

Assessment and Categorization of Medication Errors in a Veterinary Teaching Hospital

Jessica Barazowski PharmD, FSVHP, Lauren Forsythe, PharmD, DICVP, FSVHP, Alexandria Gochenauer, PharmD, DICVP, FSVHP, FACA
 Veterinary Teaching Hospital, College of Veterinary Medicine, University of Illinois at Urbana-Champaign

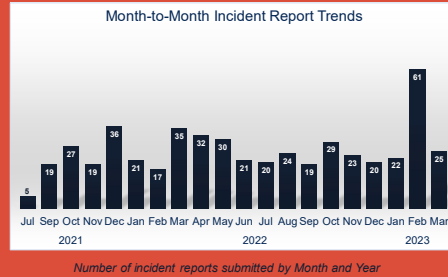
INTRODUCTION

- Medication errors are a leading cause of medical error in human medicine, with millions of patients impacted annually¹
- Studies have shown that medication errors are the most common type of medical error to occur in veterinary hospitals^{2,3}
- Medication errors, especially those that lead to drug waste, can be costly – both to the patient in the form of adverse drug events and to the healthcare system in the form of increased medical cost⁴
- Pharmacist intervention can assist with reducing medication errors and drug waste by assessing for appropriateness of medication orders, monitoring drug waste, limiting access to high-cost and infrequently used medications, and ensuring sufficient background knowledge/training is provided for medication-related tasks⁵

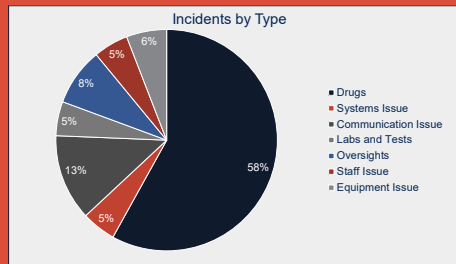
METHODS

- A retrospective study was completed reviewing incident reports from 2021 through the present, corresponding discretionary adjustment data, and documented pharmacist interventions
- Descriptive analyses were used to categorize the most frequent types of medication errors, identify the most common medications involved in errors, and attempt to identify the correlation of variables with the occurrence of medication errors

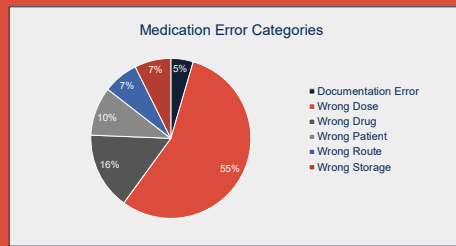
RESULTS



Number of incident reports submitted by Month and Year



Over half of all Incident Reports involved Medication Errors



Of the Incident Reports that contained Medication Errors, over half involved administration of a Wrong Dose

High risk meds	Number of Incident Reports
Cyflarabine	3
Euthanasia	6
Hydromorphone	6
Alfaxalone	9
Ketamine	9
Midazolam	10
Buprenorphine	13
Desmedetomidine	14
Maropitant	14
Vaccines	14
Fentanyl	18
Butorphanol	20
Methadone	24
Sabapentin	27
TOTAL High Risk Incidents	190
TOTAL Incidents	190/348

"High Risk Medications" were those for which incident reports were submitted over 5 times during the period between July 19, 2021 and January 2, 2023. Over 50% of the total 348 incident reports submitted included these medications

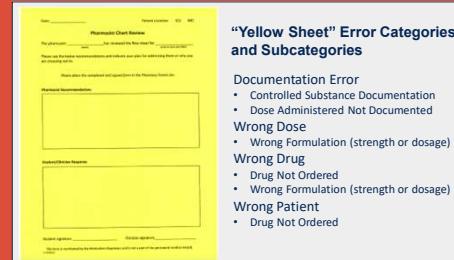
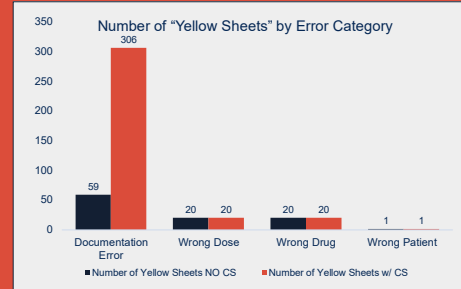
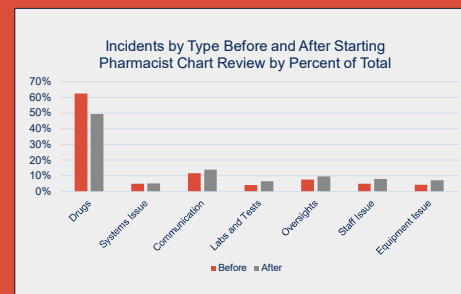


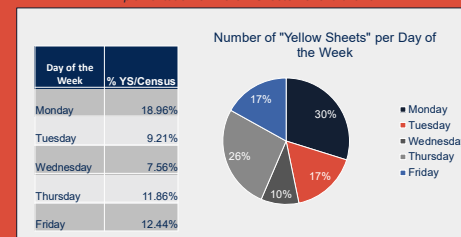
Image of a blank "Yellow Sheet" and Error Categories and Subcategories for "Yellow Sheets"



Number of "Yellow Sheets" by Error Category – Controlled Substance Documentation made up over 75% of all "Yellow Sheet" errors



The number of Incident Reports involving Medication Errors reduced after implementation of "Yellow Sheets" for chart review



"Yellow Sheets" are most likely to be distributed on Mondays

AIMS

Current:

- Assess the types of medication errors that frequently occur within a veterinary teaching hospital
- Identify the specific medications that are most frequently involved
- Determine what trends contribute to the most common types of medication errors
- Determine if "Yellow Sheets" helped to decrease Medication Error incidents

Future:

- Determine the impact that student involvement has on incident reporting and adverse events
- Categorize and assess medication errors that occur in private practice

CONCLUSIONS

- 58% of all Incident Reports included Medication Errors
- Over half of the Medication Errors reported involved a Wrong Dose
- Incident Reports involving Medication Errors decreased after the implementation of "Yellow Sheets"
- "Yellow Sheets" are most likely to be handed out on Mondays
- Controlled Substance Documentation was the most frequently cited error via "Yellow Sheet"

REFERENCES

- Institute of Medicine. *To Err Is Human*. National Academies Press; 2000. Doi:10.12226/9728
- Phillips, David P.; Christenfeld, Nicholas; Glynn, Laura M. Increase in US Medication-Error Deaths between 1983 and 1993. *Lancet*. 351:643-644,1998
- Wallis J, Fletcher D, Bentley A and Ludders J (2019) Medical Errors Cause Harm in Veterinary Hospitals. *Front. Vet. Sci.* 6:12. doi: 10.3389/fvets.2019.00012
- Vincent WR, Martin CA, Winstead PS, Smith KM, Gatz J, Lewis DA. Effects of a pharmacist-to-dose computerized request on promptness of antimicrobial therapy. *J Am Med Inform Assoc.* 2009;16(1):47-53. doi:10.1197/jamia.M2559
- Rodziewicz TL, Houseman B, Hipskind JE. Medical Error Reduction and Prevention. [Updated 2022 May 1]. In: StatPearls [Internet]. Treasure Island (FL): StatPearls Publishing; 2022 Jan-. Available from: <https://www.ncbi.nlm.nih.gov/books/NBK499956/>