

PHARMACO-VIGILANTES

THE EVOLUTION OF AN ADVERSE DRUG REACTION SURVEILLANCE SERVICE

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FIVE STRATEGIES INTRODUCED SINCE 2012 TO ENHANCE IDENTIFICATION AND MANAGEMENT OF ADVERSE DRUG REACTIONS (ADRS)



electronic ADR reporting using a simplified form on the hospital intranet



documentation and decision support using the electronic medical record (EMR)



partnership with a new antibiotic allergy testing service

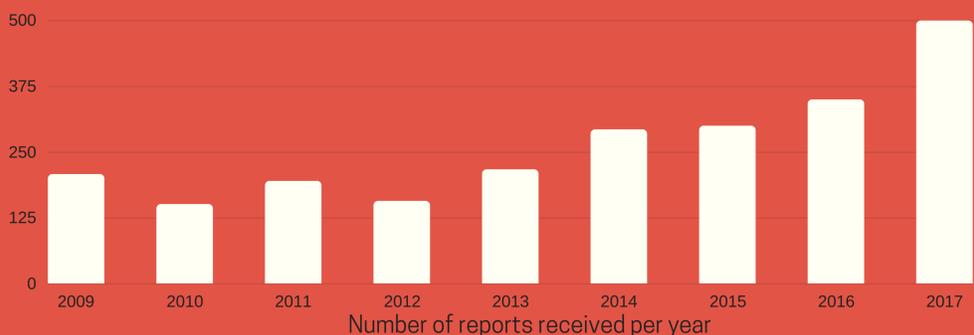


utilisation of ICD-10 codes to detect new ADRs from discharge summaries



a streamlined process for generating information for patients

SIMPLIFIED ADR REPORTING USING AN E-FORM



Electronic reporting was introduced in 2013. There has been a sustained increase in reports received per year.

EMR DECISION SUPPORT

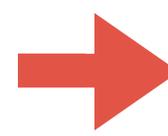
in a three-month period:

324

"Penicillin" allergy alerts

55%

of these alerts resulted in the order being cancelled



93%

of the remaining alerts were overridden on clear clinical grounds

ANTIBIOTIC ALLERGY TESTING SERVICE PARTNERSHIP

83%

of patients seen at the antibiotic allergy testing clinic had an existing allergy label removed, widening options for future antimicrobial therapy.

DISCHARGE SUMMARY SURVEILLANCE

An automated system was introduced for detecting new ADRs from discharge summaries using ICD-10 codes.

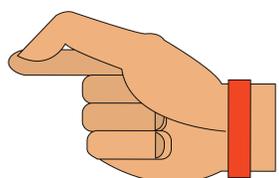
65

severe ADRs were identified in six months that would not have been detected otherwise

IMPROVED INFORMATION FOR PATIENTS



A streamlined database system for generating patient letters has evolved over time. Letter content was simplified using Plain English principles. Following the fortnightly ADR committee meeting, patient letters and follow-up documentation for up to 30 patients is now completed in two hours; this process previously took up to eight hours and carried more risk of error



Austin Health takes a proactive approach to ADR reporting. Future directions are benchmarking and institution-level pharmacovigilance