

# MILT 3.0 by Medi-Dose, Inc.

**L**ocated in southeastern Virginia, Sentara Healthcare is an integrated health care system operating more than 87 care sites, including seven acute care hospitals with a total of 1,729 beds, three outpatient care campuses, seven nursing centers, three assisted living centers, and about 360 primary care and multi-specialty physicians offices. All seven of our hospitals are currently using Medi-Dose's MILT 3.0 software to meet their ancillary bar code unit dose packaging needs.



In addition to half tablets and small oral solid packaging runs, Sentara Healthcare uses MILT 3.0 to bar code items, such as nebulizers, that are not bar coded by the manufacturer at the unit of use.



MILT 3.0 contains a database of NDC numbers and allows Sentara Healthcare to include all of the label information required by regulations.

Our health system has a goal of putting a machine-readable bar code on every product that leaves the pharmacy for our patient care areas. Although 60 to 70% of our line items are available from the manufacturer in bar coded unit dose, we still need to bar code 30 to 40% of our inventory. Sentara's centralized packaging center, located in our largest hospital, handles the bulk of our hospitals' unit dose packaging needs, and we have found that MILT 3.0 allows our individual pharmacies to efficiently complete their hospitals' small packaging runs.

## Software Selection

When Sentara began our system-wide discussion about implementing bar coded medication administration (BCMA), we learned that Sentara Obici – a hospital new to our system – had been successfully using MILT 2.0 to bar code unit dose pharmaceuticals. After evaluating other vendors' bar coding software, we found that MILT 3.0 was our best option for several reasons. First, it is available for purchase independent of proprietary repackaging hardware. Secondly, the software is specialized for pharmacy; it contains a database of NDC numbers and allows us to include all of the label information required from a regulatory standpoint. Furthermore, it is well suited to the smaller packaging runs for which we primarily use it.

## The System in Use

When inventory is received in the pharmacy, a technician scans the manufacturer's unit of use bar code to ensure that it can be successfully scanned on the nursing unit and that it is compatible with our BCMA application. Those that do not pass the validation process are re-labeled using MILT 3.0, and for future orders, we may decide to purchase the product in question from an alternate vendor.

We also commonly use MILT to package oral half tablets, which are assigned Sentara-specific identifier codes in our clinical information system. MILT generates a bar code for each of our identifier codes and prints a label for the dose, and we package it in a Medi-Dose blister. We also use MILT to generate labels for items, such as nebulizers, that are not bar coded by the manufacturer at the unit of use. One of MILT's biggest advantages is the flexibility it offers; using the software's label design capabilities, we are able to format labels to meet our specifications and print both linear and two-dimensional bar codes in a variety of sizes.

## Patient Safety Benefits

Patient safety is our goal. MILT 3.0 has effectively supported our BCMA initiative and our goal to bar code 100% of the products that leave the pharmacy. It does not take long for a caregiver to realize the patient safety benefits of BCMA; once they receive their first "wrong drug" or "wrong patient" warning from the system, they stop being doubters and become apostles for the safety inherent in MILT's bar coded packages and in BCMA overall. ■

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## WHERE TO FIND IT:

Medi-Dose, Inc. .... Circle reader service number 30  
or visit [www.medidose.com](http://www.medidose.com)