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PURPOSE

- ✓ To identify and quantify the prescription errors that occur during the hospital admission of patients taking anticoagulants with vitamin K antagonists (VKA) and enoxaparin
- ✓ To quantify the degree of acceptance of the intervention of the pharmacist to avoid such errors

MATERIAL AND METHODS

- ✓ Prospective observational study conducted in a hospital
- ✓ Duration: 5 months
- ✓ Patients included those taking anticoagulants with VKA who were admitted to the hospital and underwent an analytical check by haematology on admission
- ✓ Sources of information: Silicon v. 9.59 electronic prescription program and haematology instructions
- ✓ Discrepancies between the prescription of the anticoagulant and the instructions were codified:
 - VKA1 Different VKA dose prescribed
 - VKA2 Lack of enoxaparin prescription
 - VKA3 Different enoxaparin frequency
 - VKA4 Different enoxaparin dose
 - VKA5 Lack of VKA prescription
 - VKA6 VKA does not match instructions
 - VKA7 Instructions recommend discontinuing enoxaparin and on the prescription it is not discontinued
 - VKA8 Enoxaparin prescribed when it is not recommended in the instructions
 - VKA9 Apixaban, enoxaparin and acenocoumarol prescribed
- ✓ Pharmaceutical interventions (PI):
 - PI1 Suspend medication and prescribe the correct one
 - PI2 Suggest prescription of necessary medication
 - PI3 Correct enoxaparin frequency
 - PI4 Correct enoxaparin dose
 - PI5 Prescribe the VKA
 - PI6 Review instructions
 - PI7 Suspend enoxaparin (recommendation in instructions)
 - PI8 Suspend enoxaparin (no recommendation in instructions)
 - PI9 Interaction with other anticoagulants.

RESULTS

- ✓ One hundred and nine patients were analysed (194 haematology instructions)
- ✓ Errors in the prescription: 37.63%
- ✓ Degree of acceptance of PI: 100%

- ✓ The discrepancies and interventions detected: VKA5, 15 (37%), VKA2, 12 (20.55%), VKA1, 11 (12.35%), VKA and I4, six, seven and eight (6.85%) and VKA and I3, nine (1.35%).

CONCLUSIONS

- ✓ In our population, a high percentage of errors were detected in the prescription of anticoagulants
- ✓ Pharmaceutical intervention was key to minimising prescription errors and improving patient safety

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