



# **PHARMACEUTICAL COMPOUNDING:**

## **COMPLYING WITH USP <797& 800>**

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# Focus on what is good for the **patient!!!**



## *Compliance will follow.....*

# COMPOUNDED PHARMACEUTICAL

- Compounded by pharmacists, doctors, etc., for millions yearly
- Meets needs of patients with no access to required medicine
- Provides correct concentration or dosage
- Minimizes risks by following USP standards



# COMPOUNDED PHARMACEUTICALS

- USP Compounding Standards
  - USP <795, 797, 800, 825>
- Containment Risk Assessment
  - Gap Analysis
- Physical Requirements
  - USP <797 & 800>

# COMPOUNDED PHARMACEUTICALS

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## Compounding Standards

# WHAT IS USP

## United States Pharmacopeia (USP):

- Founded in 1820, as **science-driven** organization
- Publishes pharmacopeia annually
- Convenes experts for standard-setting
- Provides referenced standards & quality verification services
- Headquartered in North Bethesda, MD

# COMPOUNDING STANDARDS

- USP <795> - Compounding Quality  
**Non-sterile** Preparations
- USP <797> - Compounding  
**Sterile** Preparations
- USP <800> - Safe Handling of  
**Hazardous** Drugs
- USP <825> - Preparation, Compounding,  
Dispensing, and Repackaging  
**Radiopharmaceuticals** (Req 60 & 61)

# USP <795> **NON-STERILE** PREPARATIONS

- Provides standards for **non-sterile** products
- Reduces contamination, infection, dosing risks
- Describes processing requirements:
  - facilities
  - equipment & components
  - quality controls & training
- Implement revisions in Dec 1, 2019



# USP <797> **STERILE** PREPARATIONS

- Quality preparations free from contaminants
- Consistent in identity, strength & potency
- Requirements for compounding;
  - personnel & training
  - environmental monitoring
  - storage
  - testing of finished preparations
- **2008** Chapter official, update Dec 2019

# USP <800> HAZARDOUS DRUGS

Applies to all healthcare personnel in all environments conducting activities:

- Receiving
- Preparing
- Administering
- Transporting
- Other activities

# USP <800> **HAZARDOUS** DRUGS

- Provides safe handling procedures to minimize risk:
  - deactivating, decontaminating & cleaning
  - spill control
  - documentation
- Defines facility & engineering controls

# USP <800> **HAZARDOUS** DRUGS

- Procedures for activities involving:
  - deactivating
  - decontaminating & cleaning
  - spill control
- Documentation of usage
- Implement on December, 2019

# USP <825> **RADIOPHARMACEUTICALS**

- Sterile & non-sterile compounding
- Preparing, dispensing & repackaging
- Radiation protection measures (T, D, S)
- Ancillary supplies (e.g., radiation shields)
- Special equipment (e.g., radioactivity measuring devices & monitors)

# COMPOUNDED PHARMACEUTICALS

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## Risk Assessment or “Gap Analysis”

# RISK ASSESSMENT

- Category of Compounded Sterile Product (CSP)
- Sterile vs Non-sterile Products
- Hazardous vs Non-hazardous Drugs
- Radioactive vs Non-radioactive Drugs



# GAP ANALYSIS???

- Compliance with current USP <797>
- Appropriate Containment Space
  - Cleanroom Suite
  - Segregated Containment Area
- Proper Containment Equipment
  - Laminar Airflow Workbench
  - Biological Safety Cabinet
  - Glove Box



# COMPOUNDED STERILE PRODUCT (CSP)

## Criteria

- Processing conditions
  - room temperature, refrigerated, clean air
- Microbial growth probability
  - single or multiple sterile items
- Time period to be used
  - **Beyond-Use-Date (BUD)**

# COMPOUNDED STERILE PRODUCT (CSP)

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## Category CSP-NA

- Only sterile materials
- BUD < 1 hour

## Category CSP 1

- BUD =/< 12 hrs - controlled room temperature
- BUD =/< 24 hrs or less - refrigerated

