

Prescription of Self-Administered Epinephrine for Patients at Risk for Anaphylactic Reactions

The Problem

Anaphylaxis is a serious allergic reaction that is rapid in onset and may cause death. Prompt treatment is required due to the potentially life-threatening nature of anaphylaxis. Studies have repeatedly shown that anaphylaxis is under diagnosed and under treated. Epinephrine is the drug of choice for anaphylaxis because it can reverse associated hypotension and bronchospasm. Studies have found that epinephrine is underutilized for the treatment of anaphylaxis, and fatality rates are highest in patients in whom treatment with epinephrine is delayed.

Aim/Goal

To improve the prescription rate of self-administrated epinephrine for patients seen at our allergy clinic who are at risk for anaphylactic reactions.

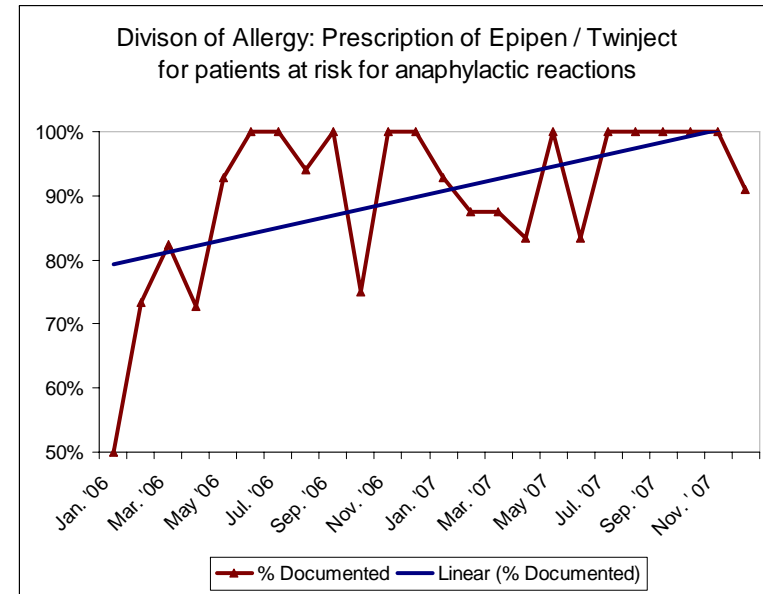
The Team

Javed Sheikh, MD, Allergy Medicine
Naama Neeman, MSc, Medicine, QI Specialist
Joanne Schulze, Medicine, QI Project Coordinator
Mark D. Aronson, MD, Medicine, Vice Chair for Quality;

The Interventions

- Worked with the Division of Allergy clinicians to identify areas of improvement;
- Reviewed medical records of patients with a diagnosis code of anaphylaxis to assess documentation rates of Epipen / Twinject prescriptions;
- Provided monthly feedback to clinicians;
- Presented results of the improvement project at faculty meetings.

The Results / Progress to Date



Documentation of Epinephrine (Epipen / Twinject) prescription for patients with a history of a prior anaphylactic reaction, in either the medication list or progress note in the electronic medical record, increased from 50.0% (Jan. 2006) to 90%-100% (Jul. – Dec. 2007) among patients seen in the allergy clinic.

Next Steps:

Continue to monitor prescription rates and provide monthly feedback to the Allergy clinicians with the goal of maintaining a 100% rate.



Beth Israel Deaconess
Medical Center



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For More Information Contact
Naama Neeman, MSc
Medicine QI Specialist
(nneeman@bidmc.harvard.edu)