



NEWS RELEASE

Medical University of South Carolina Medical Center Receives \$50,000 Award for Excellence in Medication-Use Safety from ASHP Foundation
Annual award, sponsored by Cardinal Health Foundation, encourages pharmacists to lead system-wide improvements in medication safety

Anaheim, Calif. (Dec. 6, 2010) — The American Society of Health-System Pharmacists (ASHP) Research and Education Foundation announced last night that the Medical University of South Carolina (MUSC) Medical Center in Charleston is the recipient of the 2010 Award for Excellence in Medication-Use Safety. The award, sponsored by the Cardinal Health Foundation, is the only national honor that recognizes a pharmacist-led multidisciplinary team for implementing significant institution-wide improvements in medication safety.

At a ceremony held during the 2010 ASHP Midyear Clinical Meeting in Anaheim, Calif., MUSC Medical Center received \$50,000 to further promote medication-use safety. Two award finalists, Lancaster General Health in Lancaster, Pa., and Kingsbrook Jewish Medical Center in Brooklyn, N.Y., received awards of \$10,000 each.

“In administering this awards program, the ASHP Foundation seeks to share the success stories of the recipient and finalists so health professionals and health care executives across the country can benefit and learn from their experiences,” said Stephen J. Allen, ASHP Foundation executive vice president. “The primary goal of this program is to provide opportunities for others to improve the quality and safety of medication management.”

2010 Award Recipient: [Medical University of South Carolina Medical Center](#)
Medical University of South Carolina (MUSC) Medical Center’s winning medication safety initiative focused on optimizing medication use and outcomes in kidney transplant patients. These transplant patients are on complex medication regimens at the time of their hospital admission. Following transplant, their medications are completely altered as new agents are added to prevent organ rejection and infections.

At MUSC Medical Center, patients have a relatively short hospitalization following kidney transplant. However, data showed that 29 percent of patients had a prolonged hospitalization, and 10 to 15 percent of patients were readmitted at 7, 14 and 30 days.

A multidisciplinary team – which included pharmacists, physicians, nurses, other health care professionals and hospital executives – determined that medication management played a key role in both the delayed discharges and readmissions for patients who had a kidney transplant.

Over an 18-month period, MUSC implemented a multi-step initiative to decrease hospital length of stay and preventable readmissions for these patients while optimizing patient and transplanted organ outcomes. They revised kidney transplant protocols, established a Diabetes Management Service to manage inpatient and outpatient glucose control and implemented intensive patient and caregiver education before and after discharge. They also developed a new process to reconcile medications used before and after transplant and streamlined the way they provide home medications to patients.

As a result, MUSC experienced a 40-percent reduction in medication errors and adverse drug events, a 25-percent reduction in acute rejection rates and a 10-percent decrease in infection rates. MUSC also reduced delayed discharges by 14 percent and 7-day readmission rates by 50 percent.

MUSC's initiative demonstrates that a systematic and team-based quality improvement process focused on a high-risk patient population can improve quality of care and patient outcomes.

2010 Finalist: [Lancaster General Health](#)

Lancaster General Health focused on improving medication safety by implementing a system to increase connectivity between computer programs and devices used to order and administer intravenous (IV) medications. Intelligent infusion devices, barcode medication administration and electronic medical records were integrated into an IV interoperability system. This interconnected system enabled pharmacists to review physician orders for IV medications and enter them into the pharmacy information system. The pharmacy information system then communicates with the barcode system at the patient's bedside to ensure the "five rights" (crucial information that must be accurate to avoid an error): patient, medication, dose, route and time. Once this information is confirmed, the barcode system then communicates with the pump that infuses the medication into the patient.

Over a 3-year period, Lancaster General Health implemented this system in 392 of its inpatient beds. The system has led to a more than 70-percent decrease in situations where an error could occur during programming of the infusion pump. It has also resulted in a 32-percent reduction in adverse drug events involving heparin and pump programming.

