

Implementing Tracelink into a Rural Hospital Pharmacy

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Word Count: 177 (Abstract), 2,006 (Article)

Abstract

Introduction

The Drug Supply Chain Security Act (DSCSA), enacted in 2013, requires end-to-end tracking of prescription medications to improve supply chain safety and prevent counterfeit drug distribution. Compliance deadlines were extended due to the COVID-19 pandemic. Tracelink is a third-party platform designed to facilitate DSCSA compliance through secure data exchange between trading partners.

Objective

To identify barriers to implementation and train Pinckneyville Community Hospital pharmacy staff to use Tracelink's track-and-trace technology.

Methods

A student pharmacist led implementation by reviewing DSCSA requirements, completing Tracelink training, and assessing staff familiarity. Individualized training sessions were conducted on medication receiving, barcode scanning, and error resolution. Required infrastructure was verified prior to integration into workflow. Barriers were identified throughout implementation.

Anticipated Outcomes

Implementation is expected to improve DSCSA compliance, enhance medication traceability, and strengthen interoperability with trading partners. Staff training is anticipated to improve confidence and reduce receiving and reconciliation errors.

Conclusion

Tracelink implementation in a rural critical access hospital is feasible and supports regulatory compliance. Workflow constraints and limited staffing present challenges, but targeted training and structured integration strategies can mitigate these barriers and support long-term sustainability.