Drug and patient safety health essay

Health & Medicine

Tiffany DavisDrug and Patient safety are ongoing issue in any healthcare facility. This paper discusses these issues as well as the financial impact associated with error in these problems, as well as the cost to change how drug procedures are carried out. 1. 5 million People are harmed every year from medication errors. One issue that healthcare facilities deal with is drug and patient safety. When you think of safety you typically think of the basics of washing your hands, keeping trash and trip hazards up out of the way from where people walk. There is also a lot of thought, time and particular procedures that are put into needle safety to ensure employees aren't stuck on accident by a needle and sanitary procedure are used to sterilize any equipment that is to be used my multiple patients over any period of time. Now the question comes of how does drug safety relate to patient safety? There are multiple ways. First off is the issue of inpatient medication. The precautions for this are watching and documenting any patient medication allergies, ensuring they are on the correct medicine for their aliment, and ensuring none of their medications will incorrectly interact with each other, you must be willing to change medication at any time if they are not taking care of the issue the patient has at the time. In pharmacy there are extra precautions taken to label medicine that may look alike and sound alike other drugs, to ensure they are double checked for accuracy. The medication that are controlled substances go through special procedures to ensure they are stored properly and treated with extra care to make sure they aren't given to the wrong person or that an excessive amount of medication hasn't and won't be given to any patient.

Types of medication errors

Medical misadventure is an adverse reaction or injury resulting from any medical treatment. These include such things as medication errors surgical mistakes, IV infections, also postoperative septicemia. Latrogenic conditions- Conditions caused by the actions of physicians and surgeons. Hospital or Surgery Related Conditions- Symptoms vary based on the condition involved. Drug related conditions- Medical issues related to drug use, adverse reaction, intoxication and overdose. (Grade, 2013)

Statistics on Medication Errors

7, 000 deaths are from medication error per year. 583 of those happen per month134 per week19 per day108, 000of the deaths from adverse drug reactions (Kass B, 2001)

Other statistics for medication errors include the adverse drug events

7% Missed Dose6% Wrong Technique5% Duplicate Therapy3-5% Drug-Drug Interaction1% Equipment Failure, Inadequate Monitoring, Preparation Error

Financial Costs of Medication Errors

There are about 77, 000 people each year who die or are injured from an adverse drug event. This costs hospitals up to 5. 6 million per year depending on the size of the facility. This number fails to include adverse drug events (ADEs) caused by admission, malpractice and litigation costs and the costs associated with injury to the patients. The National hospital expense to treat ADEs during hospital stays range between $1. 56 and $5. 6 billion dollars annually. There was a lot of research put into ADEs on the

costs and causes for years but it wasn't until Institute of Medicine (IOM) was directly consulted on the medical errors, injuries to the patients, that the IOM created a solution to help in preventing medical errors. They learned that patients who experienced adverse reactions were hospitalized 8 to 12 days longer than the traditional patient and their cost being from $16, 000-$24, 000 more for medical expenses. They also learned that 28% to 95% can be prevented through computerized monitoring systems; As well as 84% could be prevented by computerized medication order entry. $500, 000 can be saved yearly by using computerized systems. (Kass B, 2001)Another study shows there are 400, 000 preventable drug-related injuries per year in hospitals. An additional 800, 000 occurring in a long term care facility an 530, 000 occurring among the Medicare recipients in outpatient clinical settings. A study from an outpatient clinic showed medication-related injuries to be around the sum of $887 million dollars in external medicine costs. (Stencel C, 2006)

Solutions to help with medication error

Electronic prescribing for physicians is becoming a standard for doctors to use to help prevent errors in medication. This helps to eliminate the problem of a pharmacist not being able to read the writing and giving the wrong prescription. This is becoming the standard procedure that is used to help eliminate the simple mistakes that can be made by having similar drug names, and not having a fully legible written order. This also allows for doctors or pharmacists to see drug interactions, as well as drug allergies or any other potential problem that could occur and be detrimental to a patient's health, or even a setback in the progress they've made in their

health up to that point. Similar drug name account for 25% of errors reported to the medicine error program. 33% of errors are due to labeling and packaging including 30% of fatalities. Drug names should be standardized and drug and pharmacy companies should use the same terms, to help prevent any error.

ADE Prevention

FDA's Med-Watch program to report adverse drug reactions. Improving incident reporting systems- charting patient changes due to medication changes. Creating a positive environment for healthcare providers to report ADEs- Creating an environment free or fear or repercussions for healthcare providers. Relying on pharmacists to advice physicians in prescribing medicationImproving nursing medication administration and monitoring systemsThere are 4. 5 million ambulatory visits annually from adverse drug related events. Patients 65 and older are twice as likely as middle aged, and three times more likely than patients 25 to 44 to experience adverse drug effects dangerous enough to put them in the hospital. (O'Reilly, 2011)Medication errors can affect you or your family. This problem can be detrimental to the elderly as well as children. Hospitalized people need a family advocate to ensure that their family member is being well taken care of, and to ensure that any medication problem that may exist are noted in the records, and any medication allergies are also know and listed to ensure they don't end up with a medical set back that could have been avoided with simply knowing some basic information about the person. Sometimes it's a simple mistake that can easily be fixed, but too many times it lands the person in the hospital and in the worst case scenarios dead. It is unfortunate,

but it's an issue that exists. There are precautions that have been put into place to help reduce or eliminate this problem. From changing the ways that nurse store, and administer their medicine. How pharmacy protocols are for medications that look alike or sound alike other medications. These minor changes in the hospital reduce the number of patients who have ADRs, and reduce the money that is spent in error from changing their medication, and prevents them from having to stay longer just because of a medication mishap. Technology plays a big role is helping to reduce or eliminate this problem in the medical field, as most of our medical records are going digital it allows physicians to see any listed drug allergy, the medication they are on. It will also give quick results on any drug interaction that may come from combining what they are taking. The nurses having to scan in bar code labels on medication help to ensure they are giving the correct medication. As well as the correct dose to any patient, and keeps a record of what medications they are on and if the health of the patient changes they are able to determine if that change is related to change in medicine or to see if it's a new problem that has occurred.