



One drug . . .

One error . . .

ONE LIFE.



SIMSUITE[®]
MEDICAL SIMULATION CORPORATION

Medication Administration: Patient Safety and Reduction of Preventable Errors

The MSC Medication Administration course provides a complementary solution to the quality improvement programs for all institutions striving to decrease the number of medication errors and enhance patient outcomes.

Course Objectives

At the end of this course, the participant will be able to:

- Assess their competency with medication calculations
- Describe routes and methods of medication administration
- Identify safe medication administration methods and documentation
- Outline proper orders associated with medication administration
- Identify special considerations that affect proper, safe medication administration

Course Description

This course is designed to assess the user's proficiency with medication administration. It is suitable for new registered nurses, as a competency assessment for per diem staff, or as an adjunct to ongoing JCAHO compliance for staff nurses.

The course includes the following:

- Pre-test to assess baseline knowledge
- Difference between generic and trade drug names
- JCAHO standards
- Five Rights of Medication Administration
- Medication Administration Record: Documentation
- Drug Metabolism
- Medication Administration
 - Drug forms
 - IV Administration
 - Injections
 - PO Administration
- Patient Populations and Special Considerations
- Drug Calculations
- Post-test

Benefits

- Online convenience and flexibility: available anytime, anywhere
- Self-paced learning
- Augments staff competence in medication administration
- Consistent with JCAHO standards
- Integration into Quality Improvement Program

Clinical Applicability

The U.S. Food and Drug Administration (FDA) estimates as many as 1.3 million Americans are injured by medication errors every year. The IOM report estimates that 44,000 to 98,000 people each year die from medical errors.¹ As of December 2005, medication errors ranked fourth in frequency for sentinel events according to the Joint Commission on Accreditation of Healthcare Organizations (JCAHO).

A large percentage of adverse drug events (ADEs) have serious consequences, and many of them are preventable. The ADEs identified in a study by Classen, et al., half of which were identified as preventable, added 1.91 days to the mean length of hospital stays and resulted in increased costs per stay of \$2,262.² Bates and colleagues determined that an additional 2.2 days of hospitalization were required for patients experiencing an ADE, at an added cost of \$3,244. For ADEs identified as preventable, patients stayed in the hospital an average of 4.6 days, at an average additional cost of \$5,857.³

References:

¹Institute of Medicine. *To Err is Human: Building a Safer Health System*. Washington D.C.: National Academy Press; 1999.

²Classen, David, C., Stanley, L. Pestotnik, R. Scott Evans, et Al. *Adverse Drug Events in Hospitalized Patients*. Journal of the American Medical Association 277(4): 301-06 (Jan. 22/29, 1997).

³Bates, David W., Nathan Spell, David J. Cullen, et al. *The Costs of Adverse Drug Events in Hospitalized Patients*. Journal of the American Medical Association 277(4): 307-11 (Jan. 22/29, 1997).

To schedule a training session, contact your SimSuite Clinical Educator:

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