



Licking Memorial Health Systems

1320 West Main Street
Newark, OH 43055

Please take a few minutes to read this month's report on **Patient Safety**.

You'll soon discover why Licking Memorial Hospital is measurably different ... for your health!

Visit us at www.LMHealth.org

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Community Report Card

Licking Memorial Health Systems

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A Community Report on Patient Safety

Health tips

Medications can be harmful, even deadly, if not taken properly. These tips will help increase your medication safety:

- Follow your physician's orders, and always ask any questions you have about medications.
- Keep a list of all prescribed drugs, non-prescription medicines, herbal supplements, home remedies and medical foods. Also list any medicines you cannot take due to allergic reactions.
- Take your medication list with you to all physician and hospital visits. Make sure family members know where to find the list at home.

Patient Safety – How do we compare?

At Licking Memorial Hospital (LMH), we take pride in the care we provide. To monitor the quality of that care, we track specific quality measures and compare them to benchmark measures. Then, we publish them so you can draw your own conclusions regarding your health care choices.

1 The Institute of Medicine published a report in 2000 that highlighted the stunning effects of medication errors. The report set forth a national agenda for reducing errors and improving patient safety by designing a safer health system. Medication Reconciliation is the process of obtaining a complete and accurate list of each patient’s current home medications – including name, dosage, frequency and route, and comparing the physician’s admission, transfer, and/or discharge orders to that list. Discrepancies are brought to the attention of the prescribing physician and, if appropriate, changes are made to the orders. Although LMH’s medication error rate is significantly better than the national benchmark, we make continuous efforts to improve the process. LMH dispensed more than 4 million doses of medication in 2007.

	LMH 2004	LMH 2005	LMH 2006	National ⁽¹⁾
% medication errors	0.016%	0.023%	0.018%	0.310%

2 Protecting patients from hospital-acquired infections is a primary patient safety goal. LMH has an ongoing program to prevent and treat infections in patients. Per the Centers for Disease Control and Prevention recommendations, LMH tracks high-risk patients, including those with an increased exposure to infection due to the presence of an invasive device, such as a ventilator, catheter or central venous line.

	LMH 2004	LMH 2005	LMH 2006	National ⁽²⁾
Infection rate for pneumonia in ICU patients on ventilators	2.5	2.4	0	5.1
Urinary tract infection rate for ICU patients with urinary catheters	5.5	4.2	2.6	3.1
Bloodstream infection rate for ICU patients with central venous catheters	3.3	0	0	3.1

3 LMH conducts a comprehensive assessment to determine if a patient is at risk for a fall at admission and during the Hospital stay. Personal alarms and bed sensors help alert staff to a potential fall.

	LMH 2004	LMH 2005	LMH 2006	Goal
% of inpatient falls per 100 patient days	0.24%	0.16%	0.21%	less than .30%

4 Coumadin is a blood thinner (anticoagulant) used to help prevent and treat blood clots. The most common side effect of Coumadin is bleeding in any tissue or organ. It is important for patients to have their blood tested regularly. The blood test, called Protime (PT) and International Normalized Ratio (INR), helps the physician determine how fast the blood is clotting and whether the dosage of Coumadin should change. The testing is very important and must be accomplished at recommended periodic intervals in order to keep the PT/INR result in the best and safest range for the medical condition.

	LMHP 2005	LMHP 2006	Goal
% LMHP patients on Coumadin with PT/INR in last two months	95%	92%	greater than 90%

5 Metformin (trade name Glucophage) is a medication that is used in the treatment of diabetes mellitus and polycystic ovarian disease. It is an effective medication for treatment of both of these unrelated disease processes but must be used cautiously in patients with compromised renal (kidney) function. It is recommended to monitor renal function prior to initiation of therapy and at least annually thereafter. Licking Memorial Health Professionals has adopted this recommendation as a safety measure and tracks all patients on this medication for initiation and follow-up lab testing.

% LMHP patients on Metformin with creatinine within last year	LMHP 2005 N/A	LMHP 2006 95%	Goal greater than 90%
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Data Footnotes:

(1) *To Err is Human – Building a Safer Health System*, National Academy Press, Washington D.C., 2000.

(2) *CDC National Nosocomial Infections Surveillance System pooled median (ICU only) from January 1992 through June 2004*, published December 2004.

Patient safety begins at home

Emergency medical technicians can tell you – even if you can usually recite the precise names of your medications from memory, when emergency strikes, you may not be able to tell responders the information they need to know. That lack of information could mean the difference between life and death.

Licking Memorial Emergency Medical Squad Coordinator Jim Glover said, “The biggest problem is when we respond to a call in a home, and the patient has 10 or 12 prescription bottles on the table. The family members are so rattled that they can’t remember which medicines that patient took that day, or where to find the list. Having that list of medications and allergies can be very critical to the patient’s outcome. It also allows us to call in that information to the Emergency staff even before we get there.”



