Program Evaluation of Simulation on Medication Errors in the Pediatric Intensive Care

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Abstract
Problem: Medical errors are the third leading cause of death in the United States, the most common medical error being medication error. Pediatric patients are at an increased risk of medication error due to medication dosage calculation and the use of frequent high hazardous drugs.

Methods: The quality improvement (QI) project implemented the use of descriptive observational design using retro and prospective data. The data was collected over a 4-week and 4-week period by gathering data via safety and environmental management survey (SEMS).

Results: The data gathered consisted of an increase in medication errors of 150%. The data collected yielded data to promote further PDSA cycles and promote further data collection with larger sample sizes.

Implications: An improvement in patient outcomes and care by decreasing medication errors in the pediatric intensive care unit.

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