Labeling Drug Ampules

To the Editor:—Unsatisfactory labeling of drug ampules contributes an unnecessary hazard to patient care. Present labeling practice makes serious errors not only possible, but likely, especially in situations requiring haste. Poor labeling adds to the burden imposed by the deterioration of eyesight with age. The problem is widespread, involving most drug ampules and single-dose disposable syringes. It can be solved by general use of the labeling method illustrated in figure 4.

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![Image of five ampules with labels]

Fig. 1. Propranolol ampules are difficult to read. Labels are affected by solvents (left).

Fig. 2. Ephedrine and epinephrine, from competing disposable spinal sets, are easily confused.

Fig. 3. Paper labels may come unglued.

Fig. 4. Excellent label; ceramic background with superimposed letters has been scrubbed with solvent and scraped with a knife, but remains clear.

Fig. 5. A disposable syringe should have a contrasting background. Letters on the far side obscure the volume scale.

Methohexital Precipitation

To the Editor:—We have been in the practice of using a 1 per cent sodium methohexital solution for induction of anesthesia. This has been prepared by adding bacteriostatic water for injection, U.S.P., to ampules of methohexital sodium (Brevital, Lilly). We recently noticed that a precipitate formed when we were using a new brand of bacteriostatic water. The former brand had a pH of 6.05 and contained as preservatives methylparaben, 0.05 per cent, and propylparaben, 0.005 per cent. The pH of the new supply was 5.5, and it contained methylparaben, 0.18 per cent, and propylparaben, 0.02 per cent, as preservatives. The manufacturer cautions that the preservatives are incompatible with atropine, sodium thiopental, sodium phenobarbital, sodium sulfadiazine, and sodium sulfathiazole, but fails to mention sodium methohexital. Although the methohexital label cautions against the use of diluents containing bacteriostats, we have found no precipitation with solutions contain-