

PRESCRIBING ERRORS IN PARENTERAL NUTRITIONAL SUPPORT FOR ADOLESCENT PEDIATRIC PATIENT

*Rodenas-Rovira M¹, Padilla-López A¹, Vázquez-Polo A¹, Escobar-Hernández L¹, López-Briz E¹, Arnau-Blasco B¹, Chovi-Trull M¹, Ferrandis-Sales N¹, García-Pellicer J¹, Poveda-Andrés JL¹

¹Servicio de Farmacia, Hospital Universitari i Politecnic La Fe, Valencia.

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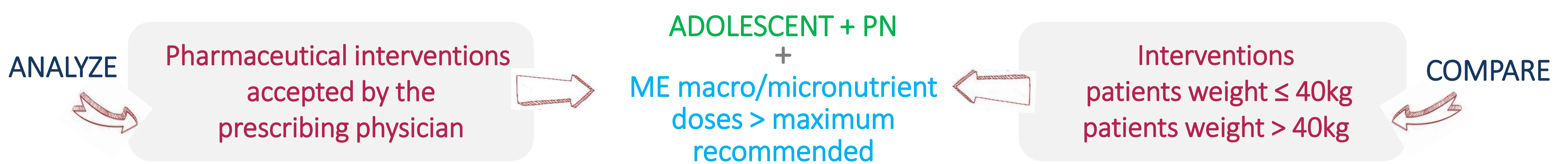
*corresponding author: rodenas_marrov@gva.es@gva.es

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Background and importance

ADOLESCENTS represent one of the pediatric populations at highest risk for medication errors (ME) due to individualized dose calculations based on weight, a parameter with high variability in this pediatric age. Pharmacist intervention may be essential to reduce ME in PARENTERAL NUTRITION (PN), especially in weights greater than 40 kilograms (kg) as indicated in the literature, to make sure that the maximum recommended dose is not exceeded.

Aim and objectives



Material and methods

Observational, descriptive and retrospective study + From between January 2022 and May 2024 + Tertiary care hospital

Adolescents (13-17 years) who received PN

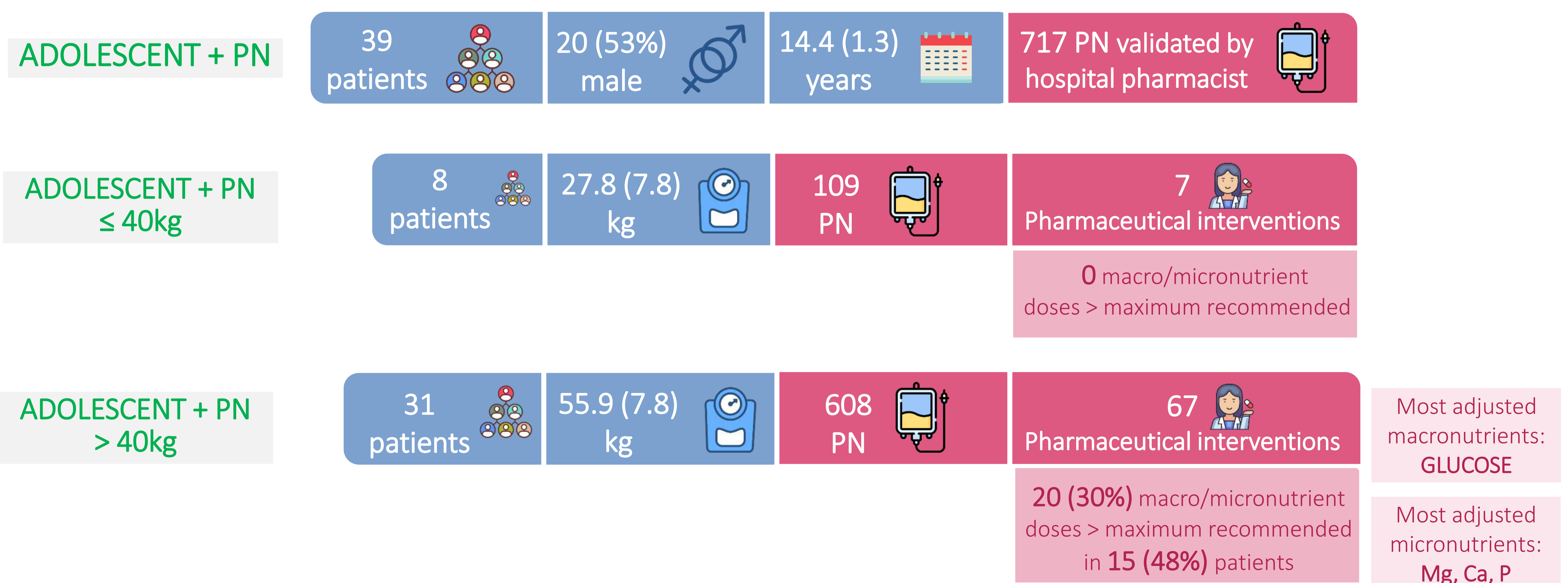
Variables

age, gender, weight, number of PN, type of intervention, macro/micronutrients adjusted.

Qualitative variables was expressed as numbers and percentages (%). Quantitative variables were expressed as mean ± standard deviation (SD).

* Interventions to adjust osmolarity or stability of the lipid emulsion were excluded.

Results



Conclusion and relevance

This study suggests that in nutritional therapy, patients weighting over 40 kg are more likely to experience dosing errors in both micronutrients and macronutrients. This underscores the critical importance of hospital pharmacists' involvement and integration within the nutrition management team to ensure the accuracy and safety of nutritional preparations, particularly for adolescent patients who require specialized considerations.