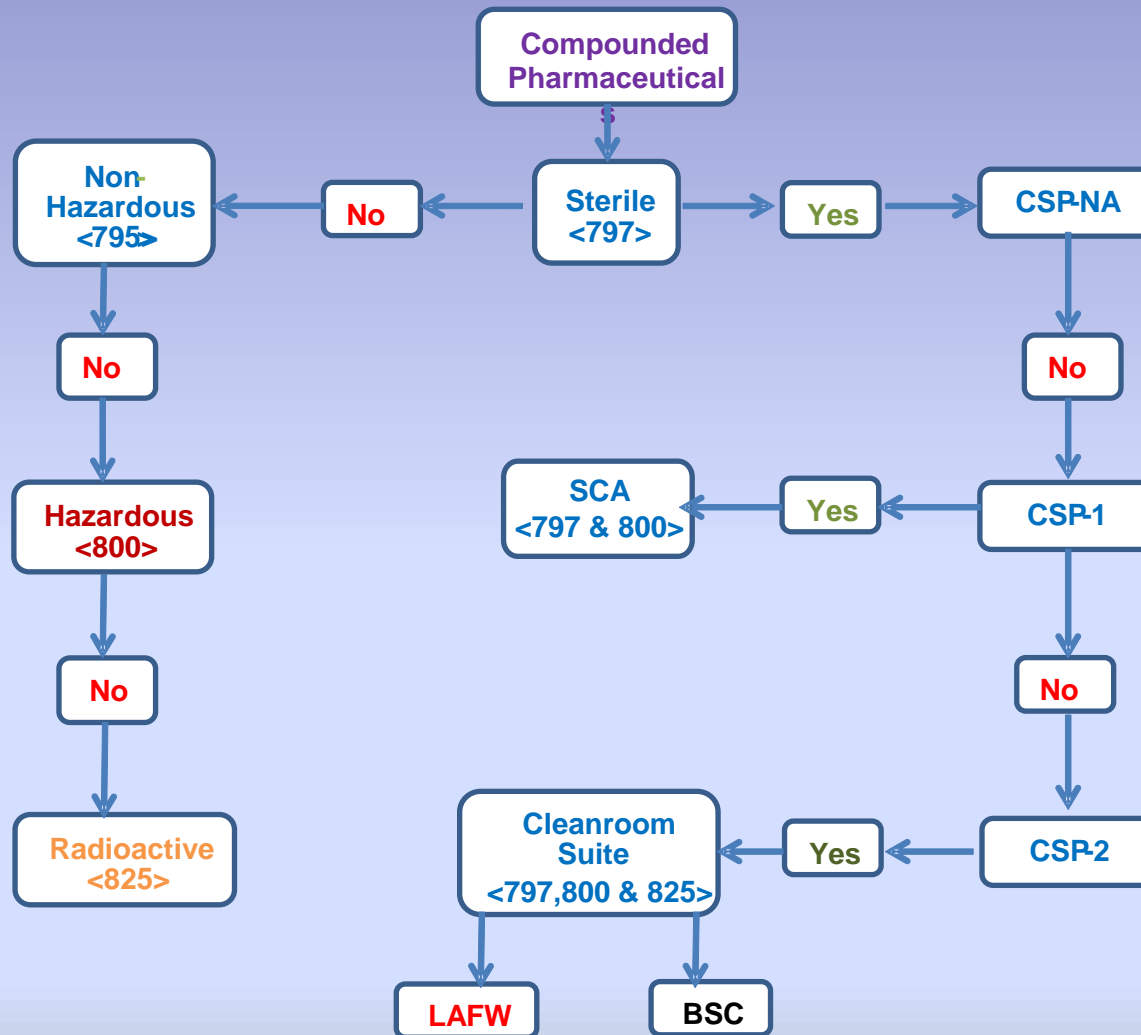
# COMPOUNDED STERILE PRODUCT (CSP)

## Category CSP 2

- BUD > 12 hrs - controlled room temperature
- BUD > 24 hrs - refrigerated



# RISK ASSESSMENT



# COMPOUNDED PHARMACEUTICALS

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## Physical Requirements

# COMPOUNDED PHARMACEUTICALS

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## USP <797> Non-Hazardous Drugs Compounding

# USP <797> PHYSICAL REQUIREMENT

Air Quality - Particulate Matter

Containment Space

Containment Equipment

Work Space



# AIR QUALITY

## Filtered Air

- HEPA filtered air in compounding device
- HEPA filtered air from ceiling in compounding space

