

Potential and True Adverse Drug Event Reporting Logic

MEDICATION RELATED PROBLEM (MRP)

Appropriateness and Effectiveness

1. Untreated medical problem
2. Drug dosing not adequate for treatment goals (dose, interval, or duration)
3. Treatment not optimal based on current evidence / guidelines
4. Monitoring standards not being followed

Safety (pADE / ADE)

5. Drug dosing excessive for treatment goals (dose, interval, or duration)
6. Incomplete / improper directions
7. No indication for medication prescribed
8. Polypharmacy (Rx not needed) / duplication
9. Contraindication
10. Adverse drug reaction (ADR)
11. Allergy
12. Drug interaction
13. Lab/diagnostic test indicated, not ordered
14. Abnormal lab result not addressed
15. Pharmacy / dispensing error
16. Medication overuse or misuse
17. Dose discrepancy between patient use & prescribed therapy
18. Using expired medication

Nonadherence and Patient Variables

19. Medication underuse / poor adherence
20. Dosage form is not reasonable for patient
21. Inadequate patient self-management of lifestyle and other non-drug variables
22. Patient dissatisfied or refuses treatment, No rational reason given

Miscellaneous

23. Drug not available in prescribed strength
24. Inadequate refills between scheduled visits
25. Nonformulary / not cost effective drug choice
26. Illegible prescription
27. No follow-up appointment with PCP
28. Other

ADE / pADE CLASSIFICATION

Potential Adverse Drug Event (pADE)

- A. No med error / event, but potential for ADE identified
- B. Med error/event DID NOT reach patient
- C. Med error/event reached patient, but no harm
- D. Med error/event reached patient, monitoring or intervention required to confirm no harm

Adverse Drug Event (ADE)

- E. Event occurred, resulting in temporary harm and requiring intervention
- F. Event occurred, resulting in temporary harm and requiring hospitalization
- G. Event occurred, resulted in permanent harm / disability
- H. Event occurred, life-threatening
- I. Event occurred, resulted in death

pADE SEVERITY RATING

- i. Potential for minimal (would require patient self management) or no harm
- ii. Potential for moderate harm (would require healthcare professional intervention or hospitalization to resolve)
- iii. Potential for severe harm (permanent disability or death)

ACTION / INTERVENTION

101. DC drug(s)
102. Substitute drug(s)
103. Add drug(s)
104. Change dose/dose interval
105. Change duration of tx / qty
106. Change PRN to schedule
107. Change schedule to PRN
108. Order lab / diagnostic test
109. Educate patient
110. Refer to other service
111. Clarify Rx
112. Substitute dosage form
113. Make appt w/ provider
114. Provide Rx compliance box
115. Other

Adverse Drug Event (ADE): an injury resulting from the use of a drug	Examples of ADEs include: hypoglycemia due to diabetes medications; thrush due to inhaled corticosteroids; dizziness due to antihypertensives; INR out of range and patient has bleed or clot; patient has allergic reaction due to wrong drug prescribed; drug-drug interaction causes patient to have CNS side effects
Potential Adverse Drug Event (pADE): an event that was identified and avoided with appropriate interventions before affecting the patient	Examples of pADEs include: duplication of therapy; omission of therapy; incorrect dose; wrong drug/patient/route/time/ dosage form/technique; drug-drug interaction; inappropriate medication prescribed for indication

Adapted From: (1) From Patient-Centered Primary Care Collaborative (<http://www.pcpcc.net/files/medmanagepub.pdf>); (2) From NCC MERP (<http://www.nccmerp.org/medErrorCatIndex.html>); (3) From Medicare Nursing Home Levels of Harm categories, <http://www.medicare.gov/NHCompare/static/related/incdrawlevelofharm.asp?language=English&version=default> Steven Chen, PharmD, University of Southern California School of Pharmacy