

## BACKGROUND

The aim of unit-dose drug dispensation system (UDDDS) is allowing us to dispense the medication required for the patient for the following 24 hours, once the prescribed treatment has been validated by the pharmacist.

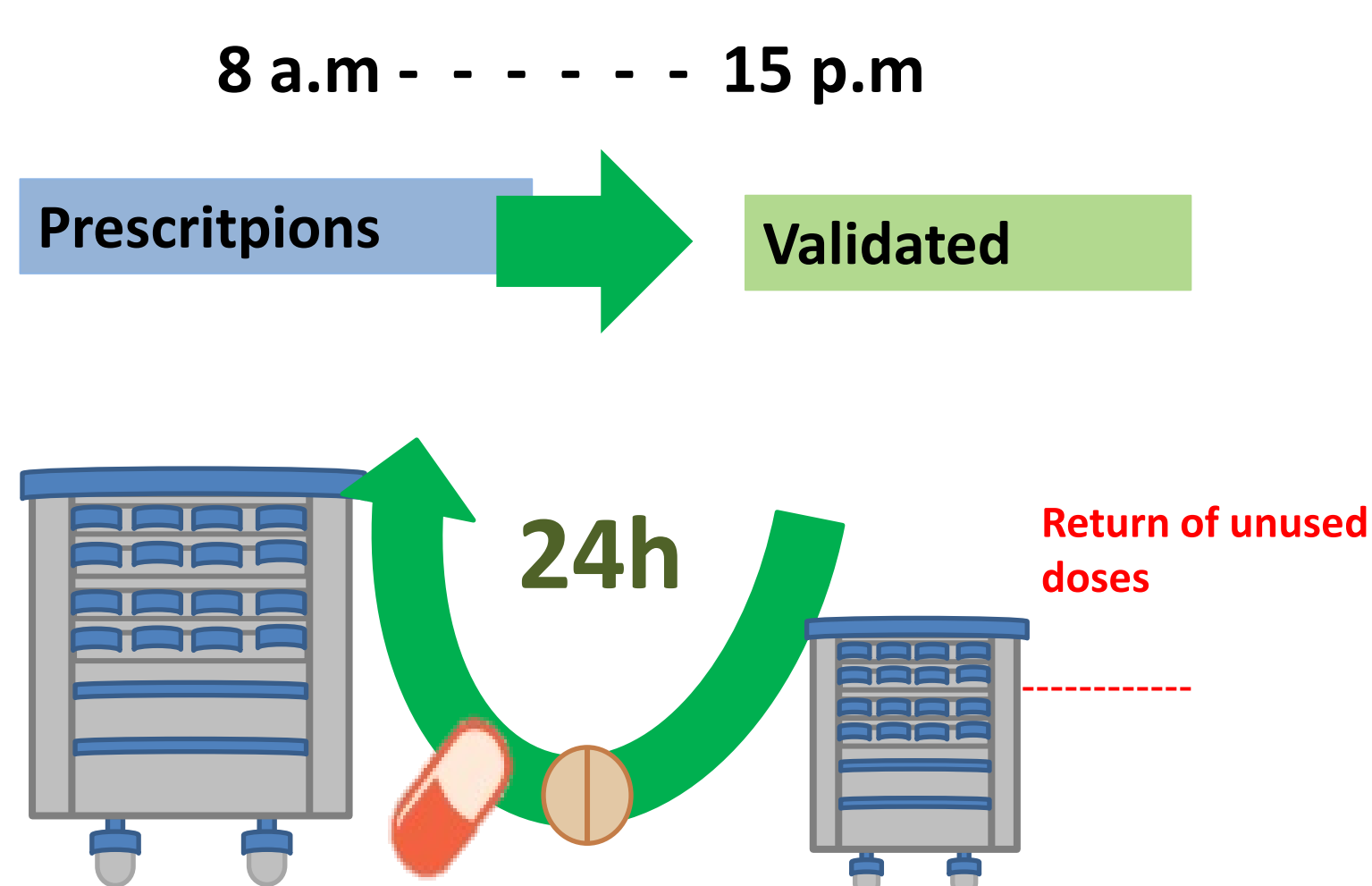
## PURPOSE

Evaluation of the impact on the effectiveness of UDDDS after the change from the preprinted prescription chart (PPC) to the assisted electronic prescription (AEP).