## Conditioned Air

- *Comfortable* for personnel in PPE
- Temp =/ $\leq$ 20 degree C (68 degrees F)
- Humidity =/ $\leq$ 60%



# ISO CLASSIFIED AIR QUALITY

*“air quality improves moving to the PEC”*

ISO Class	Particle Count/m <sup>3</sup>
3	35.2
4	352
5	3520
6	35,200
7	352,000
8	3,520,000

# CONTAINMENT SPACE

*Required for all Sterile Compounding:*

## Direct Compounding Area (DCA)

- Direct HEPA Filtered “first air”
- ISO Class 5

## Primary Engineering Control (PEC)

- Device or room containing DCA
- HEPA filtered air
- ISO Class 5

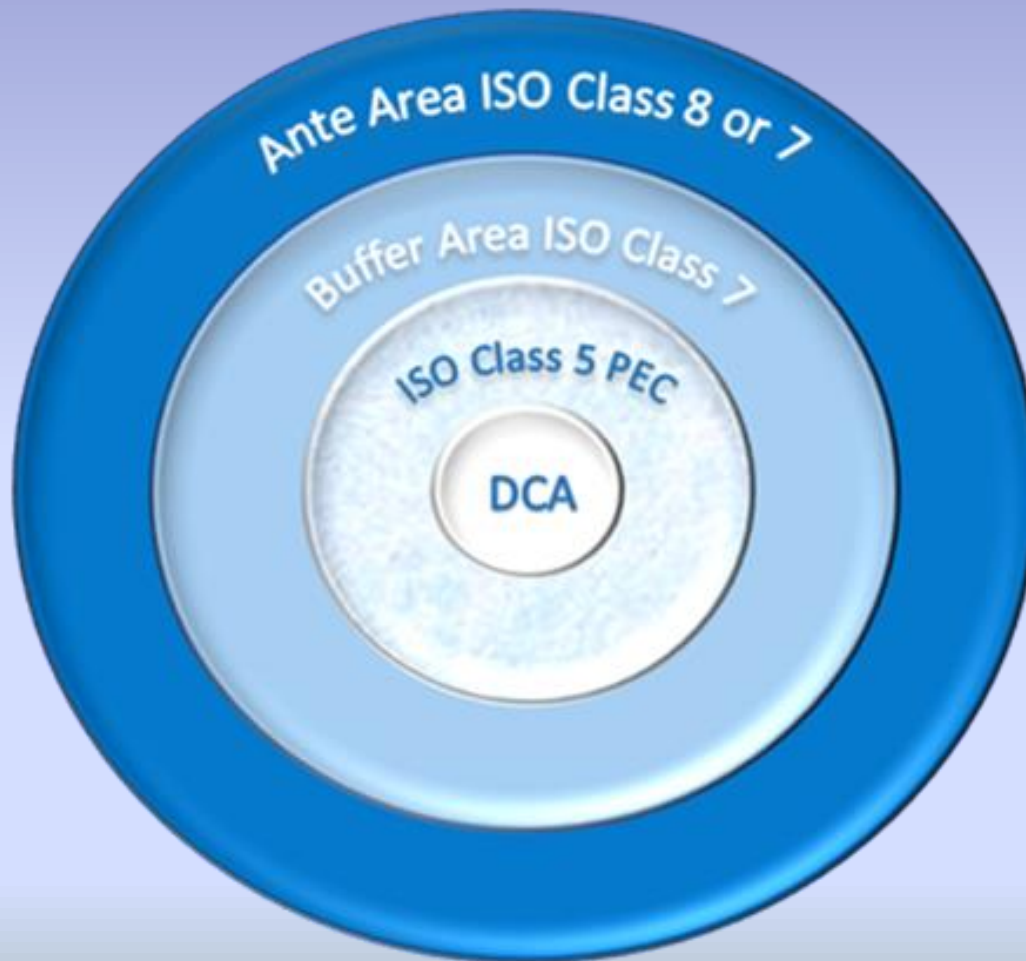
# CONTAINMENT SPACE

*Required for all Sterile Compounding:*

## Secondary Engineering Control (SEC)

- Room containing PEC
- Buffer Room & Ante-room
- Cleanroom Suite
- ISO Class 7 & 8

