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## Improving Patient Safety Through e-Prescribing

*The Everett Clinic, Everett, Washington*

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The Everett Clinic wanted to evaluate the impact of e-prescribing on medication safety and conducted a pilot study to determine if handwritten prescriptions led to clinical errors and if a computerized e-prescribing system would eliminate these errors. The pilot found that very few written prescriptions led to patient harm due to the checks and balances already built into the system, however, potential prescribing errors occurred frequently. The pilot also found that monitoring labs related to medications offer more potential for reducing harmful errors. Luckily few of these errors touch the patient. The pilot indicated that the computerized physician order-entry (CPOE) systems have potential for creating efficiencies, decrease administrative costs and increasing safety.

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### *Excerpted from:*

#### ***CPOE and Patient Safety***

By Richard Pizzi, Contributing Editor, August 31, 2007

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“EVERETT, WA – Prescription errors have long been considered a primary cause of adverse drug reactions in patients, which is why computerized physician order entry systems hold such appeal to hospitals and physician practices looking to increase patient safety.

When Washington State’s Everett Clinic, a 16-site practice with 250 providers, wanted to evaluate the impact of e-prescribing on medication safety, it turned to scholars at the Pharmaceutical Outcomes Research and Policy program in the University of Washington’s Department of Pharmacy.

Beth Devine, a research associate professor in the pharmacy department, helped design a pilot study at Everett to determine if handwritten prescriptions led to clinical errors and whether an e-prescribing system would eliminate them.

Somewhat surprisingly, Devine and her colleagues found that only 0.2 percent of the errors in written prescriptions actually led to patient harm. Potential prescribing errors occurred frequently, but few ever reached the patient. . . .”

### FOR MORE INFORMATION:

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