# QI PROJECT: Attain 100% compliance in IT pump medication reconciliation for chronic pain clinic patients by July 2023.

#### THE UNIVERSITY OF TEXAS MDAnderson Cancer Center

Making Cancer History®

Shibili Sunny APRN, FNP-C and Anumol Thomas DNP APRN FNP-C CCRN TTS Chronic Pain Management

### background

An intrathecal pump is a surgically implanted device that delivers medication directly to the fluid surrounding the spinal cord.

Absence of pain medication records on patients' home medication lists (outpatient and inpatient).

Missing pain pump medication records can lead to communication gaps between providers.

Difficulty locating IT pump information.

Pain pump medications are not being reconciled upon patient admission.

Lack of records for patients receiving their pain pump medications during admission.

Risk: Potential for opioid overuse.

Concern: Patient safety.

## Problem identified

NO IT PUMP RECORDS IN INPATIENT AND OUTPATIENT MAR

## Literature review

Importance and Impact of Medication Reconciliation

Medication reconciliation is a requirement set by accreditation bodies in the USA.

Medication reconciliation significantly impacts patient safety.

It helps avoid unintentional discrepancies that could potentially harm patients.

It reduces the number of ER visits.

Omission errors are the most frequently identified discrepancies in studies. Objective: Ensure all IT Pump medications and doses are included in the MAR (Medication Administration Record) for every patient.

What we tried to

attain

Strategy: On admission, pharmacists will reconcile IT medications to make them visible in the MAR.

Improvement Goal: Include all IT Pump medication information in both inpatient and outpatient medication profiles for all chronic pain patients.

Target Population: Patients in the MDA pain clinic with an IT Pump.

Deadline: July 2023.

## Issues with IT pump order

Issue: The medication order for the intrathecal pump is preset to "Continuous" and cannot be altered.

Solution: The order to add the medication to the patient's history has been included in the smart set, with highlighted instructions for the provider.

Note: This added order is also preset to "Continuous" and cannot be modified

Steps Taken to Address IT Pump Medication Profile Issue

Step 1: Informed medical & QI directors, Dr. Huh and Dr. Roldan, about the issue.

Step 2: Collaborated with the EPIC team to create the IT pump medication profile.

Step 3: Sought input from the Pharmacy team regarding the issue.

Step 4: Participated in a Zoom meeting with the Pharmacy and EPIC teams to discuss the issue.

Step 5: EPIC team developed the IT pump profiling module.

Step 6: Each patient's profile was updated with the pump medication in the outpatient MAR.

Step 7: Communicated through email with the internal medicine team, admitting team pharmacist, and emergency center group about the IT pump medication reconciliation.

#### Outcome

We achieved100 % compliance with IT pump medication reconciliation !!!

## IT pumps

## Medtronix



## Flowonix



#### References

- Chalil A, Staudt MD, Harland TA, Leimer EM, Bhullar R, Argoff CE. A safety review of approved intrathecal analgesics for chronic pain management. Expert Opin Drug Saf. 2021 Apr;20(4):439-451. doi: 10.1080/14740338.2021.1889513. Epub 2021 Mar 8. PMID: 33583318.
- Kwan JL, Lo L, Sampson M, Shojania KG. Medication reconciliation during transitions of care as a patient safety strategy: a systematic review. Ann Intern Med. 2013 Mar 5;158(5 Pt 2):397-403. doi: 10.7326/0003-4819-158-5-201303051-00006. PMID: 23460096.
- Mekonnen AB, Abebe TB, McLachlan AJ, Brien JA. Impact of electronic medication reconciliation interventions on medication discrepancies at hospital transitions: a systematic review and meta-analysis. BMC Med Inform Decis Mak. 2016 Aug 22;16(1):112. doi: 10.1186/s12911-016-0353-9. PMID: 27549581; PMCID: PMC4994239.
- Redmond P, Grimes TC, McDonnell R, Boland F, Hughes C, Fahey T. Impact of medication reconciliation for improving transitions of care. Cochrane Database Syst Rev. 2018 Aug 23;8(8):CD010791. doi: 10.1002/14651858.CD010791.pub2. PMID: 30136718; PMCID: PMC6513651.
- Sinvani LD, Beizer J, Akerman M, Pekmezaris R, Nouryan C, Lutsky L, Cal C, Dlugacz Y, Masick K, Wolf-Klein G. Medication reconciliation in continuum of care transitions: a moving target. J Am Med Dir Assoc. 2013 Sep;14(9):668-72. doi: 10.1016/j.jamda.2013.02.021. Epub 2013 Apr 19. PMID: 23608529.