



Impact of Morbidity and Mortality Conferences on Analysis of Mortality and Critical Events in Intensive Care Practice

Submitted by Emmanuel Lemoine on Fri, 07/18/2014 - 09:41

Titre	Impact of Morbidity and Mortality Conferences on Analysis of Mortality and Critical Events in Intensive Care Practice
Type de publication	Article de revue
Auteur	Ksouri, Hatem [1], Balanant, Per-Yann [2], Tadié, Jean-Marc [3], Heraud, Guillaume [4], Abboud, Imad [5], Lerolle, Nicolas [6], Novara, Ana [7], Fagon, Jean-Yves [8], Faisy, Christophe [9]
Editeur	American Association of Critical Care Nurses
Type	Article scientifique dans une revue à comité de lecture
Année	2010
Langue	Anglais
Date	2010/01/03
Numéro	2
Pagination	135 - 145
Volume	19
Titre de la revue	American Journal of Critical Care
ISSN	1062-3264 / 1937-710X

Résumé en anglais

Background Morbidity and mortality conferences are a tool for evaluating care management, but they lack a precise format for practice in intensive care units. Objectives To evaluate the feasibility and usefulness of regular morbidity and mortality conferences specific to intensive care units for improving quality of care and patient safety. Methods For 1 year, a prospective study was conducted in an 18-bed intensive care unit. Events analyzed included deaths in the unit and 4 adverse events (unexpected cardiac arrest, unplanned extubation, reintubation within 24-48 hours after planned extubation, and readmission to the unit within 48 hours after discharge) considered potentially preventable in optimal intensive care practice. During conferences, events were collectively analyzed with the help of an external auditor to determine their severity, causality, and preventability. Results During the study period, 260 deaths and 100 adverse events involving 300 patients were analyzed. The adverse events rate was 16.6 per 1000 patient-days. Adverse events occurred more often between noon and 4 pm ($P = .001$). The conference consensus was that 6.1% of deaths and 36% of adverse events were preventable. Preventable deaths were associated with iatrogenesis ($P = .008$), human errors ($P < .001$), and failure of unit management factors or communication ($P = .003$). Three major recommendations were made concerning standardization of care or prescription and organizational management, and no similar incidents have recurred. Conclusion In addition to their educational value, regular morbidity and mortality conferences formatted for intensive care units are useful for assessing quality of care and patient safety.

URL de la notice <http://okina.univ-angers.fr/publications/ua3536> [10]

DOI 10.4037/ajcc2010590 [11]
Lien vers le document <http://dx.doi.org/10.4037/ajcc2010590> [11]

Liens

- [1] [http://okina.univ-angers.fr/publications?f\[author\]=5278](http://okina.univ-angers.fr/publications?f[author]=5278)
- [2] [http://okina.univ-angers.fr/publications?f\[author\]=5279](http://okina.univ-angers.fr/publications?f[author]=5279)
- [3] [http://okina.univ-angers.fr/publications?f\[author\]=4880](http://okina.univ-angers.fr/publications?f[author]=4880)
- [4] [http://okina.univ-angers.fr/publications?f\[author\]=5280](http://okina.univ-angers.fr/publications?f[author]=5280)
- [5] [http://okina.univ-angers.fr/publications?f\[author\]=4877](http://okina.univ-angers.fr/publications?f[author]=4877)
- [6] <http://okina.univ-angers.fr/nicolas.lerolle/publications>
- [7] [http://okina.univ-angers.fr/publications?f\[author\]=5281](http://okina.univ-angers.fr/publications?f[author]=5281)
- [8] [http://okina.univ-angers.fr/publications?f\[author\]=4882](http://okina.univ-angers.fr/publications?f[author]=4882)
- [9] [http://okina.univ-angers.fr/publications?f\[author\]=4883](http://okina.univ-angers.fr/publications?f[author]=4883)
- [10] <http://okina.univ-angers.fr/publications/ua3536>
- [11] <http://dx.doi.org/10.4037/ajcc2010590>

Publié sur *Okina* (<http://okina.univ-angers.fr>)