# HIGH RISK CONTAINMENT



# CONTAINMENT SPACE

## Segregated Compounding Area (SCA)

- *CSP-1 compounding only!!!!!!!!!!!!*
- Space, area, or room contains PEC
- Defined, visible perimeter to establish the boundaries
- Provides “Unclassified” air quality
- Without an ante-room or buffer room

# LOW RISK CONTAINMENT



# ISO CLASSIFIED AREAS

- PEC = ISO Class 5
- Buffer Room = ISO Class 7
- Ante-room:
  - Non-hazardous drugs = ISO Class 8
  - Hazardous Drugs = ISO Class 7

# CONTAINMENT EQUIPMENT

## Laminar Airflow Work Bench

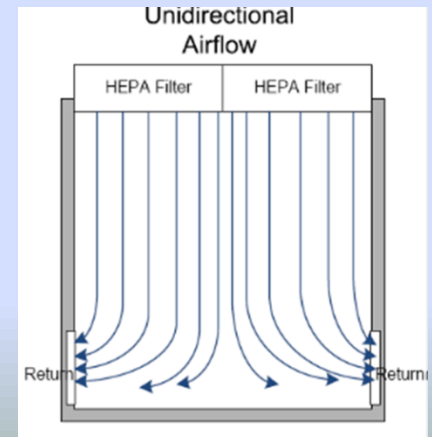
- (LAFW)

## Biological Safety Cabinet

- (BSC)

## Restricted-access Barrier System

- (RABS)





# LAMINAR AIR FLOW WORKBENCH (LAFW)

- ISO Class 5 or better for sterile compounding
- Horizontal or vertical  
“unidirectional” HEPA-filtered airflow
- Not for anti-neoplastic or active pharmaceutical ingredient



# BIOLOGICAL SAFETY CABINET (BSC)

- Open front with inward & downward, “unidirectional” airflow
- HEPA-filtered airflow & exhaust
- Personnel protection from airborne drugs
- ISO Class 5 for CSP-2
- Air exhausted externally for anti-neoplastic drugs



# RESTRICTED-ACCESS BARRIER SYSTEM (RABS)

- HEPA-filtered, “unidirectional” airflow, ISO Class 5
- Ingress &/or egress through defined openings
- Prevents transfer of contamination
- Buffer Room may not be needed



# COMPOUNDING ASEPTIC CONTAINMENT ISOLATOR (CACI)

- RABS “style” Containment Equipment
- Glove Box design
- Compounding **sterile HDs**
- External exhaust
- *First air exchange must first pass through HEPA filter*



# WORK SPACE

- Buffer Room
- Ante-room
- Cleanroom Suite



# BUFFER ROOM

- Contains PEC
- ISO Class 7 or cleaner
- Fixed walls & doors
- Accessed through the Ante-room



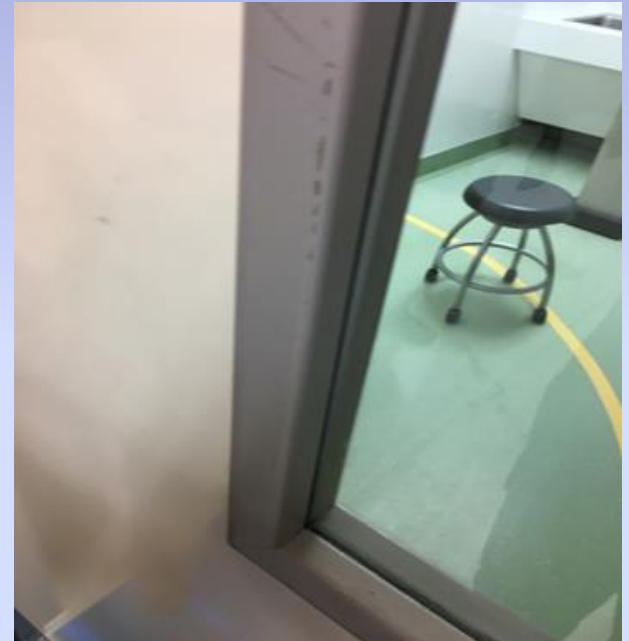
# ANTE-ROOM

- ISO Class 8 or cleaner
- Transition between the “unclassified” area & Buffer Room
- Personnel hand hygiene, garbing, etc., procedures



