

Article

Inarguable Math: 3 Financial Benefits of IV Compounding Robots

According to HHS, 89% of U.S. hospitals obtain compounded drugs exclusively from registered 503B outsourcing facilities. As experienced during the height of the COVID-19 pandemic, overreliance on these facilities can exacerbate supply chain issues during drug shortages. Safety concerns also surround 503B outsourcers, with several facilities being linked to outbreaks of infections such as meningitis and endophthalmitis because of contaminated compounded sterile preparations (CSPs). In fact, data from PharmSource, shows that 15% of all FDA-registered compounding facilities in the U.S. have violated FDA regulations.

Despite these risks, fewer than 8% of health system pharmacies have implemented IV compounding robotics – a technology that enhances supply chain control by bringing sterile compounding in-house and improves sterility and accuracy by eliminating manual steps from the compounding process. A primary reason for the lack of adoption is a perception that the technology is cost prohibitive. However, when you do the math, IV robotics can help health systems significantly reduce IV costs – lowering expenses by as much as 66% compared to outsourcing.

These savings are primarily generated in the following three ways:

In-house compounding using IV robotics can lower expenses by as much as 66 percent compared to outsourcing.

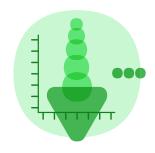
 Based on internal analysis of Omnicell customer data



Reduced Waste

By improving supply chain control and inventory visibility, IV compounding robots help significantly reduce the drug waste that is often inherent in manually prepared or outsourced CSPs from 503B facilities.

- Due to increased sterility assurance, CSPs produced by an IV robot can be stored up to 30 days whereas those prepared by humans must be discarded after 4 days (CRT).
- Prior to insourcing IV production, Allegheny General Hospital (AGH) spent \$2.6 million annually on outsourced IV compounds. After implementing an IV robotics program, AGH is experiencing an annual net savings of \$1.6 million through reduced OR drug waste and extended beyond-use dates (BUDs).





Repackaging to RTA

By enabling the production ready-to-administer (RTA) products where FDA premixes don't exist, health systems can ensure more efficient dosing to further reduce waste.

- Cone Health was outsourcing 100 mg/10 ml syringes of rocuronium. Upon analysis, they discovered that 50 mg or less was administered in most cases and less than 4% of cases required 100 mg of the medication. By insourcing preparation of 50 mg/5 ml RTA syringes, they reduced waste by 44%.
- Cone Health was able to save an additional \$100,000 annually by repackaging sugammadex 500 mg/ml vials into 200 mg RTA syringes.



3

Increased Productivity

Next-generation robotics technology and parallel processing combined with expert service delivers higher throughput.

 A comprehensive in-house IV compounding robotics service solution provides 70% higher average monthly CSP production¹ compared to a traditional capital purchase of robotic technology.



Visit Omnicell.com/IV-Compounding-Service to learn more today.

1. Omnicell customer data on file

