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• 計畫英文名稱	The Implementation of Risk Management on Drug Safety Information System		
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• 中文關鍵字	用藥風險控管；病人安全；臨床警示		
• 英文關鍵字	medication safety；patient safety；clinical reminder		
• 中文摘要	<p>造成上市後藥物使用風險最大的因素之一即為用藥不當所產生之不良事件，雖然藥物不良事件導致死亡或嚴重傷害之案件並不常發生，然而在醫療處置上最多也是最終的方式是藥物治療，因此因藥物治療所導致的醫療疏失也層出不窮，其中又以醫囑的開立所產生的錯誤較為嚴重。本研究藥物風險控管機制針對台北市 747 床醫學中心，整合用藥安全知識庫，電腦醫令系統以及健保 IC 卡，以重複用藥，懷孕用藥分級，最大劑量/天數警示加以介入，並設計用藥資料倉儲方法回溯性評估。結果顯示在同科處方部分共影響 47.46%醫師行為，跨科處方部分影響 41.19%的醫師行為；開立 C/D/X 級用藥於孕婦病人比例下降 44.44%，共影響 49.14%醫師行為；最大劑量/天數警示則影響 57.7%醫師行為；本研究也同時發現，藥品交互作用成效不彰，僅影響 2%的醫師行為改變。本研究結果顯示重複用藥/懷孕用藥分級/最大劑量天數警示效果彰顯，可擴大宣導，另外，整合健保 IC 卡介入管控藥物風險機制可彌補缺乏電子病歷交換基礎建設之不足，最後，由於醫療院所自行建立用藥安全知識庫成本效益不符，難以推廣，建議衛生署採購藥品知識庫提供醫院使用。</p>		
• 英文摘要	<p>Medication-related errors occur frequently in hospitals; not all result in actual harm, but those that do are costly. Medication errors have the potential to increase as a major contributor to avoidable morbidity and mortality as new medications are introduced for a wider range of indications. This research implemented reminder system on computerized physician order entry system based on medication safety knowledge system and health smart card. The main targets of this research are reducing duplicated prescription, prescription with pregnancy risk classification C/D/X on pregnant woman, maximal dosage or days exceeded. The retrospective studies were also conducted to evaluate the before-after performance. The result shows the use of a computerized reminder resulted in a change of duplicated prescription on current visit by 47.46% and 41.19% on cross-departmental visits, and change in exceeded days or dosage by</p>		

57.7%. Integration of computerized reminder and health smart card resulted in a decrease in the C/D/X risk classification by 44.44% and change by 49.14%. However, there is only 2% of change by the computerized drug-drug-interaction reminder. Integration of remaindering system, computerized physician order entry, and health smart card is a powerful and effective way for improving physician prescribing practices. However, better resources are needed from government to support integration of health smart card and duplicated prescription and more medication safety practice.