

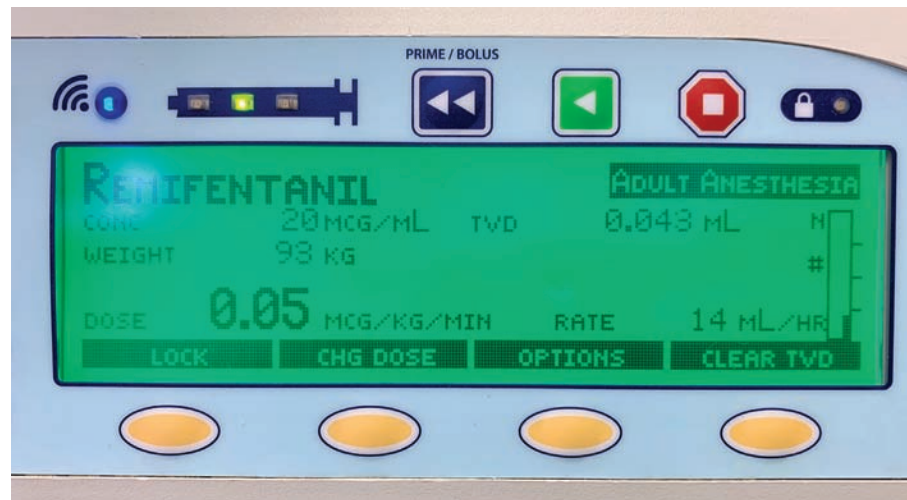


Safety Tip of the Month

Brought to you by the ASA Patient Safety Editorial Board

Programming Infusion Pumps

Anesthesia professionals frequently make mistakes when calculating drug doses, with inexperienced residents and older faculty at increased risk (*Anesth Analg* 2019;128:1292-9). Smart I.V. infusion pumps are designed to reduce the risk of medication errors. These devices use a preprogrammed drug library to minimize dosing errors and can alert the user if an infusion rate exceeds specified parameters. Unfortunately, the use of this technology has still not completely eliminated medication errors in the OR or ICU. One study found that medication errors occurred in 60% of infusions using a smart pump. Errors included unlabeled medications, unauthorized medications, incorrect rate or dose, and failure to use the smart pump library, among others (*BMJ Qual Saf* 2017;26:131-40). Although few of the errors could have caused patient



harm, this study demonstrated that the risk of error is still high despite the introduction of new technology.

It is easy to say that clinicians should actively search for sources of error in

automation, but it may be hard to do in practice. Inattention blindness may prevent even a trained observer from seeing something that is unexpected, (*Psychol Sci* 2013;24:1848-53) so it is not unrea-

sonable to expect that even an experienced clinician may miss an incorrectly programmed pump or ventilator. One way to prevent this complication is to evaluate multiple distinct data points to ensure that the programming is correct (*Anesthesiology* 2020;133:653-65). When programming an infusion pump, check the weight-based programmed infusion rate and compare that to the rate in milliliters per minute (or hour). An infusion that will take significantly less or more time than expected to complete may be a warning that the pump has been incorrectly programmed. Although this may not protect the clinician against small errors (e.g., 1.5 vs. 2 mcg/kg/hr) it will prevent larger, potentially catastrophic errors, such as may occur when entering 8 kg instead of 80 kg for the patient's weight or when the concentration of the infusion is different from the pump's programming. ■



ASA News

2022 Committees and Editorial Boards: Nomination Period Open Through January 15

ASA is now accepting nominations for 2022 committee and editorial board membership through January 15, 2021. To standardize the nomination process and better facilitate appointments, ASA utilizes an online form. Nomination forms and a list of frequently asked questions can be found on the ASA website at Home > About ASA > Governance and Committees > ASA Committees and Editorial Boards page.

Self-nominations

Current members and adjunct members of committees, subcommittees, and editorial boards whose terms expire in October 2021 are required to complete a self-nomination form by January 15, 2021, in order to be considered for reappointment for the 2022 governance year.

Members whose committee/editorial board term ends in 2022 or 2023 will see that the self-nomination form is greyed out for the relevant committee/editorial board since an appointment request for the 2022 cycle is not necessary for that group. ASA members who are interested in serving on a committee or editorial board are also required to complete a self-nomination form to be considered for a new appointment. If the nominee would like colleague nominations to be considered in their record during the review process, the nominee is responsible for soliciting these directly from colleagues.

ASA is fortunate to have many able volunteers seeking nomination; not all nominees can be appointed, as there are a limited number of positions. ASA seeks a proper balance of continuity, experi-

ence, diversity, and new talent on each committee.

Colleague nominations

ASA's foremost goal is effective and productive committees and editorial boards; therefore, colleagues are asked to limit their nominations of others to individuals who have the interest, time, and commitment to serve. ASA members

may recommend others for appointments via colleague nominations; however, nominees are still required to complete a self-nomination form by January 15, 2021, in order to be considered.

For a complete list of current ASA committees and editorial board members with terms, see www.asahq.org/about-asa/governance-and-committees/asa-committees. ■

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