# ANTE-ROOM

- High particulate level activities
- Demarcation Line clean/dirty side
- Entered through the dirty side
- Clean side closest to the Buffer Room



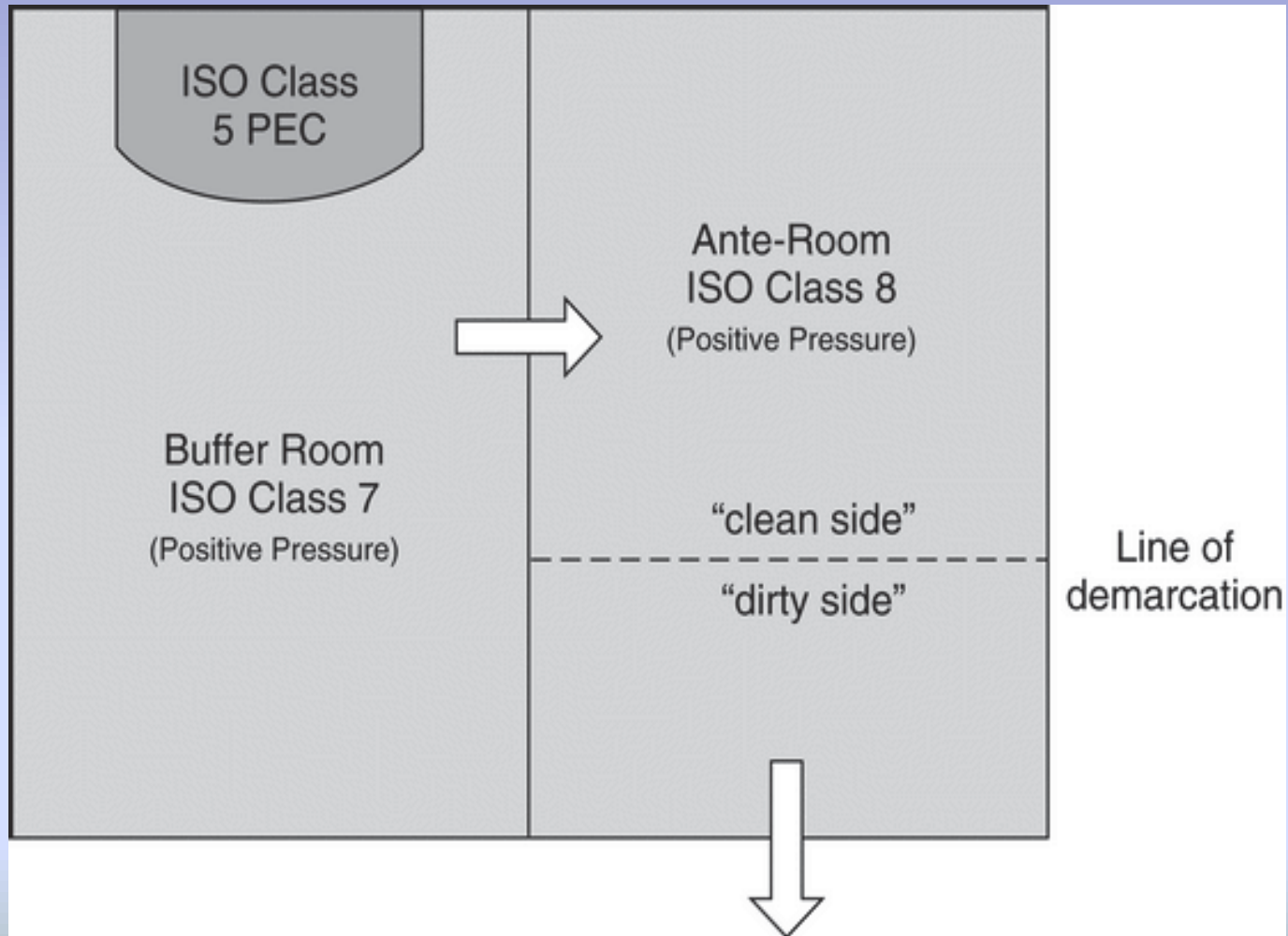


# CLEANROOM SUITE

- Ante-room & Buffer Room
- Classified Area
- Contains PEC
- Ceiling supplied, HEPA air
- Returns low on the wall
- Pressure-differential monitoring systems