## MATERIAL AND METHODS

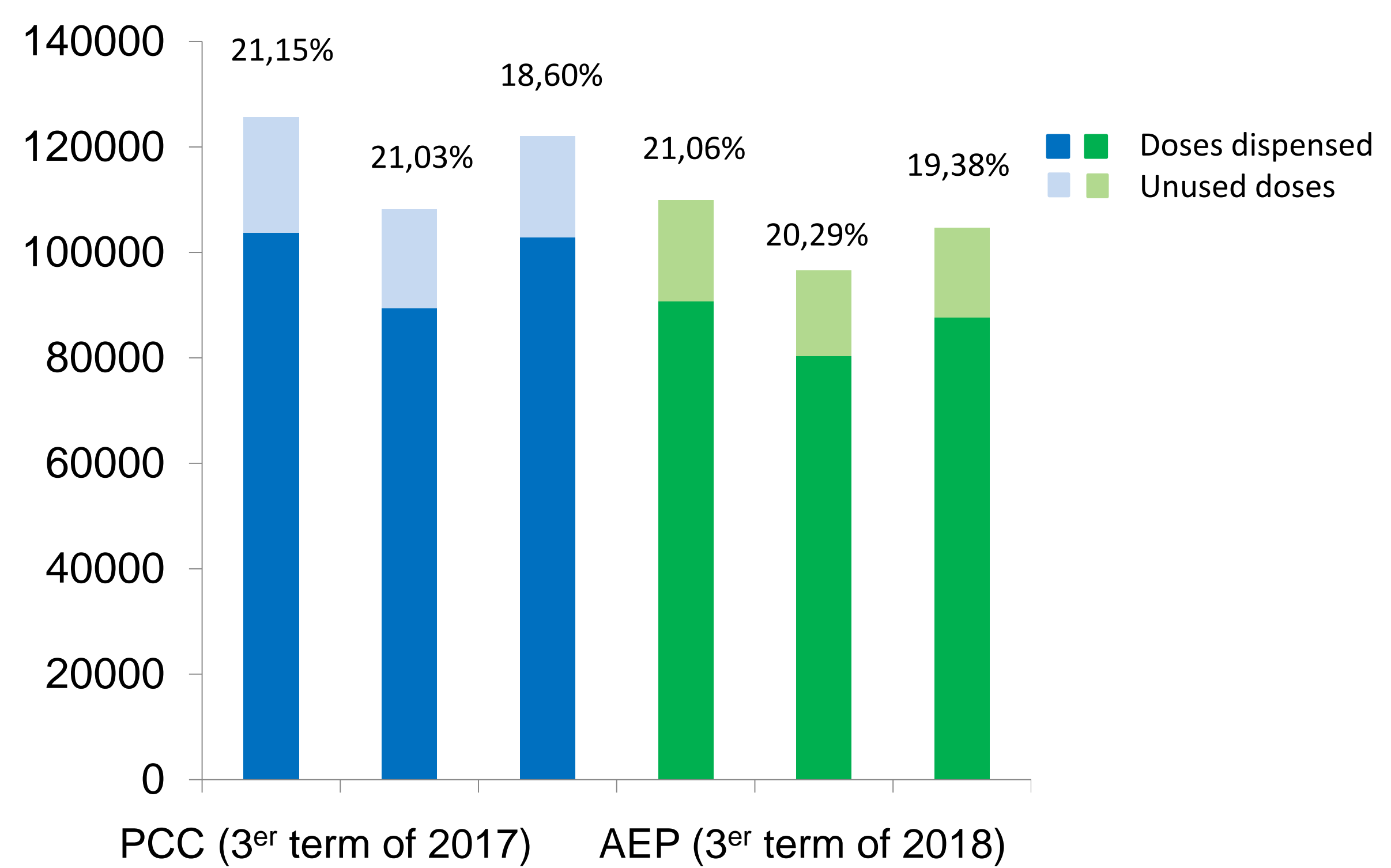
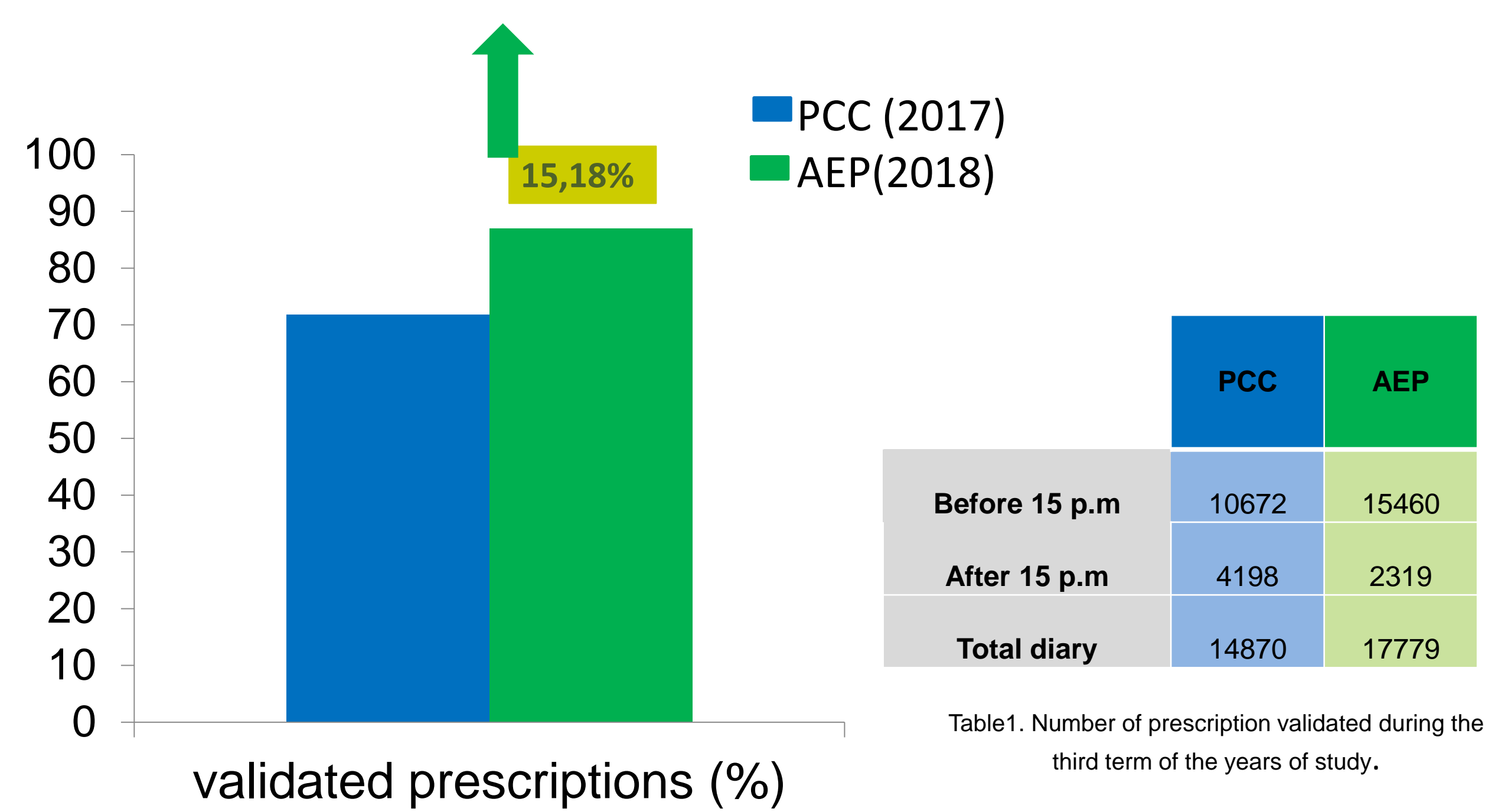
This study was performed in a general hospital (330 beds), in which 10 units of hospitalization count on UDDDS. The schedule of the delivery of the medication carts is established at 15 p.m, after the daily doctor visit. We have compared the functioning of UDDDS during the third term of 2017 (PCC) and 2018 (AEP).

We have measured as efficacy parameters the number of validated prescriptions before 15 p.m and the percentage of the returns of unused doses of medication.



## RESULTS

With a total of 14870 and 17779 validated prescriptions in 2017 and 2018 respectively, the percentage of validated prescriptions before 15 p.m supposed an increase about 15,18% after AEP. The percentage of the returns of unused medication doses did not show significant differences between the years of comparison.



## DISCUSSION AND CONCLUSIONS

Our results show a significative increase on the percentage of validation in optimal schedule after the implementation of AEP, despite the light increase of activity. Assuming that the remaining 12-13% of the prescriptions, correspond to changes in the treatment and hospital admissions during the afternoon and night, we consider reached the purpose of the study. The parameter of the returns of unused doses of medication, however, show the needed of continuing the evaluation of the procedures in order to obtain a greater effectiveness.

