

Risk Analysis, Vision Zero Approach, Safety Accident Report, what if Analysis as New Instrument in Emergency Medicine and Pharmacy

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Received: November 26, 2019; **Published:** November 29, 2019

Abstract

In emergency medicine and pharmacy is relevant to obtain the right clinical outcomes an efficient and effectiveness organization process.

Some new instrument like vision zero, safety accident report, what if analysis make possible to get the outcomes researched.

Keywords: *Risk Analysis; Vision Zero; Safety Accident Report; What if Analysis; Emergency Medicine; Emergency Pharmacy*

Introduction/Material and Methods

A lack of the global system produce failure whit tragic consequences so all the instruments useful to prevent malfunctions must be introduced in daily work in emergency settings.

To do this to translate or to shift some managerial techniques make possible to reduce to the low level possible the risk of failure.

To be added to the classic instrument also vision zero strategy, safety accident report, what if analysis contribute in this process.

In particular what if analysis is based not on historical fact but in prospective way.

In this work with an observational approach some relevant (in our opinion) literature are analyzed to produce a global conclusion related the topics.

“We can see that severe and critical patient condition gives frequently high mortality and morbidity rate and so this condition need the best available rational decision making systems involved in therapy. If we have 40% in mortality rate 4 patient/10 can be involved in exits (We can think also to severe infectious disease, some poisoning, major surgery, end stage renal failure, ICU, trauma, burns patients, transplants But many other conditions with high mortality rate).

In this specific kind of patient a multidisciplinary medical team with added the specific pharmaceutical competencies and knowledge can reduce this rate saving more patient versus equips without this expertise. Since from the clinical trial in registration of new molecules the pharmaceutical knowledge can be useful instruments to better evaluate (in the medical team) the real efficacy and the real opportunity that this can gives in pharmacological treatment especially for severe conditions.

The single Patient life needs the best bio-medical competencies but also the specific pharmaceutical knowledge at the same time to complete the correct decision making systems in clinician's treatment" [1,2].

And related EM pharmaceutical care "The Inclusion of clinical pharmacists in EM has been supported by relevant org. as The American Society of Health-System Pharmacists, Agency for Healthcare Research and Quality (AHRQ), American College of Medical Toxicology and the Am. College of Emergency Physicians "The contribution of clinical pharmacists on multidisciplinary teams has been shown to reduce patient mortality, hospital readmissions and medication errors. Perhaps the biggest critique against having EM clinical pharmacists is the global cost" [3].

Results/Discussion/Conclusion

Observing the results obtained in other scientific or organizative settings (military strategy, aereospacial Nuclear settings, insurances and other) is clear that introducing in day by day activity in emergency settings make possible to achieve the really best results.

Using prospective instrument is the real tool to be added to the classic risk analysis management procedure: the historical data can not to be the only one correct to be used.

So is strictly needed to share - translate the real good practice form a discipline (ex-insurance settings, industries, aereospacial and other) to another (like emergency settings).

Multidisciplinary (whit presence con clinical emergency pharmacist in medical team), sharing of knowledge, introducing of the best practice also if typical of other scientific discipline produce a good organization whit the real useful results.

I emergency 1 only failure in organizative process can produce death of a patient so is crucial to adopt this Instrument also whit a prospective point of view.

Conflict of Interest

None.

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Volume 3 Issue 12 December 2019

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