capital on the medical spending. METHODS: Our analysis can be chiefly divided into two respects, the wealth effect of income and the depreciation effect of health capital. We use the theoretical model of Grossman’s health capital theory to analy- 
sis the relationship between income and medical expenditure. Then we use the 2 part model to empirical research the wealth effect and the depreciation effect of health capital. We also use 10.6%, whereas the patients with grade 1 had a recovery rate of 66.6% and patients with grade 3 had a recovery rate of 64.6%. CONCLUSIONS: As the severity in poison severity score increases other parameters like ventilation, intermediate syndrome and mortality also increases. There is a strong correlation between the poison severity score and outcome of the patient.

PHP40
DETECTION AND EVALUATION OF THE MEDICATION ERRORS IN DIFFERENT HOSPITALS IN PROVINCE OF THE PUNJAB, PAKISTAN
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OBJECTIVES: The study was conducted to detect and evaluate the medication errors in different hospitals in province of the Punjab, Pakistan. METHODS: A retrospec- tive study was designed involving different hospitals namely: Shaukat Khanum Memorial Cancer Hospital Lahore, Mayo Teaching Hospital Lahore, Allied Teaching Hospital Faisalabad, District Head Quarter Hospital Sargodha, and District Head Quarter Hospital Gujrat of province of the Punjab, Pakistan. Medication errors were detected from the records of patients on period from October to December 2010. Errors were categorized into Prescription error, Dispensing Error and administra- tion Error. Descriptive statistics were used to describe demographic and disease characteristics, emergency visits and frequencies were used to present the data.

RESULTS: A total of 5972 (SKMCHL), 7950 (ATH), 8249 (DHS) and 6325 (DHQ) were registered. A sample of 4500 prescription from each of the hospital was collected. The study ADR error rates were detected at Shaukat Khanum Memorial Cancer Hospital Lahore, in which administration errors were the highest (n=18). For Mayo Teaching Hospital Lahore there were 169 total errors were detected, in which prescription errors were the highest (n=60). For Faisalabad Teaching Hospital there were 186 total errors were detected, in which administration errors were the highest (n=68). For District Head Quarter Hospital Sargodha there were 252 total errors were detected, in which administration errors were the highest (n=92), and District Head Quarter Hospital Gujrat there were 266 total errors were detected, in which administration errors were the highest (n=96).

CONCLUSIONS: There were minimum numbers of medication errors observed in different hospitals, but the frequency of medication errors in private hospitals were lower then government hospitals. The roles of Pharmacists are needed to be enhanced so that these minimal errors should also be avoided.

PHP41
SURVEY FINDINGS ON EVALUATION OF TRAUMATOLOGIST’S WORKLOAD IN MONGOLIA
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OBJECTIVES: We aimed to study the workload of traumatologist’s and analyze legal documents and materials relevant to medical professionals’ workload and labor standards. A cross-sectional study model of cross sectional was performed. In order to study the workload of doctors working at Trauma center, we used organi- zation based observation and questionnaires to (1) define core job structure by (2) to evaluate by questionnaires with indicators of “Job evaluation”. METHODS: Data was collected from 108 hours of observation and assessment of documents; It was used to evaluate traumatologists’ workload in accordance with chronometric method. In general, 385 minutes, which is after the deduction of 60 minutes of lunch break and short time breaks from 480 minutes of doctors' daily working hours, should be used for work. However, the average daily working time for study participants was 454.8 minutes, which is 69.8 minutes more than the expected time. The daily workload by time is seen doctors use 75.4% of their time for health care services, 21.9% for filling initial forms, 5.4% for PH care services, and 4.2% for pre-service. Moreover, 3.7% of time was spent for downtime that was not caused by waiting for next client or nurses. CONCLUSIONS: 1. Traumatologist’s spend 71.7% of their working hours for provision of health services and 15.6% for PH care service. It indicates a shortage of time for conducting sufficient PH activities which is the main duty in the workplace. 2. Many types of initial forms are requested at the emergency health care settings indicating 21.9% of working hours affects to decrease in time for PH care services.

PHP42
EVALUATING THE IMPACT OF DRUG DISPENSING SYSTEMS ON THE SAFETY AND EFFICACY IN A SINGAPORE OUTPATIENT PHARMACY
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OBJECTIVES: Automation of pharmacy processes can help to reduce medication errors as well as improve the efficacy of the medication picking, packing and labeling processes. Since June 2012, there has been the dispensing of medications in the Singapore General Hospital Specialist Outpatient Clinic Pharmacy. This study sought to evaluate the impact of the DDS on safety and efficacy in the pharmacy. METHODS: The primary outcome of this study was the safety of the prescribed medications in terms of preventing medication errors contributed by DDS or manual picking of medications. The secondary outcome was the efficacy of the medication picking, packing and labeling process measured in terms of picking efficiency of each full time equivalent (FTE) when assigned to either the DDS or manual picking stations. Data pertaining to the pri-