INTRODUCTION OF AN AUTOMATED DRUG DISPENSING SYSTEM IN A INTENSIVE CARE UNIT

Sempere Serrano P, Castellano Copa P, Cachafeiro Pin A.I, Gulín Dávila J, Pérez Rodríguez N
Servicio de Farmacia. Hospital Universitario Lucus Augusti. Lugo. Spain

Background

At January 2011 the old hospital Xeral-Calde in the city of Lugo moved to the new installations. The management new hospital decide to set up an automated system storage and dispensing in the intensive unit care.

Objective

To analyze the automated Pyxis® system dispensing implantation at the intensive care unit (ICU) hospital from economic and human resources point of view.

Material and Methods

The drug list was established to include in the Pyxis system, excluding medicines of great volume and cash trolley medication. They were located in the Pyxis® by size, use frequency and safety. A training period of 10 days was realized to the unit personnel, facilitating the integration of the Pyxis system at service and involving the whole personnel in the process. To acquisition and data capture we have used the management of Drugstore software SINFHOS, the Web Reporting associated with the Pyxis storage system and the supervision infirmary collaboration.

Results

The average monthly / patient cost in ICU comparing the periods January - March, 2010 (without Pyxis® system) and January - March, 2011 (with Pyxis® system) was reduced 20.3%. The various drugs stock has increased 11.4%, but diminishing the space for the storage in the unit. The time personnel job has increased in the pharmacy, needing about 14 weekly hours more by the nursing assistant, diminishing in ICU in average two hours in the nursing daily time job.

Conclusions

The Pyxis® system implantation in the intensive care unit hospital has constituted a step forward on both services, finding as principal advantages the decrease of costs assigned to the unit by the reduction the accumulated stock, the resulting of medicine by patient more information and the elimination of bureaucratic work to infirmary personnel in ICU, finding more time to the patient care.