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Quality Improvement:

A Multi-Disciplinary Initiative in Solid Organ Transplant

By Suzanne Reed, RN, BSN, CPTC, CCTC

It is estimated that 44,000 to 98,000 people die annually in the United States from healthcare associated mistakes. Many of these deaths are the result of medication errors, prompting National Patient Safety Goal # 8 which demands the accurate completion of medication reconciliation across the continuum of care. Research studies have shown that medication errors in the transplant setting are common and often lead to significant adverse events, including hospitalizations and failed allografts. Compliance can be especially challenging in this setting since patients must comply with complex medication regimens.

In response to this challenge, the UCSD Center for Transplantation added transplant pharmacists to the team. They, in turn, implemented MedActionPlan™, first in the abdominal transplant setting and then expanding to the cardiothoracic programs. It is utilized in both the inpatient and outpatient settings for patient education. MedActionPlan™ is a printable medication list with pictures, exact timetables for taking medications, as well as the purpose for each. The addition of the transplant pharmacists has improved the safety and quality of care for our transplant patients. The following table summarizes some additional benefits.



Modest estimate of pills per day for a solid organ transplant patient.

| Take These Medications | | At These Times | | | | | |
|---|---|---------------------|----------------------|-----|-----|---------------------|----------------------|
| | | 7am | 9am | 1pm | 5pm | 8pm | 9pm |
|  | Prograf® (Tacrolimus) 1mg Prevents rejection. **EMPTY STOMACH = Take 1 hr before food of 2 hrs after food** **Take after morning blood test drawn** | 1 Capsule | | | | 1 Capsule | |
|  | Cellcept® (Mycophenolate mofetil) 250mg Prevents rejection | | 4 Capsules | | | | 4 Capsules |
|  | Prednisone 5mg Prevents rejection | | 7 Tablets | | | | |
|  | Sulfamethoxazole; Trimethoprim SS = 400mg/80mg Treats/prevents bacterial infections *REPORT RASH* | | | | | | 1 Tablet |
|  | Valcyte® (Valganciclovir Hydrochloride)* 450mg Treats/prevents viral infections | | 2 Tablets | | | | |
|  | Fluconazole 100mg Treats/prevents fungal infections | | 1 Tablet | | | | |
|  | Famotidine 20mg Treats/prevents stomach ulcer/heartburn | | | | | | 1 Tablet |
|  | Furosemide 20mg water pill | | 1 Tablet | | | | |
|  | Metoprolol Succinate 25mg Controls blood pressure | | 1 Tablet | | | | 1 Tablet |

In order to evaluate the impact of these practice changes, we developed a brief anonymous questionnaire regarding the MedActionPlan™, the addition of the pharmacist, beliefs related to medications and medication adherence for our transplant patients. We hope that the results of this survey will provide evidence that our initiatives have made a positive impact on patient care and compliance with medications.



Suzanne Reed, RN, BSN, CPTC, CCTC received her BSN at the University of Texas, Medical Branch, in Galveston, Texas. She began her career in transplant as a procurement coordinator for LifeGift in Houston and eventually became a Supervisor of Organ Recovery. She left LifeGift to become a Senior Research Nurse in Organ Transplantation at the University of Texas and then a Transplant Science Liaison for Wyeth Pharmaceuticals.

She joined the recipient side in 2003 as a post transplant Kidney and Pancreas Transplant Coordinator at UCLA. Moving to the San Diego area in December 2004, she joined the UC San Diego transplant team as a Heart and Lung Transplant Coordinator. Suzanne was Transplant Coordinator of the Year in 2008.

MedActionPlan™

| Initiative | Action | Benefits |
|--|---|--|
| MedActionPlan™ | Pharmacist inputs initial medication information into the MedActionPlan™ data base. | <ul style="list-style-type: none"> Medication Reconciliation requirements met On-line access to up-dated medication list for transplant team members and patients Printable medication list with color pictures, exact timetables and purpose of each medication Available in English or Spanish Facilitates patient teaching Easily up-dated, no more hand writing of all of the medications Printable daily log pages Helpful reminder on cover page including transplant center contact information |
| Patient Education | Transplant Pharmacist provides post transplant medication education prior to discharge from the hospital and in the out-patient clinic setting. | <ul style="list-style-type: none"> Post transplant teaching is more comprehensive and multi-disciplinary Resource for transplant specific questions (ex. drug interactions, drug substitutions, generic equivalence) |
| Improved Service from Hospital Pharmacy | Transplant Pharmacist is liaison for transplant patients. | <ul style="list-style-type: none"> Able to track compliance more easily when prescriptions are filled at the UCSD Medical Center. Facilitates insurance authorizations that outside pharmacies may refuse to obtain. Manages prescription issues during clinic visits. |
| Improved Communication and Team Synergy | Pharmacist manages patients in the in-patient and out-patient setting at the UCSD Medical Center. | <ul style="list-style-type: none"> Each team member now more aware of resources and services the other team members can provide. Pharmacist consulted more regularly regarding medication related side effects or issues. |