2010 Finalist: [Kingsbrook Jewish Medical Center](#)

Kingsbrook Jewish Medical Center created a clinical pharmacist-led multidisciplinary program for weaning patients from ventilators. Prior to implementation of this program, patients at Kingsbrook Jewish Medical Center who required mechanical ventilators remained on these devices for an average of 11 days, and only 14 percent of patients were

successfully weaned from ventilators. Kingsbrook Jewish Medical Center's pulmonary, pharmacy, respiratory therapy and nursing departments implemented a hospital-wide, multidisciplinary approach to weaning patients from ventilators, based on national guidelines. As a result, the number of patients whose treatment adhered to national guidelines increased from 63.7 percent to 91.7 percent. From 2005 to 2009, the number of cases of ventilator-associated pneumonia decreased by 70 percent. Successful ventilator weaning rates also increased from 14 percent in 2005 to 21 percent in 2009. The length of time patients spent on a ventilator decreased from 11.1 days in 2005 to 9.4 days in 2009.

"Medication mistakes take a significant human and financial toll – injuring 1.5 million and costing \$3.5 billion annually," said Dianne Radigan, director of community relations for Cardinal Health. "This year's ASHP Foundation Award of Excellence honorees again prove that pharmacists can play a critical role in working with other health care providers to improve the overall quality and cost effectiveness of our nation's health care system."

The award recipient and finalists were chosen by an interdisciplinary panel of reviewers who evaluated all applicants. Finalists were chosen based on the initiative's scope; planning and implementation; measurable outcomes and impact; innovation and applicability to other health care organizations. Judges visited each finalist's site before selecting the award recipient. Selection panel members are:

Hedy Cohen, R.N., B.S.N., M.S.
Medication Safety Consultant
Institute for Safe Medication Practices
Horsham, Pa.

Kathy Crea, Pharm.D., BCPS
Patient Safety Officer
Riverside Methodist Hospital - OhioHealth
Columbus, Ohio

Sherry Danello, R.N., M.S.N., CNAA
Vice President, Patient Care Services/Chief Nursing Officer for System
St. Joseph's/Candler Health System
Savannah, Ga.

Daniel Degnan, Pharm.D., M.S., CPHQ
Medication Safety Officer
Community Health Network
Indianapolis, Ind.

Andrew S. Dunn, M.D., FACP
Professor of Medicine
Acting Chief, Division of Hospital Medicine

Medical Director, ADS Medicine
Department of Medicine
Mount Sinai School of Medicine
New York, N.Y.

E. Robert Feroli, Jr., Pharm.D., FASHP
Medication Safety Officer
Johns Hopkins Hospital
Baltimore, Md.

Related Resources

The Award for Excellence in Medication-Use Safety was established in 2004 to recognize on a national level pharmacy professionals who have assumed a leadership role in promoting safety in the medication-use process. For more information regarding this award, please visit our Web site at www.excellenceinmeduse.org.

About the ASHP Research and Education Foundation

The ASHP Research and Education Foundation was established in 1968 by the American Society of Health-System Pharmacists as a nonprofit, tax-exempt organization. Its mission is to improve the health and well-being of patients in hospitals and health systems through appropriate, safe and effective medication use. The Foundation conducts leadership, education and research activities that foster the coordination of interdisciplinary medication management leading to optimal patient outcomes. Emphasis is given to programs that will have a major impact on advancing pharmacy practice in hospitals and health systems, thereby improving public health. To learn more about the ASHP Foundation, visit www.ashpfoundation.org.

About the Cardinal Health Foundation

With the support of Cardinal Health's (NYSE:CAH) 30,000 employees worldwide, the Cardinal Health Foundation supports local, national and international programs that improve health care quality and build healthy communities. The Cardinal Health Foundation also offers grants to encourage employee service to the community and works through international agencies to donate much-needed medical supplies and funding to those who need them in times of disaster. To learn more, visit CardinalHealth.com/community.

Contact Information

Daniel J. Cobaugh, Pharm.D.
Vice President, ASHP Foundation
301-664-8612
foundation@ashp.org

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Bethany Coulter
Director of Communications & Events, ASHP Foundation
301-664-8795
bcoulter@ashp.org

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