## Implementation of an integrated multifaceted program to improve crushing practice on hospital wards

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#### **BACKGROUND**

Crushing tablets is an important risk factor for medication administration errors in patients with swallowing problems and feeding tubes. Information regarding patients requiring crushed medication does not routinely reach the hospital pharmacist. Measures to improve crushing practice may consist of introducing guidelines, training nurses or giving pharmacy advise.

#### **OBJECTIVE**

To describe an integrated multifaceted program using an audit and feedback strategy to improve crushing practice on hospital wards in a 500-beds general hospital.

#### **METHODS**

· clinical pharmacy project

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- pre-intervention questionnaires + disguised observations to assess nurses' knowledge and current practice
- gradual implementation of several interventions
- audit = retrospective analysis prescriptions
- feedback = educational sessions + poster

#### **RESULTS**

#### **PRESCRIPTION**

- mention "to crush" on drug prescriptions
- order enteral tube feeding using specific <u>order form</u>



### PATIENT-TAILORED SUBSTITUTIONS & ADVICES

- pharmacist provides <u>information form</u> listing substitutions & advices
- retrospective analysis of 160 prescriptions:
- · 601 drugs to crush
- 18% substituted by alternative dosage form
- 2 hazardous drugs to administer
- substitutions for same drug and patient may differ

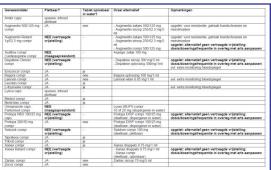
#### **ADMINISTRATION**

- oral syringes available
- test desintegration of commonly crushed tablets
- procedure "syringe method" as closed system for administration of hazardous drugs and dispersable tablets



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"SYRINGE METHOD" using oral syringes



TOP 20 of most commonly drugs "to crush"

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#### **CONCLUSIONS**

Patients in need of crushed medication may benefit from medication review by a pharmacist.

Audit and feedback provides relevant information to other caregivers to prescribe and administer medication correctly and safety.

To evaluate and sustain the impact of our interventions, the clinical pharmacist, as member of the putrition support to member will regularly.

pharmacist, as member of the nutrition support team, will regularly review drug therapy of patients on enteral tube feeding during their ward visits.

omringt u met zorg Qual Saf Health Care 2006;15:44-7, Nutr Hosp 2012;27:1309-13, Pharmacoepidemiol Drug Saf 2013;22(4):423-9