2D Barcode History and Progress

Elizabeth Sobczyk, MPH, MSW
Manager, Immunization Initiatives
Division of Pediatric Practice
American Academy of Pediatrics

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Outline

• AAP vision
• History of barcoding at AAP
• Guidance issued
• Next steps for AAP
• Q&A
AAP Vision: Immunizations

- Pediatricians provide a majority of immunizations in the US
- The AAP formed a Task Force on Immunizations in 2005, making immunization delivery a priority for the Academy. Both vaccine safety and financing issues have been a focus.
- The work of the Task Force continues today through the Committee on Practice and Ambulatory Medicine, which deals with practice implementation issues including those related to immunizations.
- The AAP would like every child to be safely and effectively immunized, while providing pediatricians the resources needed to do so.
History of Barcoding at the AAP

- Several pediatricians in practice and AAP leadership were interested in the idea.
- Primary drivers:
  - Rapid uptake of technology
  - Vaccine safety and reporting of adverse events
  - Increased need for office efficiency
- AAP started to investigate feasibility
History of Barcoding at the AAP

• Discuss history with CDC and manufacturers
  • Gather previous process successes
  • Identify why desired outcome was not achieved
  • Learn from past leaders, create contacts with key movers and shakers
• Identify partners
History of Barcoding at the AAP

Pulled together stakeholders to discuss feasibility and barriers (January 2009)

- Info needed: manufacturer information, lot number, expiration date on barcode
- 2D barcodes were identified as a solution
- Focus was on the primary unit of use (vial, syringe), not packaging (secondary) level because of concurrent serialization efforts
History of Barcoding at the AAP

- Needed permission from FDA - guidance dictated the use of linear barcodes
- AAP, manufacturers, and GS1 met with FDA in February 2010 to discuss allowing 2D codes on the unit dose of vaccines
- With no major objections, FDA issued updated guidance in September 2010
- Guidance was finalized 11 months later and new stakeholders were identified
Guidance Issued

• Guidance for clinicians and manufacturers was created

• Clinician Guidance: Includes information on getting your office ready and choosing a scanner

• Manufacturer Guidance: This guideline provides sufficient information and technical detail to implement GS1 DataMatrix technology

• AAP Immunization page with these resources: http://www2.aap.org/immunization/pediatricians/barcoding.html

• Sanofi Pasteur was the first to begin rolling out product with six 2D barcoded products currently in distribution; GSK has rolled out one and committed to changing all of their product lines; we expect others to follow

• The AAP has stayed in contact with CDC and the pilot team throughout the process
Opportunities and Benefits

**Patient Safety**
- Accurate information is in the record in case of recall or adverse event reporting
- Decision support can identify wrong doses before they are given
- Reduces rate of vaccine duplication

**Office Efficiency**
- Saves time spent hand writing records
- Not insignificant when considering how many vaccines are delivered every day in a practice
Next Steps

• Workflow scan vaccines after or prior to administration?
• Refine guidance with lessons learned
• Request removal of linear barcodes when 2D codes are present
• Complete integration with registries
• Full roll out
Conclusion

Emily - 1 year old, Jack - 3 years old
Contact Information

Elizabeth Sobczyk
Manager, Immunization Initiatives
American Academy of Pediatrics
esobczyk@aap.org

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Questions?