

# 2D Barcode History and Progress

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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)

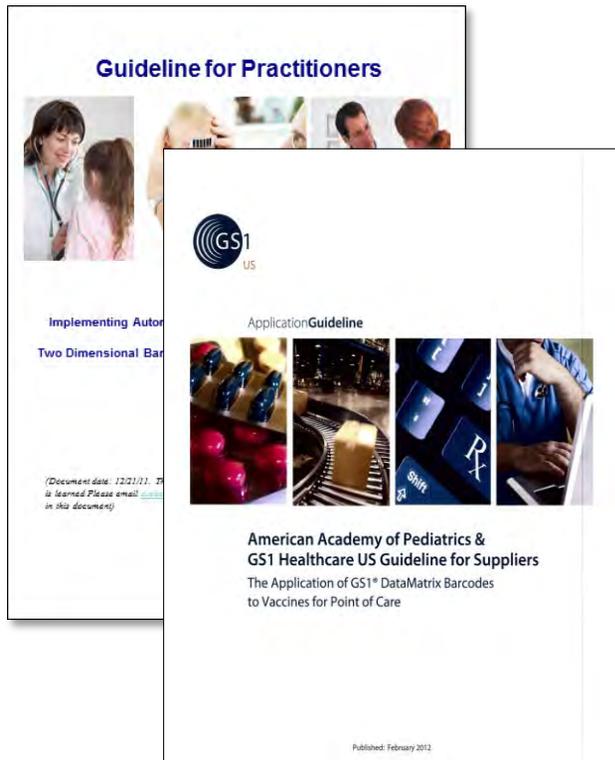
- Info needed: manufacturer information, lot number, expiration date on barcode
- 2D barcodes were identified as a solution
- Focus was on the primary unit of use (vial, syringe), not packaging (secondary) level because of concurrent serialization efforts

# 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

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**Questions?**