


Appendix C

Institute for Safe Medication Practices

Small Volume Injection Medication Label Format

Pharmacy generated label for dispensing to inpatient clinical units

Minimum content

Mary Jones	Room 3727
MR# 2345678	
ondansetron (ZOFRAN) 4 mg	IV Push
Dose = 4 mg = 2 mL (2 mg per mL)	
	
Exp: 12-31-2006	RPh: _____

1. **Patient name 48 character field – bolded 12 point font**
2. Location 12 character field – 12 point font
3. Second identifier 10 character field (Date of birth, financial #, Encounter #, Medical Record #) – 10 font
4. **Generic name – 40 character field – bolded 12 point font**
5. BRAND name – 18 character field – 12 point font
6. **Patient dose – 20 character field – bolded 12 point font**
7. Route – 12 character field – 12 point font (this may wrap to the next line as needed)
8. Patient specific dose with the corresponding number of mL – 30 characters – 10 point font.
9. Concentration of the solution per mL – 30 characters – 10 point font
10. Bar code – placed vertically or horizontally to allow for the best readability on a flat surface
11. Pharmacist initials (handwritten), if needed/desired, indicating that the product has been checked
12. Expiration Date as needed in a MM/DD/YYYY format – 10 point font
13. Other information as required by State or Federal Law
14. Pharmacy information if required should be at the bottom of the label
15. Comments – 10 point font