

MEDICATION SAFETY ALERT

STANDARDISING TERMINOLOGY TO REDUCE CONFUSION BETWEEN IMMEDIATE AND CONTROLLED RELEASE PREPARATIONS OXYCODONE AND MORPHINE

KEY POINTS

- Use of the wrong opiate or wrong formulation of an opiate can lead to serious adverse drug effects. These errors often result from confusion between products.
- Inappropriate terminology when prescribing, dispensing and administering these drugs increases the risk of confusion. This issue has been addressed in a recent operational directive ([OD 0184/09](#)).
- Based on this directive, the generic and trade name should both be specified for oxycodone and morphine, or the release formulation should be written out in full eg controlled release. Use of abbreviations like MR, SR, CR and IR for oxycodone and morphine is not acceptable.
- Prescriptions for controlled release oxycodone and morphine products should include a tick in the “slow release box” on the medication chart. This is a reminder that the tablet must be swallowed whole.

RECOMMENDED ACTION BY HEALTH SERVICES

Health Services should ensure that

- Healthcare professionals involved in the medication management cycle have a clear understanding of the issues. WAMSG has prepared an education resource that is available to individual sites. It is recommended that the module be incorporated into staff orientation/development.
- Local policies for terminology, abbreviations and symbols in the prescribing and administration of medicines comply with the principles and standards outlined in the Operational Directive OD 0184/09.
- Local policies include the provision for prescribers to be contacted for clarification of any ambiguity created by non-compliance with the terminology standards.

BACKGROUND

This alert is in response to an analysis of clinical incident data (AIMS) which highlights the following issues that have health system wide implications:

- confusion between oxycodone products
- confusion between controlled (continuous) release oxycodone and morphine
- confusion between other morphine and oxycodone preparations

These preparations are used in different circumstances and confusion between these products results in under or over treatment and can lead to serious adverse effects.

Strategies adopted to reduce these errors include use of generic names with abbreviations (SR, CR and MR for controlled release and IR for immediate release) and use of trade names rather than generic names. Neither solution is ideal.

An operational directive was released in April 2009 with the aim of promoting patient safety through clear and unambiguous prescribing of medicines ([OD 0184/09](#)). The Directive establishes the principles for consistent prescribing terminology and provides a set of recommended terms and acceptable abbreviations. The abbreviations SR, CR, MR and IR may be confusing, and thus should only be used when they are part of a trade name. A controlled release preparation is also indicated by ticking the “Slow release” box on the NIMC.

Use of trade name alone leads to confusion between the controlled (continuous) release oxycodone (OxyContin) and morphine (MS CONTIN) where both trade names include the suffix CONTIN. When referring to oxycodone or morphine, trade names should never be used without the generic name.

A previous Medication Safety Alert released by WAMSG (Confusion between non-lipid and lipid formulations of injectable amphotericin, December 2007), established the precedent of including the trade name with the generic name to differentiate between different formulations of the same drug.

Nursing policy states that charted medications should not be administered where the prescription is ambiguous or illegible. In terms of prescribing oxycodone or morphine this means that the generic drug name is clear and that the trade name is included or the release formulation is written out in full ie controlled release or immediate release. Where any ambiguity exists the prescriber must be contacted for clarification.

Other multiple formulation analgesics

Tramadol trade names include the abbreviations SR (Slow release requiring twice daily dosing) and XR (extended release requiring once daily dosing). In this case it is sufficient for the SR or XR to be included with the generic name, however it is preferable that the complete trade name be included eg Tramadol SR (Tramal SR) OR the exact preparation specified eg Tramadol SR 12-hour controlled release.

Hydromorphone is another example of an opiate with a controlled and immediate release formulation. Hydromorphone preparations should always be referred by both the generic and trade name hydromorphone (Dilaudid) and hydromorphone (Jurnista).

FURTHER READING

OD 0184/09 Standardisation of terminology, abbreviations and symbols in the prescribing and administration of medicines http://www.health.wa.gov.au/circularsnew/circular.cfm?Circ_ID=12476

NSW Health Safety Notice 004/08 : Oxycodone
http://www.health.nsw.gov.au/resources/quality/sabs/oxycodone_revised_07_05_08_pdf.asp

WAMSG Medication Safety Alert - Confusion between non-lipid and lipid formulations of injectable amphotericin, December 2007 http://www.watag.org.au/wamsg/docs/WAMSG_Alert_Amphoterecin.pdf

FURTHER INFORMATION AND eLEARNING

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Table 1: Oral Morphine and Oxycodone Preparations

Generic name	Release form	Presentation	Trade name	Prescription *
morphine	controlled	capsules	Kapanol	morphine (KAPANOL) 10, 20, 50 and 100 mg
			MS Mono	morphine (MS MONO) 30, 60, 90 and 120 mg
		tablets	MS Contin	morphine (MS CONTIN) 5, 10, 15, 30, 60, 100 and 200 mg
		granules	MS Contin	morphine (MS CONTIN) 20, 30, 60, 100 and 200 mg
	immediate	tablets	Sevredol	morphine (SEVREDOL) 10 and 20 mg
			Anamorph	morphine (ANAMORPH) 30 mg
		syrup/elixir	Ordine	morphine (ORDINE) 1 mg/mL, 2 mg/mL, 5 mg/mL, 10 mg/mL
oxycodone	controlled	tablets	OxyContin	oxycodone (OXYCONTIN) 5, 10, 20, 40 and 80 mg
	immediate	tablets	Endone	oxycodone (ENDONE) 5 mg
		capsules	OxyNorm	oxycodone (OXYNORM) 5, 10 and 20 mg
		syrup/elixir	OxyNorm	oxycodone (OXYNORM) 5 mg/5mL

* It is recommended that block letters be used for hand written prescriptions.