

## Learner Feedback Questions #335

- The seminal document that alerted healthcare professionals and the public about the increase in medication errors in the U.S. in 2000 was:
  - Joint Commission Medication Safety Goals
  - IOM report "To Err Is Human"
  - IOM report "Crossing the Quality Chasm"
  - AORN "Safety Net" for Near Misses
- The best solution to date for the medication safety problem, embraced by those charged to remediate problems, has come from:
  - the American Pharmacists Association taking the lead to decrease errors
  - numerous studies suggesting HIT-technology processes improve medication safety
  - increases in malpractice claims by patients injured by medication errors
  - American Nurses Association white papers on medication errors
- Which of the following remedial efforts HAS NOT been credited with improved medication safety?
  - CPOE
  - hospital-wide, web-based education programs
  - CDS
  - barcoding
- Data from CPOE, shows the greatest decrease in medication errors has been in:
  - illegibility of medications ordered
  - missing information
  - reduction in use of inappropriate abbreviations
  - orders executed in faster time
- When CPOE is combined with CDS, besides fewer medication errors, what other benefit occurs?
  - human errors are reduced
  - product mislabeling is decreased
  - less medical expenditures
  - less use of inappropriate abbreviations
- When the "sterile cockpit" concept is in place, what intervention to improve patient safety should be in place?
  - the medication room is considered a sterile space
  - nurses are protected from distractions/interruptions when preparing or dispensing meds
  - the nurse responsible for medication administration is the only person who can communicate with pharmacy personnel
  - nurses must ask visitors to leave the patient's bedside when administering meds
- A common complaint of CPOE in a hospital system is:
  - physicians not oriented to the system
  - inability of system to always find duplicate or conflicting orders
  - nurses do not receive information that medication orders have been changed
  - physicians ordering medications who don't have privileges at hospital
- The error that can occur when a CDS system is in place is:
  - users delay actions when the system suggests another drug be administered
  - physicians can override the system command
  - the information provided by the system is not easily processed by users
  - if user does not provide complete patient data, the system cannot detect error
- The BCMA system prevents errors if "workarounds" are prevented. This can best be done by:
  - programming the nursing workflow process for the specific practice setting
  - maintaining the processes programmed and not making changes
  - checking nurses on their ability to use the system correct at regular intervals
  - having engineering check scanners for any malfunctioning weekly
- The best statement to summarize the effectiveness of HIT-enabled systems at present in decreasing medication errors is that HIT-enabled systems are:
  - regarded as a panacea to medication error reduction
  - seen as a natural and normal part of clinical practices
  - largely only in used in multihospital network systems
  - readily accepted as a safety feature by all nurses

## Evaluation

- I can describe the function of CPOE, CDS and BCMA technologies in improving medication safety.
  - strongly agree
  - agree
  - neutral
  - disagree
  - strongly disagree
- I can describe the current recommendations for therapeutic hypothermia post cardiac arrest and outline the process of treatment.
  - strongly agree
  - agree
  - neutral
  - disagree
  - strongly disagree
- I can identify the barriers to implementing an HIT system in healthcare organizations today.
  - strongly agree
  - agree
  - neutral
  - disagree
  - strongly disagree
- The objectives relate to the overall goal of the article.
  - strongly agree
  - agree
  - neutral
  - disagree
  - strongly disagree
- The article is well-written and logically organized, and defines terms adequately.
  - strongly agree
  - agree
  - neutral
  - disagree
  - strongly disagree

# Medication Safety & HIT

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## Registration/Answer Form #335

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- A B C D
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### EVALUATION

- A B C D E
- A B C D E
- A B C D E
- A B C D E
- A B C D E

How many minutes did you need to complete this CE offering?

Minutes: \_\_\_\_\_

Before June 21, 2012, complete the multiple choice questions by circling the correct answer and mail or fax to: *ADVANCE for Nurses*, Learning Scope, 2900 Horizon Dr., King of Prussia, PA 19406; 610-278-1426.

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- Director of Nursing  
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 Private Practice  
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 Program Director

Nursing School Student  
 RN  
 LPN  
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 \_\_\_\_\_

### LPN

- Manager/Supervisor  
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 Nursing Faculty  
 Private Practice  
 Staff Development  
 Staff Nurse

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