Evaluation of Reporting Accuracy for the Do Not Use Abbreviations List at VA CMOP

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Introduction

Background:

- The Veteran's Administration Consolidated Mail Outpatient Pharmacy (VA CMOP) provides prescriptions for veterans across the United States using seven highly automated facilities and together these facilities fill more than 107 million prescriptions annually
- To ensure medication safety, a Structured Query Language (SQL) query report is used to identify Do Not Use (DNU) Abbreviations from the Joint Commission for pharmacists to review at the central database level before the prescription is dispersed to an individual CMOP to fill
- When there are false positives, pharmacists are required to review the prescription and use clinical judgement to determine whether the prescription should be filled or cancelled

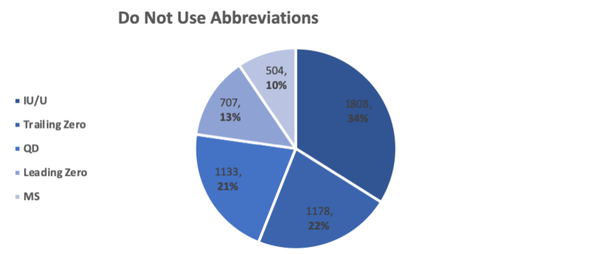
Purpose:

- To determine whether the appropriate actions were taken
- Quantify how often false positives were released for fill
- Foster recommendations to the SQL query report where appropriate to increase efficiency and optimize the pharmacists' time

Methods

- This study is a retrospective descriptive review of data
- Data was provided from the Structured Query Language (SQL) query report that identifies Do Not Use Abbreviations from the Joint Commission for pharmacists to review across all seven CMOPs
- The report provided data from January 1st, 2019 to June 30th, 2019 containing 5,763 prescriptions for pharmacist review
- The data provided was analyzed to identify false positives and to determine appropriateness of action by the query and pharmacist
- Findings were recorded to allow for recognizing the frequencies of reasons for being flagged by the query, as well as cancelled or released by the pharmacist
- Since reviewing 5,763 prescriptions is a time extensive task, the student group timed themselves reviewing 100 prescriptions to be able to correlate this to pharmacist time spent

Results



Cancelled DNU Abbreviation	Appropriate (%)	Inappropriate (%)
QD	1045 (99.8%)	2 (0.2%)
IU/U	813 (98.2%)	15 (1.8%)
Trailing Zeros	302 (99.7%)	1 (0.3%)
Leading Zeros	179 (99.4%)	1 (0.6%)
MS	0 (0%)	1 (100%)
Released DNU Abbreviation	**Appropriate (%)**	**Inappropriate (%)**
IU/U	963 (98.3%)	17 (1.7%)
Trailing Zeros	861 (98.4)	14 (1.6%)
Leading Zeros	495 (93.9%)	32 (6.1%)
MS	503 (100%)	0 (0%)
QD	86 (100%)	0 (0%)
DNU Abbreviation	**Most Common False Positive**	**Occurrence (%)**
Leading Zeros	Punctuation	493 (93%)
MS	Multiple Sclerosis	439 (87%)
IU/U	Word abbreviations	689 (70%)
Trailing Zeros	Date and Lab values	410 (47%)
QD	MEQ units	33 (38%)

Discussion

Conclusions:

- Pharmacists are spending extra time reviewing flagged prescriptions which could decrease the amount of prescriptions that are sent out in a timely manner
- Adjusting the query to become more specific may help reduce the time spent on reviewing the prescriptions and reduce the amount of logins
- Providing broad, overall education to VA medical centers, may help reduce the number of flagged prescriptions as well

Limitations:

- Does not account for cancellations or releases that may have been done outside of the particular variables that were analyzed
- Timed 12.6 seconds only takes into account how long it takes to review the script and does not include the time it takes to log into the queue
- Timed 100 prescriptions reviewed by the students was done by their respective DNU abbreviation categories only, which may not replicate the real environment of a pharmacist reviewing the DNU abbreviation report

Disclosure Statement

The Authors have nothing to disclose.

References

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