

# Impact of pharmaceutical validation on prescribing errors in a Neonatal Intensive Care Unit.

<b>Submission date</b> 18/11/2023	<b>Recruitment status</b> No longer recruiting	<input type="checkbox"/> Prospectively registered
<b>Registration date</b> 21/11/2023	<b>Overall study status</b> Completed	<input type="checkbox"/> Protocol
<b>Last Edited</b> 21/11/2023	<b>Condition category</b> Pregnancy and Childbirth	<input type="checkbox"/> Statistical analysis plan
		<input type="checkbox"/> Results
		<input type="checkbox"/> Individual participant data
		<input type="checkbox"/> Record updated in last year

## Plain English summary of protocol

### Background and study aims

Patients admitted to Neonatal Intensive Care Units (NICU) are up to eight times more at risk of medication errors than patients admitted to adult Intensive Care Units. Prescribing errors account for up to 74% of medication errors. Because of this, we have designed a project to improve the quality of care in order to reduce the number of prescription errors that reach the patient.

### Who can participate?

This study is open to all newborns admitted to the intensive care unit.

### What does the study involve?

We have designed a study to improve the quality of care in order to reduce medication errors in neonatal patients admitted to the intensive care unit. During this study, a clinical pharmacist will carry out a review of the treatments prescribed in the electronic prescription prior to the administration of the medication.

### What are the possible benefits and risks of participating?

As this is a quality improvement project, patients can benefit from the improvement that a review of their treatment by a pharmacist can bring, without any risk.

### Where is the study run from?

Hospital 12 de Octubre (Spain)

### When is the study starting and how long is it expected to run for?

June 2021 to December 2022

### Who is funding the study?

Hospital 12 de Octubre (Spain)

Who is the main contact?

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## Contact information

### Type(s)

Public, Scientific, Principal investigator

### Contact name

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## Additional identifiers

### Protocol serial number

21/365

## Study information

### Scientific Title

Impact of pharmaceutical validation on prescribing errors in a Neonatal Intensive Care Unit.  
Randomised and controlled study.

### Study objectives

Pharmaceutical validation of medical prescriptions reduces medication errors reaching patients admitted to neonatal intensive care units

### Ethics approval required

Ethics approval required

### Ethics approval(s)

approved 26/10/2021, Comité de Ética de la Investigación con medicamentos del Hospital Universitario 12 de Octubre (AV Cordoba SN, Madrid, 28054, Spain; +34 91 779 26 13; [ceicdoc@h12o.es](mailto:ceicdoc@h12o.es)), ref: 21/365

### Study design

Prospective randomized controlled study

**Primary study design**

Interventional

**Study type(s)**

Safety

**Health condition(s) or problem(s) studied**

Prevention of medical errors in newborns

**Interventions**

During the randomised phase, patients were assigned to the intervention or the control group at admission according to a simple randomisation using a web-based system ([www.dcode.fr](http://www.dcode.fr)). Pharmaceutical validation of treatments was performed on a daily basis in the same way as in the pre-intervention phase for patients in the intervention group. For patients included in the control group, treatments were retrospectively reviewed at discharge from the NICU by the same pharmacist.

For all arms of the study, the follow-up time is for the duration of the patient's admission.

**Intervention Type**

Behavioural

**Primary outcome(s)**

Percentage of prescription errors detected by a clinical pharmacist in e-prescribing measured at the end of the study

**Key secondary outcome(s)**

Percentage of prescribing errors reaching the patient according to the nursing administration record measured at the end of the study

**Completion date**

31/12/2022

**Eligibility****Key inclusion criteria**

All patients born during the study period who were admitted to the NICU and stayed for at least 24 hours and with active pharmacological treatment

**Participant type(s)**

Patient

**Healthy volunteers allowed**

No

**Age group**

Neonate

**Lower age limit**

0 days

**Sex**

All

**Total final enrolment**

240

**Key exclusion criteria**

Patients admitted without pharmacological treatment or less than 24h.

**Date of first enrolment**

01/09/2021

**Date of final enrolment**

30/06/2022

## Locations

**Countries of recruitment**

Spain

**Study participating centre****Hospital 12 de Octubre**

Av. Cordoba SN

Madrid

Spain

28041

## Sponsor information

**Organisation**

Hospital Universitario 12 De Octubre

**ROR**

<https://ror.org/00qyh5r35>

## Funder(s)

**Funder type**

Hospital/treatment centre

**Funder Name**

Hospital Universitario 12 De Octubre

# Results and Publications

## **Individual participant data (IPD) sharing plan**

All data generated or analysed during this study will be included in the subsequent results publication

## **IPD sharing plan summary**

Published as a supplement to the results publication