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Kan PEM bidrage?

En undersøgelse af hvordan PEM kan bidrage ved optagelse af medicinanamnesen

af

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Abstract

Titel: Does PEM contribute? – A study of how PEM contributes to obtain the medical history

Background: At the time of admission to a hospital there is a significant risk of considerably loss of information about patient's medication. According to former surveys, for up to 83 % of patients at least one error is contained in the medication history registered upon admission. These errors are often unintended and clinically important. A project called "Prevention of medication errors at the interface between primary and secondary care" is implemented at Amager Hospital in cooperation between the primary and secondary sector. The aim of this study is to present a pilotstudy to the project. The primary focus is to identify possible types of information to be collected to record a medication history and to examine how PEM can be optimally integrated.

Method: A number of different actors and methods has been employed to record the medication history in this study. Secondary data is collected from the following actors: the patient, PEM, general practitioners (GP) and home care. Four methods are used with the patient as the actor: patient interview, the marking journal, information from relatives and medication bag.

Results: PEM and home care generally contains the most relevant information about the drug. GP is characterized by relatively fewer information per drug. The patient represents least information per drug. The name and the strength of the drug are the most frequently types of information. For the set of 54 drugs, 91 discrepancies have been identified. Fifteen medicines is associated with no discrepancies. The discrepancies divide into omission of drug, dose discrepancies, strength discrepancies and formulary discrepancies. Two discrepancies have been considered potentially lethal, 41 significant and 36 discrepancies minor errors.

Conclusion: It is verified that PEM contributes with information's about prescription medication with significant clinical importance to the patient. Furthermore it is found that PEM contributes with relevant information's about the drugs, such as the name, strength, dose and formulation of the drugs. It is concluded that PEM enable an immediate overview of the patient's medication for the recent 2 years. Due to the lack of information about over the counter drugs and drug dispensed at hospitals, it is found necessary to combine information from PEM, with information from the patient.