Poster presentations

99 MEDICATION ERRORS: A WEIGHTY ISSUE?
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Background: Weight determined prescribing is coming in the acute hospital setting. Medication errors within this category have been frequently described among the paediatric population, particularly with anti-infective agents and analgesia but less so among adults. Assessment of weight is an essential component of all hospitalised patient assessments, with the NICE guidelines recommending assessment of Body Mass Index for all patients on admission. Research to date has shown that health care providers are not accurate in estimating patients’ weights from the bedside which can lead to errors in prescriptions of essential medications.

Methods: On a single day, drug kardexes for all inpatients in a University Hospital excluding those within the emergency department were evaluated. For each patient the drug kardex was examined for documented weight and was also analysed to establish whether patients were on weight-based medications or not, with specific focus on antimicrobial agents and low molecular weight heparin (LMWH).

Results: 290 Kardexes in total were reviewed. 39.6% (115) had a documented weight. 13.4% (39) were on a weight based antimicrobial or therapeutic LMWH. Of those patients 35.8% (14) had no documented weight on their Kardex.

Conclusion: This study concluded that the majority of acute inpatients did not have a weight documented, and over one third of those on weight based medications did not have a clear weight displayed. This may put patients at risk of under treatment of serious infection, or harm relating to over dosing such as acute kidney injury or bleeding. Patients at most need of being weighed however are often too frail or unwell to stand and acute wards and emergency departments are limited by space and manpower to perform hoist weights. Since this study was performed a working group has been established in conjunction with pharmacy and nursing staff to establish a quality improvement initiative around these barriers.