

TITLE : MEDICATION ERRORS: SENSITIZATION OF HEALTH CARE PROFESSIONALS AND IMPACT OF CLINICAL PHARMACISTS

FULL NAME(S) AUTHOR(S) :

Dr. Beegum Sheena, Dr. Rachana Shetty, Dr. AnamSohail, Dr. Amitha P Marla

THEME : Medication safety

INTRODUCTION (80 words maximum):

Medication errors (ME) cause at least one death every day and injure 1.3 million people annually in US. In India such a data is lacking. Aim of this study was to identify, classify, reduce the medication error and improve the medication safety. A cross sectional observational study was conducted for a period of 14 months for the In-patients of a tertiary care hospital. Study was categorized into 3 phases: Pre-implementation (three months), Implementation (four months) and Post-implementation phase (eight months).

OUTCOMES OF PROJECT (100 words maximum):

Out of 7119 files audited, 703 ME (prevalence 10%) were identified of which 62% were observed in males and 38% in females, majority(58%) belonged to age group 18–60 years. Most common error type was Transcription (25%) and antimicrobial agents (26%) accounted for maximum errors. 70% of errors were by nurses followed by physicians then pharmacists. Majority of the interventions provided were on documentation & dose related problems. CNE on ME was conducted showed significant awareness ($p < 0.001$) post training. Circulars dispatched on doctor related errors with the preventive actions and all errors were discussed in the departmental meetings.

RESULTS AND CONCLUSION (80 words maximum):

On applying chi-square test, significant increase in errors were observed during PHASE II ($X^2=135.69$) suggesting improved tracking and reporting whereas a reduction was observed in PHASE III ($X^2=44.16$) reflecting effectiveness of preventive actions taken. As per NCCMERP index, NO ERROR has increased by 22%, ERROR NO HARM, ERROR HARM has reduced by 9.5%, 12% respectively indicating a shift to better patient safety. Since majority of errors were related to Antimicrobial agents, the study endorses strict adherence to antibiotic policy.

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