Because patients often cannot tell about their medications and allergies in an emergency, it is recommended that they keep a current list at home and make sure family members know where to find it.

regular medication reconciliation practices. LMH Emergency Medicine Physician Jeff Bare, D.O., said patients should be prepared to list their medications every time they see a doctor. “Our goal is to review the medications for every patient at every encounter,” he said. “Patients need to be proactive about their care and keep us informed about what they’re taking at home. “We strongly urge patients of all ages to keep a written list of the medications they take and to update the list frequently.”

The IHI urges each person to keep an accurate list of currently used prescription medications, over-the-counter medications and supplements. This list should be taken to all doctors’ appointments and visits to the Hospital, and family members should be advised where the list is kept at home in case of an emergency.

Licking Memorial Health Systems participates in an initiative spearheaded by the Institute for Healthcare Improvement (IHI) called Five Million Lives. Under the program, nearly 3,200 American hospitals resolve to avoid 5 million incidents of patient harm by following several basic interventions, one of which is implementing medication reconciliation. Medication reconciliation makes sure the patient is receiving the right medicines at the right times and at the right dosages. It also checks for possible adverse drug interactions.

Licking Memorial Hospital (LMH) and the Licking Memorial Health Professionals offices have begun

Quick Response from LMH Staff Saves Patient

Forty-one-year-old Charles Mannah of Glenford, Ohio, faced some difficult obstacles in 2007, but thanks to a well-trained response from Licking Memorial Hospital (LMH) staff, a potentially-fatal allergic reaction was quickly resolved. Charles benefited from LMH procedures that were adopted as part of the 100k Lives Campaign in 2005. In that initiative, LMH outlined protocols to be used if a patient's condition suddenly worsened.



Charles Mannah enjoys his backyard pond along with Ronda and two of their children, Ashley and Nicholas.

In June 2007, Charles visited his family physician, Megan Miller, D.O., of Licking Memorial Family Practice – Hebron for possible pneumonia. Up until then, Charles, a concrete worker and heavy equipment operator, had been physically active, working 60 to 70 hours each week. “I didn’t really start feeling bad – just run down,” Charles remembered. “I had smoked for about 24 years, but when I left Dr. Miller’s office, I quit smoking and have not even wanted one since.”

Charles then came to LMH for x-rays that confirmed Dr. Miller’s pneumonia diagnosis; however, the test also unfortunately revealed stage III-B lung cancer. “I really had no idea that I had cancer since I hadn’t been feeling bad. I guess maybe the pneumonia was just covering the pain,” he said.

The first week of radiation and chemotherapy at Licking Memorial Oncology went well for Charles under the care of LMH Oncologist Jacqueline Jones, M.D. His body tolerated both treatments well. As Charles rested at home on disability, Ronda and their four children, Nicholas, Ivey, Ashley and Levi, were encouraged to see him as upbeat and optimistic as ever. However, during the second week of treatment, Charles had a near miss. With Ronda by his side, Charles was connected to a drip line of Taxol, the chemotherapy drug that would target the cancer. Although he had tolerated the same drug well the previous week, it was a different scenario this time. “As soon as the drip started, I could tell something was wrong,” he explained. “I had been watching television, and suddenly I saw two televisions. I knew that wasn’t right.” Ronda alerted the oncology nurse who sent for an emergency supply “red box.” Just seconds later, Charles passed out. Fortunately for him, LMH’s emergency response had kicked into action.

“Everyone was there immediately,” Ronda said in disbelief. “They must have come out of the walls because there were 15 or 20 people there in no time at all. I saw Dr. Jones actually run into the room to respond.”

“I was probably unconscious for only about a minute,” Charles said. “When I came to, the first thing I saw was Dr. Jones kneeling in front of me. That was a joy!” He said he was also aware of the other attention he was receiving. “I could hear

everything. I could see people on my left, and could tell there was a whole line of people behind me and to my right. I felt very relaxed and safe to know that I was in such good hands.”

“I was panicking,” Ronda admitted. “The nurses escorted me to another room so that the staff could work, and I could calm down. Then as soon as they could, they brought me back into the room with Charles. Every step of the way, they talked to us and helped us to understand everything. It was awesome. They are such a great staff – I can’t say enough about them!”

It was determined that Charles had suffered an allergic reaction to paclitaxel, a component in Taxol extracted from the bark of the Pacific yew tree. Dr. Jones adjusted the chemotherapy regimen, and he was able to continue with only one week’s interruption. “I know this may sound crazy, but once they checked me out, I felt like nothing had really happened. I could continue with my life and was full of energy,” Charles said. “The situation could have been a lot worse, but because everyone acted so quickly, I felt pretty good when I went home that day.”

The 100k Lives Campaign and the 5 Million Lives Campaign are both initiatives supported by the national Institute for Healthcare Improvement (IHI). LMH is one of more than 3,200 hospitals in the U.S. to voluntarily subscribe to the advanced practice guidelines. The IHI estimates the medical interventions implemented through the programs saved 122,300 lives in the first three years.