



Service Priorities and Programmes Electronic Presentations

Convention ID: 1112

Submitting author: Dr Oi Man WONG

Post title: Resident Specialist, Hong Kong Eye Hospital

Initiative to Reduce Duplicated Medication Given to SOPD Patients Referred from Primary Care Units--Pilot Study with Superficial Ocular Foreign Body Patients

MOM Wong(1,2), SKH Szeto(1,2), WY Chiu(1), TCY Chan(1,2), PPM Chan(1,2), KL Yuen(1,2), NM Lam(1,2)

1. Hong Kong Eye Hospital

2. Department of Ophthalmology and Visual Sciences, CUHK

Keywords:

ocular trauma

medication duplication

cost-saving

Introduction

Superficial foreign-body injury(FBI) patients form a significant proportion of patients attending HKEH Triage Unit(TU). The medication needed, commonly antibiotic eye-drops, were usually given by primary care units(AED, GOPD, FM clinic) before arrival at HKEH, which may not be noticed by the attending ophthalmologist at TU, giving rise to duplicated medication.

Objectives

To reduce duplicated medication given to FBI patients attending HKEH TU

Methodology

Records of consecutive patients of work-related superficial FBI attending HKEH TU during 1-Jun-15 to 30-Nov-15 were reviewed. Drug items dispensed by the primary care units and HKEH TU were recorded respectively. The rate of duplication of medication and cost of duplicated medication per patient were calculated. Re-audit is performed during 5-Dec-16 to 4-Jan-17 after implementing measures to reduce duplicated medication, including:

1. Identification of patients with existing prescription from primary care unit by HKEH TU nurse
2. Reminding patient to proactively notify the attending doctors about medication/prescription at hand, with attachment of a note to the medical record by nurse
3. Reminding doctors that prescription from any HA AED within 4 days of attendance may be dispensed at HKEH pharmacy without a new prescription

Result

Before the new measures, 17.8%(30 patients out of 169) of patients were dispensed duplicated medication from HKEH and primary care centre, with 96.7%(29 out of 30) involving antibiotics, within a median duration of 1 day(range: 0-22 days). The extra cost of duplicated medication contributed to 5.8% of the total medication cost(HKD \$284.8 out of \$4921.0). The average duplicated cost per patient was HKD\$1.7.

After implementation of the new measures, 2 out of the 29(7%) patients included received duplicated medication, with 61% reduction of the risk of duplicated medication compared to the previous group(relative risk: 0.39(p=0.17, 95% C.I. 0.10 to 1.54). The cost of duplicated medication comprised of 3.9% of the total medication cost (HKD\$30.2 out of \$772.3). Average duplicated cost per patient was HKD\$1.0.

Data collection is still ongoing for the remaining audit period.

The results demonstrated reduction of dispense of duplicated medication by arousing staff awareness and by engaging patients in the consultation process.