



To Eliminate Incidences of Oral Metformin Administration to Diabetic Patient Post CT Scan with IV Contrast

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Introduction

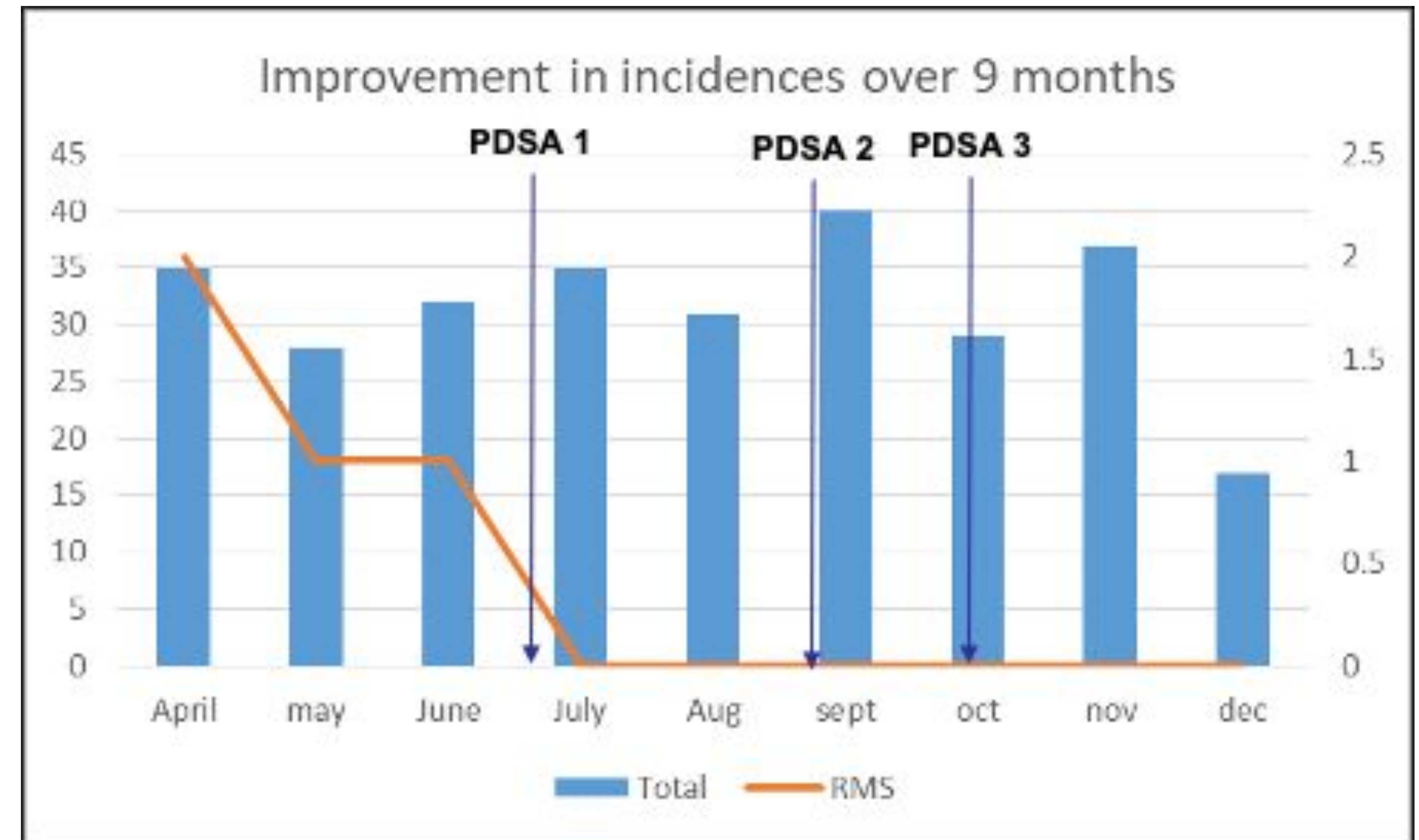
Many patients have undergone urgent or non-urgent Computerized Tomography (CT) scan with IV contrast to determine a diagnosis before a procedure or surgery since the opening of the General Surgery (GS) wards in SKH.

