THE IMPACT OF PATIENT SAFETY REPORT AND SENTINEL EVENTS ON INFECTIOUS DISEASE PRESCRIBING PRACTICES Vidya Kollu, MD; Zareen Zaidi, MD, PhD; Jonathan Cho, MD; Andrew Abbott, MD; Lennox Archibald, MD, PhD; Gautam Kalyatanda, MD Division of Infectious Diseases, College of Medicine, University of Florida, Gainesville, FL, USA

BACKGROUND

- Antimicrobials have various side effects that range from mild to severe to serious outcomes
- Antimicrobial adverse events can cause distress or harm to patients or lead to prescriber anxiety
- Basic tenets of antimicrobial prescribing include the following:
- Knowledge of the epidemiology, pathogenesis, and clinical aspects of the disease,
- Pharmacokinetics and pharmacodynamics of different classes of antimicrobials
- Effectiveness of the therapy
- Inappropriate prescribing are associated with increased healthcare costs and can lead to unnecessary distress or emergence of resistance
- There is a paucity of published data on how inpatient sentinel events or patient safety reports affect physician prescribing habits

OBJECTIVES

 We carried out this study to ascertain whether patient safety reports and sentinel events influence physician antimicrobial prescribing practices

CASE DEFINITION

Sentinel event: A sentinel event was defined as any unanticipated event in healthcare setting resulting in death or serious physical or psychological injury to a patient or patients, not related to the natural course of the patient's illness.

METHODS

- During 2018, we invited Infectious Disease physicians at the University of Florida to participate in a survey that included perception of risks and prescribing habits after a sentinel event.
- Interviews carried out with a standardized questionnaire were recorded
- Data were analyzed using Epi Info (CDC, Atlanta, GA) statistical software
- Thematic analyses were performed on the open-ended interview questions

RESULTS

- 17 faculty and fellows participated in the survey
- Experience practicing infectious disease
- 5 (29.4%): 1-3 years
- 3 (17.6%): 4-6 years
- 2 (11.7%): 7-9 years
- 7 (41.0%): > 9 years
- Patient safety report: 2 (11.7%) had a complaint filed against them
- Sentinel event: all experienced at least one involving an antimicrobial agent
- Practice changes
- 16 (94%) changed practice after sentinel event
- 8 (47%) increased the frequency of ordering laboratory tests
- 7 (41%) changed to more expensive antimicrobials albeit with better safety profiles
- 8 (47%) endorsed hypervigilance through closer follow ups for patients prescribed antimicrobials

DISCUSSION

- Although infectious disease physicians often focus on one class of antimicrobial agent, experiences with that agent may vary and range from a rash to renal dysfunction requiring dialysis or onset of *Clostridioides difficile*.
- Serious adverse events can have a lasting impact on patients but can also alter how physicians perceive the risk of the antibiotic. Our discussion with faculty and fellows highlights this issue
- Some physicians will avoid prescribing certain antimicrobials with preference for alternative agents they feel have a better safety profile, albeit more expensive for the patient

CONCLUSION

- Sentinel events affect physicians' prescribing practices and monitoring of antimicrobial therapy
- After-effects include closer follow-up of patients while requesting more laboratory tests
- Participants often avoided certain antimicrobial agents while choosing more expensive therapies with ostensibly better safety profiles
- Although physicians use evidence-based medicine to alter their prescribing habits, serious adverse events can have a significant impact on the way they practice

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