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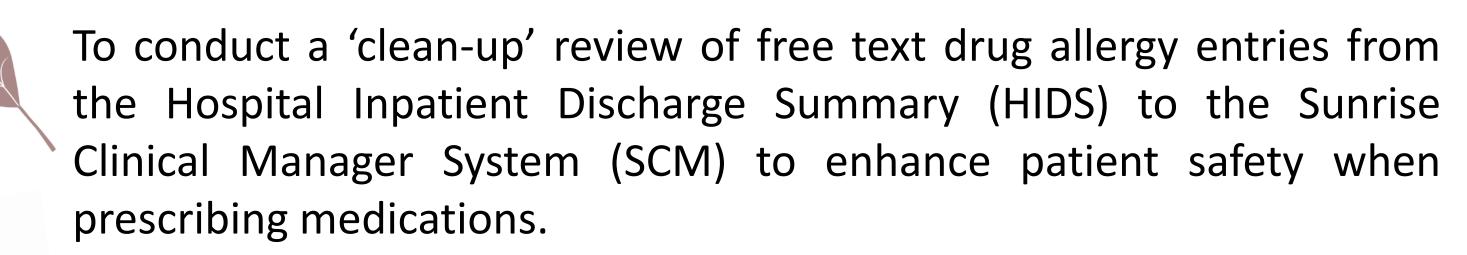
# Medication Safety Risk Management

- Coding and Mapping of Free Text Allergy in the Sunrise Clinical Manager System to prevent / minimise risk of alert fatigue

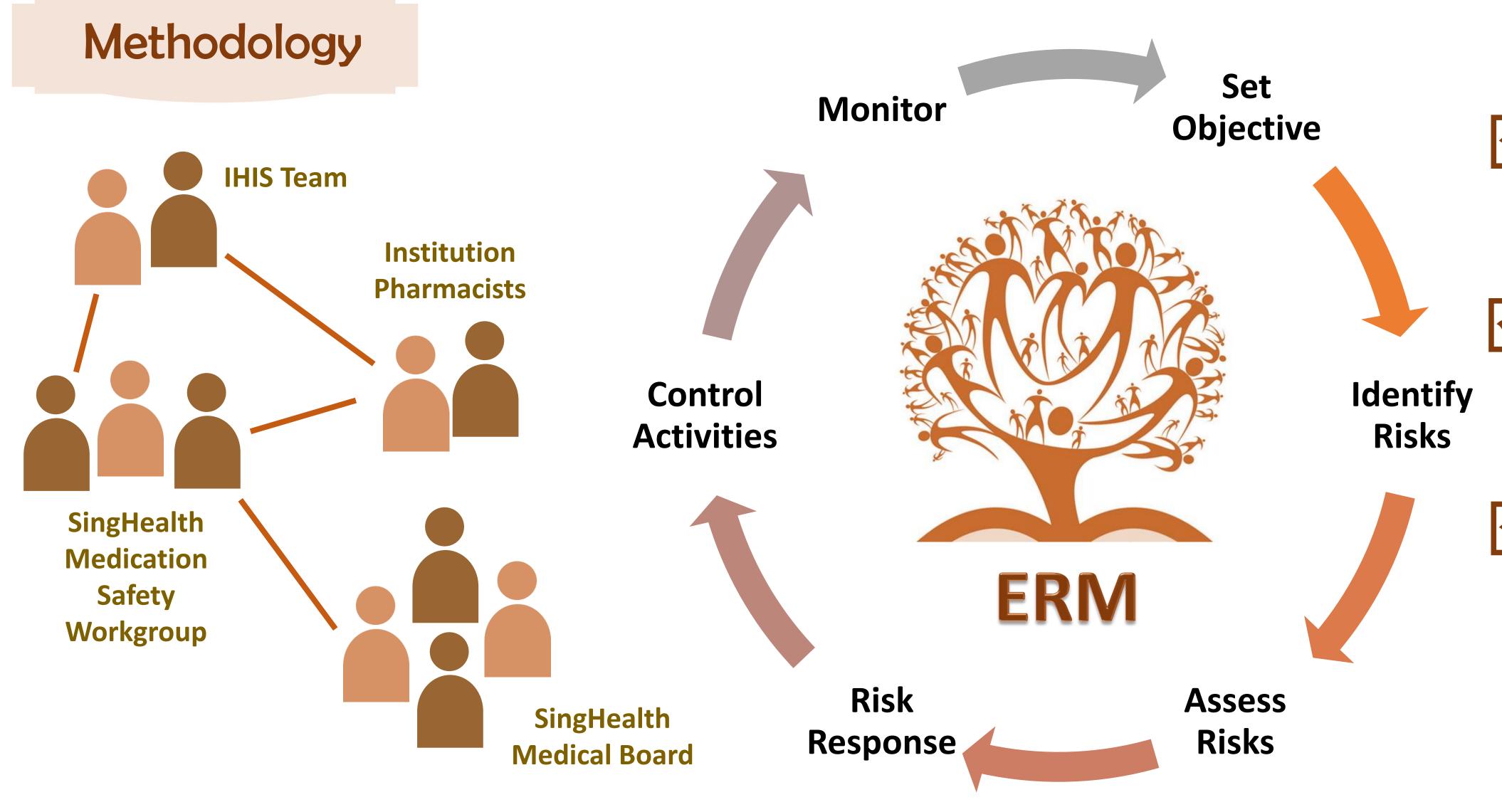
#### Background 20 free text drug allergy entries that could be Drug coded and mapped were Allergy identified and verified by entered as Institutions. **FREE TEXT** 2012 2014 2013 2007 All drug allergies required to Alert system which prompts 'clean-up' review users of a "free text" drug be "coded" proposed rules to be System identifies drug and allergy when ANY drug is applied and challenges alerts when THAT DRUG prescribed encountered in coding and Throw up multiple alerts **CATEGORY** is prescribed mapping were shared with CMC members in Jun 2014 26,359 alerts in 6 months

