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IMPLEMENTATION OF ALERT MODEL/SYSTEM IN AN E-PRESCRIBING PROGRAM TO IMPROVE DRUG ALLERGY CAPTURE AND CLINICAL DECISION SUPPORT

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What was done?

A procedure was designed for the registration of drug allergies of patients admitted to the hospital in the electronic prescription program (ATHOS) by reviewing the digital medical record (DIRAYA).

To improve Patient safety, there is a high risk of serious adverse events if the patient receives a drug to which he/she is allergic

Lack of integration of allergy information from computerized history and electronic prescribing.

> Why was it done?

Difficulty in accessing information on drug allergies when prescribing and validating medical treatments.

To facilitate the appropriate triggering of alerts, correct allergy terminology, coded properly, and captured in a standard location

Variability in the recording of this information at the different levels of healthcare (primary care and hospitalized).

What has been achieved?

Preventing medication errors related to drug allergies and ensuring patient safety.

Improving access to all allergy information for all healthcare professionals involved in the prescription and validation of medication.

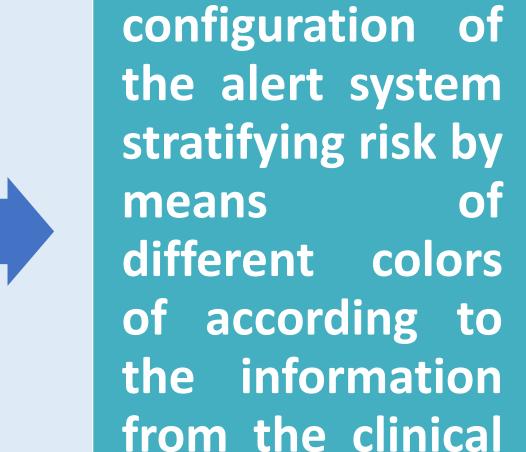
To have a standardized methodology for recording and coding allergies.

Integrating medical record information into the electronic prescription system.

Setting-up an effective alert system to avoid allergy errors in the e-prescribing system.

Why was it done?

Review of allergy documentation text), (free including a more detailed specification and characterization of the patient's allergies to properly coded (allergy medicines, contraindication, intolerances).



history.

Validation

and

of

Development of an algorithm to evaluate how to register each allergy depending on every different situation.



Elaboration of a procedure to alert management and incorporation into the electronic prescription program.



Dissemination of procedure the awarenessraising of the need for proper recording.

What next?

We have achieved the implementation in the Pharmacy Service of our hospital, but it has already been taken to the safety committee in order to extend this practice to all the services of our hospital and we are working on the formation of a working group within the Patient Safety Commission. We are considering extending this procedure to primary care in order to address this problem from all healthcare areas.