# CLEANROOM SUITE



# CLEANROOM SUITE

- Well-lighted & comfortable working environment
- Surfaces:
  - smooth & impervious
  - free from cracks & crevices
  - easily cleaned & disinfected
- Eliminate dirt or accumulation in cracks and crevices

# CEILINGS

- Caulked, inlaid ceilings panels
- **Or** sealed & secured around support frame
- Washable, scrubbable, & soil resistant
- Designed for use in a Cleanroom environment (IFU Sheet)
- Ceiling light fixtures, smooth, flush & sealed

# WALLS & FLOORS

- Walls-epoxy painted or heavy-gauge polymer
- Panels joined together & sealed
- Floors smooth, **sealed**, welded seams
- Impervious with coving to the sidewall
- Sealed penetrations in surfaces



# OVERHANGS & LEDGES

- Dust-collecting overhangs minimized, such as utility pipes, ledges & windowsills
- Overhangs or **ledges** easily cleanable
- Sprinkler systems recessed & covered, easily cleanable



# AIR EXCHANGE RATES

If the PEC ventilation is used to meet the minimum total ACPH requirements:

- PEC must **not** be turned off except for maintenance
- ACPH from HVAC must be **documented** on certification report
- Emergency power supply is supplied

***Note: ACPH assists ISO Classification, not differential pressure***

# AIR CHANGES RATES

Compounding Area*	ACPH
Unclassified SCA	No requirement
ISO Class 7 space	$\geq 30$
ISO Class 8 space	$\geq 20$

***\*HEPA-filtered air for ISO Classification***



# DIFFERENTIAL AIR PRESSURE

- Continuously monitoring:
  - Ante-room to Buffer Room
  - Ante-room to general environment outside the “Classified Area”
- Documented at least daily when compounding – logs!!!
- Results reviewed – periodically!!



# DIFFERENTIAL AIR PRESSURE

## Non-Hazardous Drug Compounding

- Positive pressure  $\geq 0.02$ " wc
- Between the Buffer Room & Ante-room
- Between Ante-room & “unclassified” area
- Pressure monitor must be tested for accuracy & performance **every 6 months – document!!!**

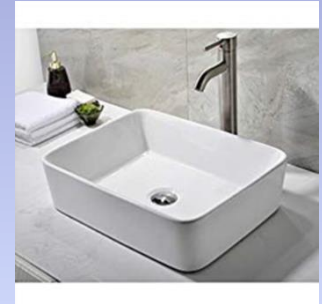


# VENTILATION VERIFICATION

CSP Category	Category CSP-1	Category CSP-2
<b>Placement of the PEC</b>	<b>Not</b> required to be placed in a ISO Classified area ( <b>SCA</b> )	<b>Required</b> to be placed in a ISO classified area; <b>SEC</b>
<b>Recertification of Ventilation</b>	Every 6 months for the <b>PEC</b>	Every 6 months for the <b>PEC</b> and <b>SEC</b>
<b>Nonviable airborne monitoring: ISO Levels</b>	Every 6 months in Classified area	Every 6 months in Classified area

# WATER SOURCES

- Hand hygiene sink inside or outside Ante-room
- Hand hygiene sink on dirty side in Ante-room
- Ante-room must not contain floor drain
- Buffer Room must **not** contain sink, eyewash, shower or floor drain!

