO19462 GBIE.DIA.11.12.08



**Insuman® Comb 15**  
100 IU/ml  
suspension for injection in a cartridge  
Insulin human  
17% dissolved insulin,  
83% crystalline protamine insulin  
5 cartridges of 3 ml  
sanofi aventis

Name:

Date of Birth:

SANOFI DIABETES 

**I have diabetes and use  
Insuman® Comb 15 Cartridges  
(human Insulin)**

NHS Number:


Other Insulins:

Emergency Contact:

24/7 Sanofi Diabetes Care Line Freephone 08000 35 25 25  
If your insulin prescription is changed, please destroy this card  
and collect a replacement.

Date of preparation: December 2011 PRO19467 GBIE.DIA.11.12.08e






**Insuman® Basal SoloStar®**  
100 IU/ml  
suspension for injection in a pre-filled pen  
Insulin human

Subcutaneous use  
5 pens of 3 ml

sanofi aventis

Name:

Date of Birth:

SANOFI DIABETES 

**I have diabetes and use  
Insuman® Basal SoloSTAR®  
(human Insulin)**

NHS Number:

Other Insulins:

Emergency Contact:

24/7 Sanofi Diabetes Care Line Freephone 08000 35 25 25  
If your insulin prescription is changed, please destroy this card  
and collect a replacement.

Date of preparation: December 2011 PRO19472 GBIE.DIA.11.12.08f



**Apidra® SoloStar®**  
100 Units/ml  
Solution for injection in a pre-filled pen  
Insulin glulisine

Subcutaneous use  
5 pens of 3 ml

sanofi aventis

Name:

Date of Birth:

SANOFI DIABETES 

**I have diabetes and use  
Apidra® SoloSTAR®  
(Insulin glulisine)**

NHS Number:

Other Insulins:

Emergency Contact:

24/7 Sanofi Diabetes Care Line Freephone 08000 35 25 25  
If your insulin prescription is changed, please destroy this card  
and collect a replacement.

Date of preparation: December 2011 PRO19465 GBIE.DIA.11.12.08c