ACCEPTANCE OF PHARMACEUTICAL INTERVENTIONS IN A RESUSCITATION UNIT

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WHAT WAS DONE?

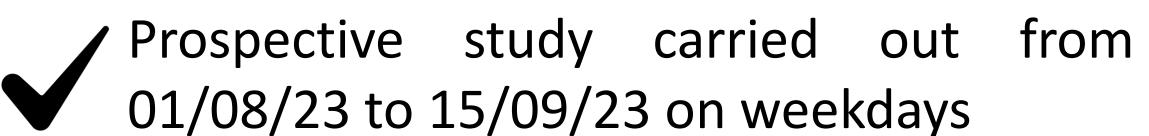
The integration of a pharmacist in the critical care unit allows optimizing pharmacotherapy, prevents medication errors in critical patients and working in a multidisciplinary methodology.

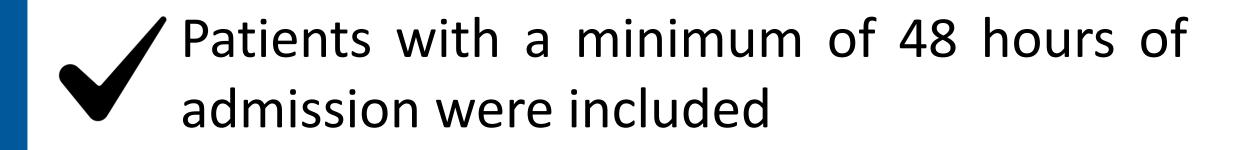
WHY WAS IT DONE?

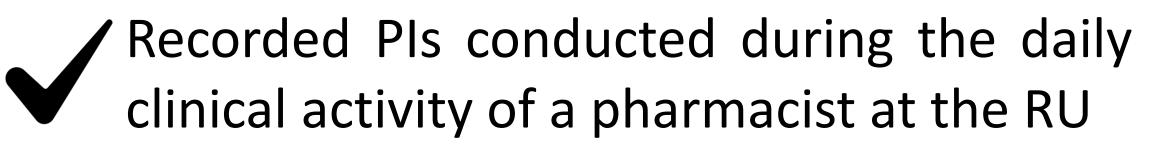
The aim of the study is to analyze pharmaceutical interventions (PI) carried out by a hospital pharmacist in a Resuscitation Unit (RU) in terms of number and degree of acceptance.

HOW WAS IT DONE?











Variables collected were: age, sex, type of PI, medication involved, acceptance of PI and day since admission.

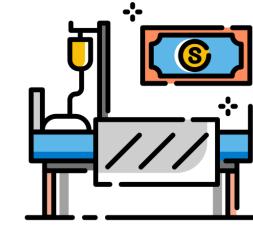


The percentage of acceptance of the PIs and activity indices:

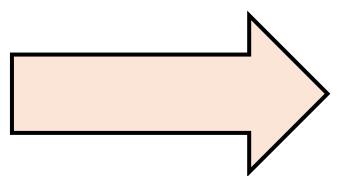
- -PI/patient.
- -PI/days
- -Day of PI respect to admission to the RU were calculated.

Descriptive analysis, mean and standard deviation (SD) were used.

WHAT HAS BEEN ACHIEVED?



80 patients were included 5.9 patients/day admitted in the RU



Age: 59.6 ± 18.4

46.3% were women (n=37) 8.9 \pm 3.0 drug prescriptions 3.8 \pm 2.0 infusions and ondemand drugs.

107 IPs were carried out.



The degree of acceptance of the IP was 92.5% (n=99).

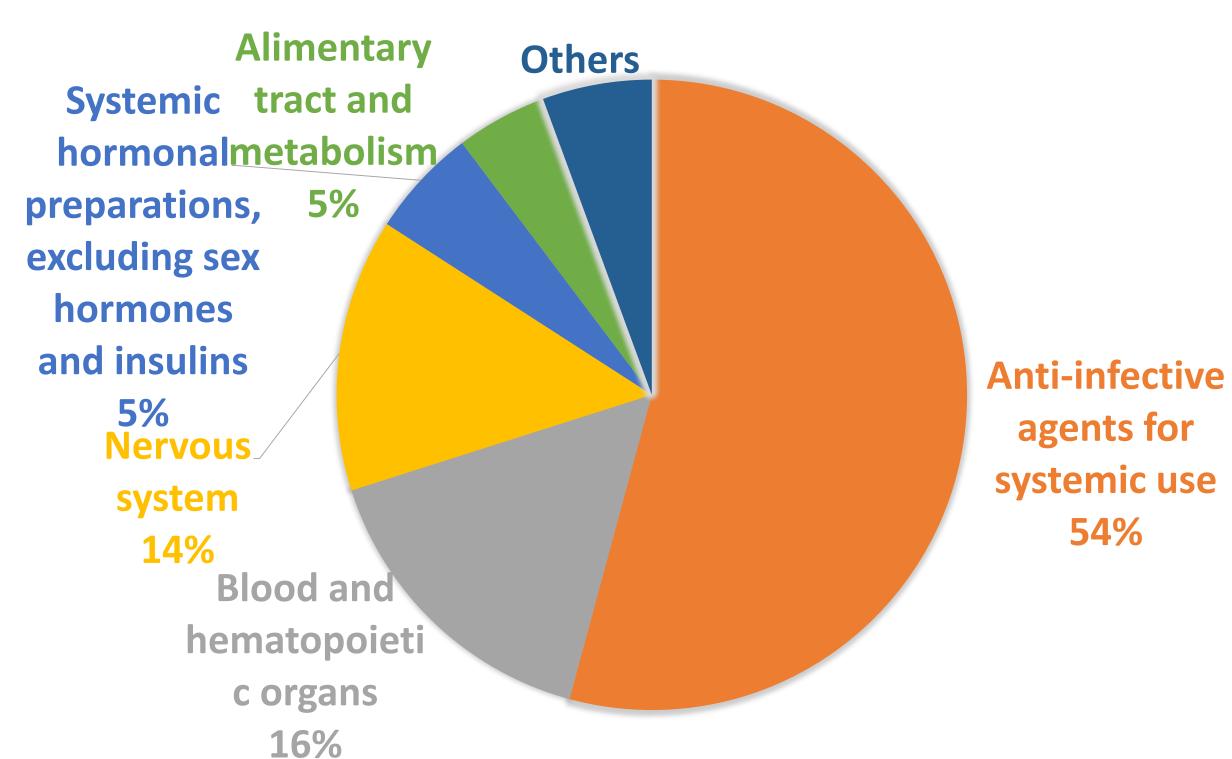
Activity indices

1.30 IP/patient

3.45 IP/day and

3.21 IP days compared to admission to the RU.

GROUPS OF DRUGS WITH IP



Pharmaceutical interventions	n=107
Adjustment of anti-infective therapy	21
Pharmacokinetic adjustment	18
Administration	17
Concilation	16
Dose adjustment by glomerular filtration rate	16
Dose adjustment	10
Duplicity	5
Others	4

WHAT NEXT?

The acceptance of PIs in the RU is very high, being greater than 90%, with an activity of more than 3 PIs per day, reinforces the integration of a hospital pharmacist in a multidisciplinary team to ensure patient safety and improve the pharmacotherapeutic profile. It is necessary to have a pharmacist integrate in the RU.





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