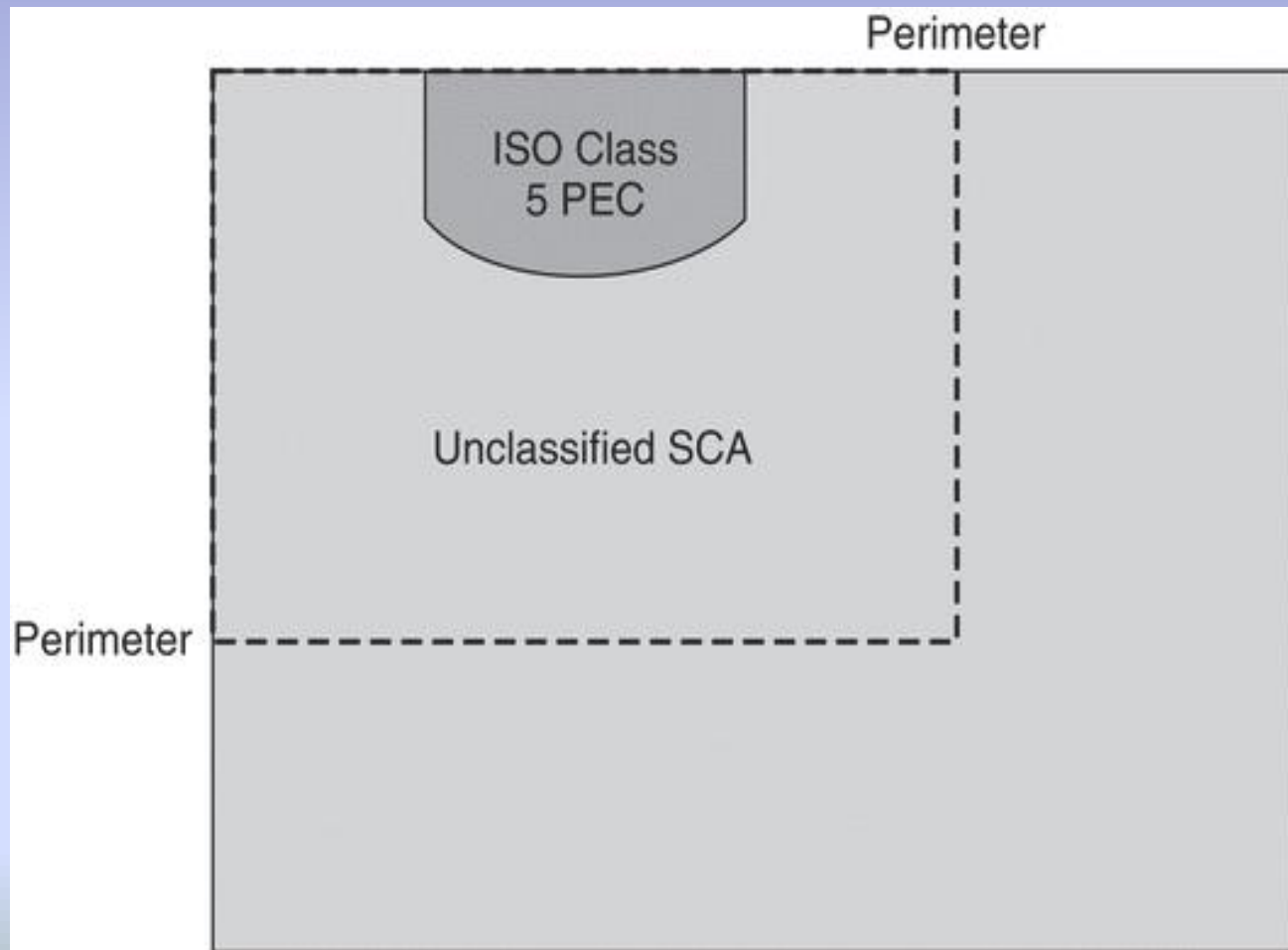


# SEGREGATED COMPOUNDING AREA (SCA)



- Not located adjacent to environmental control challenges (e.g., *food preparation areas*, restrooms, warehouses)
- Located away from unsealed windows, doors to the outdoors, traffic flow
- Surrounding activities should not impact compounding activities

# SEGREGATED COMPOUNDING AREA (SCA)



# WATER SOURCES (SCA)

- Sink must be accessible
- Located at least 1 meter away from the PEC
- Not be located inside the perimeter of the SCA



# COMPOUNDED PHARMACEUTICALS

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## USP <800> Hazardous Drugs Compounding



# USP <800> FOCUS

- Personnel responsibilities for handling hazardous drugs
- Facilities & engineering controls
- Environmental quality & control
- Personal protective equipment
- Hazard communication program
- Personnel training

