Breast Milk Bar Coding for Enhanceed Patienty Safety

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Problem Statement: Hospitals are required to implement Bar coding of Medication Administration (BCMA) to reduce errors and improve patient safety. Johns Hopkins Medicine (JHM) proactively implemented Breast Milk Barcoding to reduce breast milk administration errors and improve safety. Administering wrong breast milk can expose the baby to health risks and can result in loss of trust from patients and their families and additional tests. **Methods:** The JHM Bar coded Breast Milk Administration Workflow includes: 1. Mother decides baby will be fed pumped and stored breast milk; 2. Upon admission provider places the order for Breast Milk label with PRN frequency; 3. Nurse prints breast milk labels and affixes them to breast milk bottles; 4. If multiple babies receiving milk from same mother, nurse labels all bottles with labels from all babies' order; 5. Nurse identifies due time for feeding from worklist then clicks the link for flowsheet; 6. Scans the babies wristband and receive confirmation of a correct patient; 7. Scans the breast milk label which causes administration window to open; 8. Administers breast milk and documents total volume. **Results:** Breast Milk Bar coding was implemented along with our new EMR (Epic) implementation process in Johns Hopkins Bayview Medical Center. This included: 1. Workflow validation with NICU workgroup; 2. Configuring order for Breast Milk Label; 3. Configuring flowsheet and worklist; 4. Configuring Breast Milk Label; 5. Identifying the workstations and printers for Breast Milk Label Printing; 6. Mapping the workstations to correct printers; 7. Technical Dress Rehearsal; 8. Training and Tip Sheet; 9. Go-Live and Post Live Support. **Significance:** Next Steps were identified as the need to: 1. Monitor the Breast Milk Scanning Compliance through reports; 2. Implement the same process in other John Hopkins Medicine Facilities; and 3. Study the effectiveness of Breast Milk Bar coding.