

INTRODUCTION



Main objectives:

The safety in the administration of medicines, sharing best practices and minimizing the possibility of ME due to confusion of denominations and the external appearance of the products. This has the potential to significantly improve patient safety and the quality of healthcare.

The WHO estimates that the annual cost of medication errors amounts to \$42 billion, all potentially avoidable.



WHO launches global effort to halve medication-related errors in 5 years

OBJECTIVE

The aim of this study is to determine the prevalence of ME related with Isoappearances at the emergency room (ER), and to give visibility and enhance the importance of the recently created Isoappearance Group in the Emergency Department to achieve ISO's objectives.

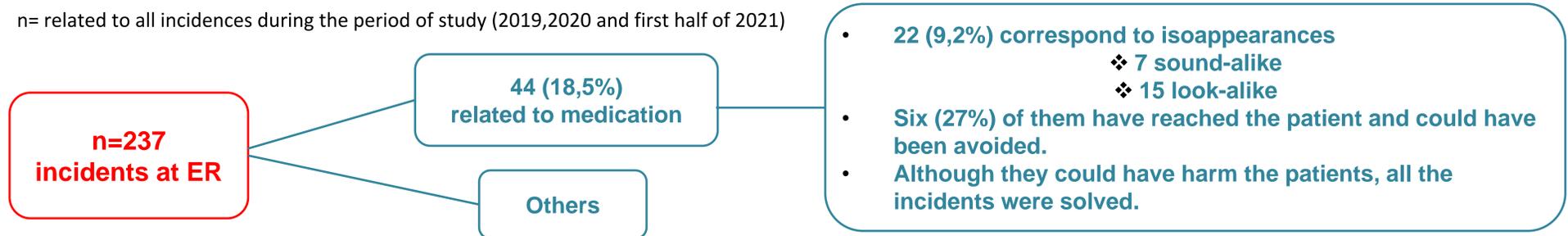
METHODS

A retrospective study was performed. ME that occurred at the ER in our hospital during the years 2019, 2020 and the first half of 2021 were analyzed through our corporative electronic platform SNAPS (Patient Safety Notification and Learning System), developed by the Spanish Ministry, and available to all hospital professionals. In addition, the bibliography at ISMP (Institute for Safe Medication Practices) website about sound alike and look alike was reviewed.



RESULTS AND DISCUSSION

n= related to all incidences during the period of study (2019,2020 and first half of 2021)



Look-alike:

1. Dexametasone amp. vs butilbromuro de escopolamina (buscapina).
2. Potasio IV vs Suplecal®.
3. Midazolam 15mg vs Midazolam 5mg
4. Prefilled syringes of saline solution and urological lubricant *Optilube*®.
5. Mepivacaína 1% vs SF 10mL **x3**
6. Mepivacaína 2% vs SF 10mL
7. SF 0,9% vs SF 0,45%
8. SF 0,9% vs Lidocaína
9. Glucosalino (Glucosa 5%+NaCl0,9%) vs Glucosalino (Glucosa 3,3%+NaCl 0,3%)
10. Glucosado 5% vs Glucosado 10% **x2**
11. Combiprasal® vs Atrovent®
12. Bupivacaína 5mg/mL vs Bupivacaína 2,5mg/mL



Sound-alike:

1. Amchafibrin vs Tranexamic acid (Trangorex).
2. Amoxicillin and clavulanate 500-750 mg.
3. Urapidil vs Eufiline.
4. Dexclorfeniramin vs dexametasone **x3**
5. AAS vs Adalat Oros (Brand name).



CONCLUSION

Sound alike and look alike errors have a high frequency, and it is a priority to work specifically on them. To work on this purpose, a multidisciplinary isoappearances group formed by a clinical pharmacist, a nurse, and two physicians has been set up on site at the ER to optimize stocks by reducing concentrations available, changing the providers so the medication appearance was different, and promoting safety culture.