Nurses who received the patient after the CT scan may not be aware that the patient received IV contrast during the scan unless informed by the Radiology nurse or by the CT scan report.

Oral Metformin was discovered to be administered within 48 hours of a CT scan with IV contrast. It was not supposed to be consumed by the patient in order to prevent metformin-associated lactic acidosis (MALA). As a result, medication errors were reported.

From April to June 2020, GS wards raised 3 RMS and 1 near missed.

Results



Objective

To eliminate incidences of oral metformin administration to diabetic patient post CT scan with IV contrast in the 5 GS wards within 6 months.



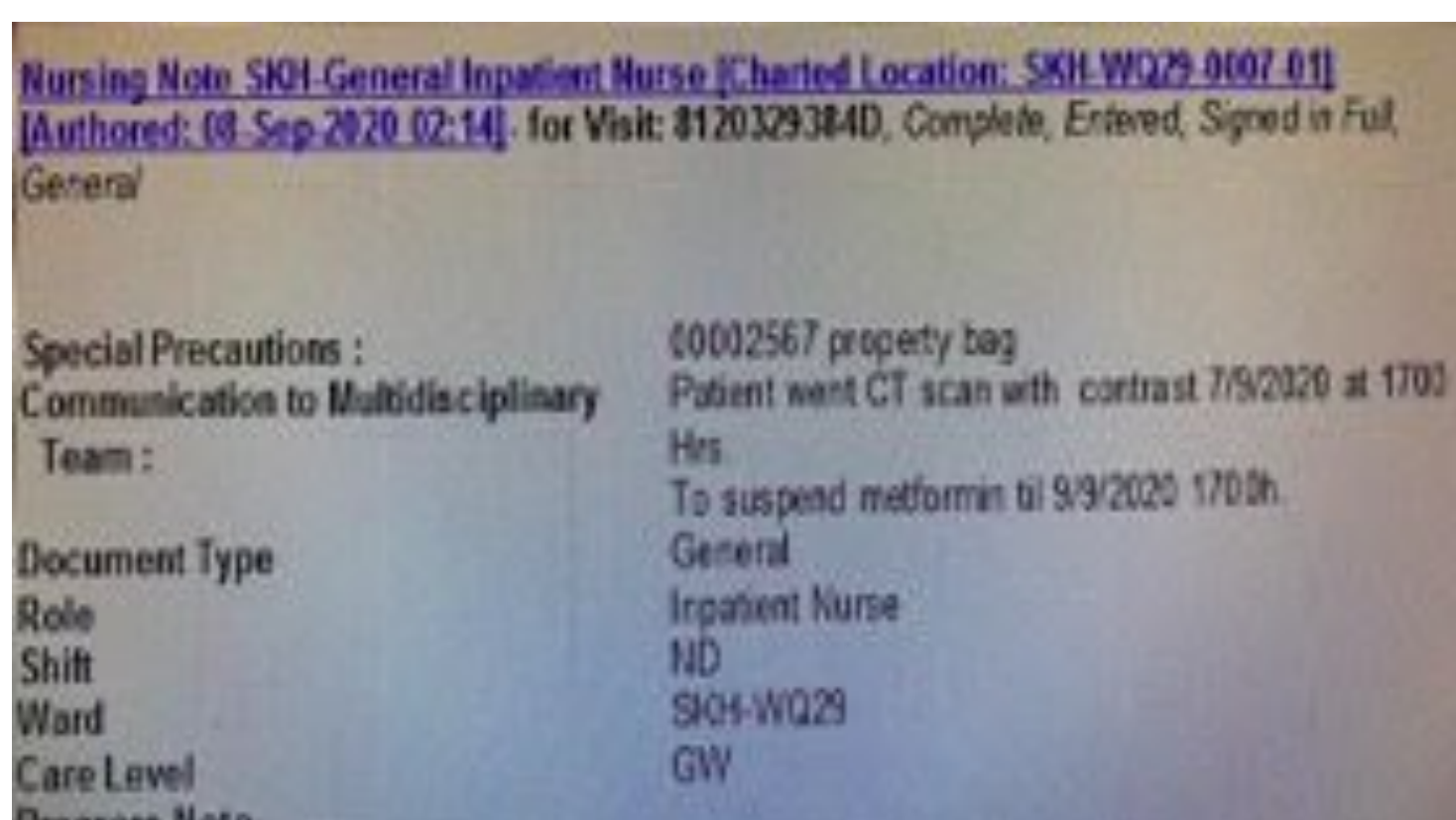
Interventions

PDSA 1



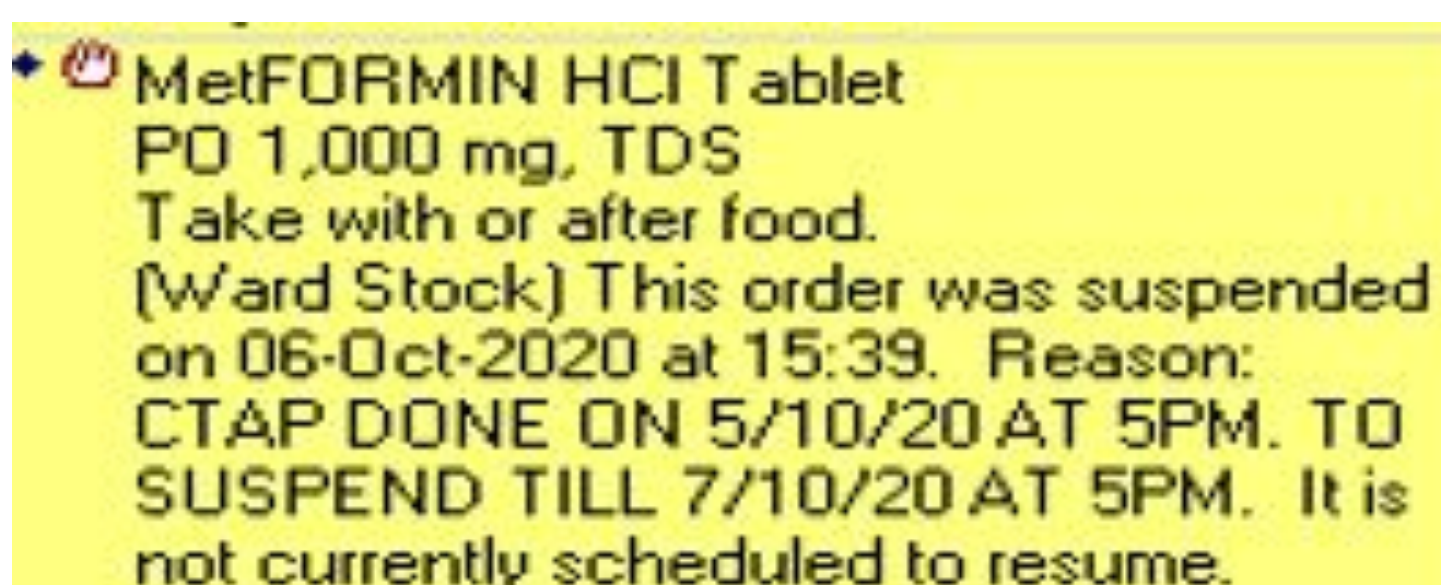
- Use of white wrist tag written as 'NO METFORMIN TILL (date and time post 48hrs CT scan)' and place on the same hand as the patient's RFID tag.
- A reminder to RNs during medication rounds when they scan the RFID tag for verification.
- Patients are informed that oral Metformin will not be served for 48hrs post CT scan.

PDSA 2



- Additional input in the multidisciplinary notes in SCM for better property communication amongst RNs and doctors during handover.
- 'NO Metformin Till..(date and time)'.

PDSA 3



- Suspension order of oral Metformin in the medication worklist by RNs.

Conclusion

1 Reduced staff anxiety by standardizing the workflow and reduced their medication incidences to zero.

2 As patient's safety is optimize through the interventions, it positively reduces cost in relation to adverse medication incidences.in reducing patient harm.