Quarterly Analysis for the prescribing part of the Medication Error Rate from 2004 to Present (some data points are skipped with a downward trend, the vertical axis shows the error rate in percentage and the horizontal axis displays the qt. of the year)
Quarterly Analysis of Prescribing Part of the Medication Errors

The attached line graph indicates an overall downward trend for the prescribing part of the medication errors through multi-disciplinary efforts over the years. Tab for the data represents the quarterly rates by the years and the color legend in the graph displays the Year.

There is a report includes the hospital wide quarterly analysis of prescribing part of the medication errors from 2004 - present. The errors result in suspending a medication orders and require intervention to correct these orders prior to dispensing and administration of a medication. This proactive report provides us the opportunity to learn and avoid any adverse events from the prescribing part of medication errors.

Multiple initiatives are made and continuously maintained to improve the prescribing process, i.e., Hospital wide reporting for the medication error rate, Clinical Pharmacist's role and involvement in the clinical intervention process for the appropriate medication usage, departmental engagement and training of the clinicians and rotating residents based on the findings from the interdisciplinary patient safety reports, the ongoing implementation of Computerized Physician Order Entry system and its evaluation, etc. and the commitment of the staff and leadership for the quality and patient safety.

Most of these errors were usually screened and suspended by a pharmacist and or by the prescriber and a new correct medication order had entered after the discontinuation of a wrong order.

It is required to prescribe a medication order with the correct drug, dose, frequency, diluents, rate, duration and patient’s allergy information, weight based dose calculation etc.

Drug-drug interaction, Drug-food interaction may also be a contributing factor for the suspension of a medication order.

The data is presented quarterly in the Departmental Performance Improvement Committees, Pharmacy & Therapeutics Committee, Patient Safety Committee, Executive Performance Improvement Council, Medical Executive Committee, Graduate Medical Education Committee, & the Governing Body.