

# ELIMINATE HARM ACROSS THE BOARD

## Days Since Last ADE

### ADVERSE DRUG EVENTS (ADEs) PREVENTION:

- Identify “look-alike, sound-alike” medications and create a mechanism to reduce errors (e.g., different locations, labels, alternate packaging)
- Standardize concentrations and minimize dosing options where feasible
- Set dosing limits for insulin and narcotics
- Use low-molecular-weight heparin or other agents instead of unfractionated heparin whenever clinically appropriate
- Use alerts to avoid multiple prescriptions of narcotics/sedatives
- Require new insulin orders when patient is transitioned from parenteral to enteral nutrition
- Reduce sliding scale variation (or eliminate sliding scales)
- Minimize or eliminate pharmacist or nurse distraction during the medication fulfillment/administration process
- Use data/information from alerts and overrides to redesign standardized processes
- Coordinate meal and insulin times