# Objectives

To enhance the safety and quality of the prescribing process across the Cluster through coding and mapping of free text drug allergies in the Closed Loop Medication Management (CLMM) system.



To lessen excessive warnings to prevent alert fatigue among prescribers.



- Risk of alert fatigue among prescribers due to excessive firing of non specific allergy alert prompts.
- Risk of misinformation due to clinicians overlooking the drug allergy information of patients in HIDS which could potentially lead to patient harm.
- Risk of ignoring crucial alerts due to alert fatigue leading to patient harm.

### Results

60%

Cases were successfully codified
After 'clean-up' review, IT staff &
Institution pharmacists were able to
successfully codify and map to existing
coding classification in the SCM

After completion of the 'clean-up' initiative, alert volume was reduced significantly:



43.3%

for Free Text Alerts (n=26,670)

29.81%

for G6PD Alerts (n=1,120)

# SGD1,700.33 per year

of Estimated Potential Cost Savings was calculated

Calculation was based on the total time saved for doctors per year (38.6 hours) and the average manpower cost for physicians/general practitioner (\$8,282.00/month) based on the published data from Ministry of Manpower's Occupational Wage Table(s) for 2014 (released in June 2015)

# Conclusion

Drug Allergy alerts have great potential to reduce adverse drug effects and improve patient safety when properly implemented and utilized. However, interruptive non specific alerts could cause alert fatigue among physicians and reduce the overall effectiveness of such alerts that might lead to physicians missing out alerts that could be critical for safe patient care. Filtering these alerts could potentially save time and effort and would facilitate better decision support for our clinicians.

The proactive and multidisciplinary approach in the risk assessment and mitigation process provided a systematic review of system issues in order to prevent medication errors and reduce the risks of harm.

## Acknowledgement

The authors gratefully acknowledge the following teams for their support in this project:

- SingHealth Medication Safety Workgroup
- SingHealth Office of Risk Services