Although the role of the clinical hospital pharmacist as an important part of the multidisciplinary team has been studied, little is known from the literature about the impact of pharmacy intervention (PI) on optimizing pharmacotherapy in abdominal surgery patients. In a small country so far it has not been found any such literature information.

Objectives

Main goal was to improve patient safety and clinical pharmacy while sub goals were using this evidence to implement throughout whole hospital; national improvement initiative to reduce medication errors.

Introduction

Results

The survey was conducted from 01.10.2014. to 31.03.2015. All patients older than 18 years hospitalized at the examined ward were included in study, then 539. A total of 3773 therapy forms were analyzed of which there were 57 PI. Drug interactions stage D and X were the most common type of intervention (77%) of which almost half were accepted (48%). All interventions regarding dosing interval and duplication of therapy were accepted. Acceptance rate of PI was 53%.

Discussion

Acceptance rate of PI can be attributed to a new role of hospital pharmacist in this hospital as part of healthcare team, lack of physicians time and by differences in opinion between pharmacists and doctors. Study confirmed the importance and essential role of clinical pharmacist as a part of the multidisciplinary healthcare team, especially in abdominal surgery patients. Results are consistent with a small number of clinically significant medication errors that could be prevented, but they represent a remarkable cost to the health care system and can result in serious adverse effects in patients.

Conclusion

With the knowledge based on clinical evidence, pharmacists accepted interventions by physicians can optimize pharmacotherapy and patient safety.

Keywords: medication review, acceptance by physicians, optimization of therapy, patient safety

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