# USP <800> REQUIREMENTS

- Containment Designation
- Major Activities
- Environmental Controls



# CONTAINMENT DESIGNATION

- Containment Primary Engineering Control (C-PEC)
- Containment Secondary Engineering Control (C-SEC)
- Containment Segregated Compounding Area (C-SCA)

# CONTAINMENT PRIMARY ENGINEERING CONTROL (C-PEC)

- Ventilated device – minimizes exposure when directly handling HDs
- Operates continuously if supplies C-SEC space negative pressure or sterile area for compounding
- Activities suspended if electrical power is lost



# CONTAINMENT PRIMARY ENGINEERING CONTROL (C-PEC)

- Externally vented if used for sterile HDs
- LAFW must not be used HDs
- ISO Class 5 or better air quality
- Class II BSC or CACI
- Cleanroom Suite = ISO Class 7
- C-SCA only if CSP-1

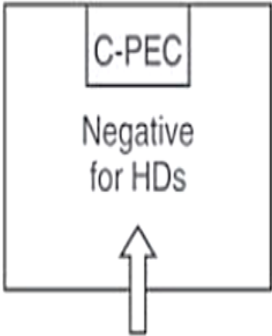


# SECONDARY ENGINEERING CONTROL (C-SEC)

- Room contains the C-PEC
- Sterile & non-sterile compounding is externally vented
- Physically separated, different room, other preparation areas
- **Negative** pressure to all adjacent areas is between 0.01 - 0.03 “ wc



# NON-STERILE HD COMPOUNDING

Use	Optimal Primary and Secondary Control	Minimum ACPH	Limitations Primary and Secondary Control	Minimum ACPH	Notes for limitations
Nonsterile HD compounding		12			

\*Arrow indicates direction of airflow

# STERILE HD COMPOUNDING

Use	Optimal Primary and Secondary Control	Minimum ACPH	Limitations Primary and Secondary Control	Minimum ACPH	Notes for limitations
Sterile HD compounding	<p>OR</p>	30	<p>OR</p> <p><b>This design is not recommended</b></p> <p>OR</p> <p>Typically used in oncology clinic settings.</p>	12	Maximum BUD as described in <797> for segregated compounding area.
				30	If this design is in place, measures must be taken to avoid contamination of the positive-pressure buffer room.
				30	Maximum BUD as described in <797>.

\*Arrows indicate direction of airflow



# MAJOR ACTIVITIES

- Receipt
- Storage
- Compounding



# RECEIPT

- Unpack HDs in an area:
  - pressure = neutral/normal or negative
  - relative to the surrounding areas
- Unpack HDs from external shipping containers:
  - not in sterile compounding areas
  - not in positive pressure areas

# STORAGE

- Externally ventilated
- Negative-pressure room
  - HD storage room
  - HD Buffer Room
  - Containment Segregated Compounding Area (C-SCA)
- At least 12 ACPH



# STORAGE

- Dedicated refrigerator
- Located in negative pressure Buffer Room
- Exhaust behind refrigerator adjacent to compressor
- Sterile & non-sterile products may be stored together
- Non-sterile products **not** stored in sterile compounding areas



# ENVIRONMENTAL CONTROLS

Designated areas must have capacity for:

- Receipt & unpacking
- Storage
- Compounding Sterile & Non-sterile HD
- Emergency power source to maintain negative pressure for power loss



# ENVIRONMENTAL CONTROLS

- Hazard signs prominently displayed
- Sign at entrance to the HD handling areas
- Restricted access –  
authorized personnel only  
involved in handling HD
- Areas remote to breakrooms  
& refreshment areas



# UTILITY SYSTEMS

## Capacity:

- Ventilation
- Electricity

## Capabilities:

- Provide directional air flow
- Maintain differential pressure
- Supply quality air
- Insure emergency power supply



*Who monitors performance???*

# SUMMARY



- Conduct Risk Assessments
- Provide “Quality” Air
- Maintain Differential Pressure & Direction Airflow
- Perform Equipment Maintenance
- Document Ventilation Verification
- Review *Life Safety* Requirements



# THANK YOU!

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# QUESTIONS

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