

National Patient Safety Goals

- 1. Improve accuracy of patient identification:**
Use two patient identifiers every time you take blood or give medications:
Inpatients – name and medical record number on wristband
Outpatients – name and birth date.
- 2. Improve effectiveness of communication:**
 - a. When receiving a telephone order or critical test result, write it down and then read it back. In emergencies, verbal orders only require a repeat back.
 - b. Do not use dangerous abbreviations – see the list on Loyola wired (www.luhs.org/internal).
- 3. Improve safety of high alert medications:**
Concentrated electrolytes, including potassium chloride, are not available of patient units.
Double check doses of high-alert medications.
- 4. Eliminate wrong-site, wrong-patient and wrong-procedure surgery/invasive procedures:**
Use an OR checklist. Mark sites. Do a time-out to verify name of patient, procedure and sites. Document sites and time-out.
- 5. Improve infusion pump safety:**
LUHS pumps have an anti-free flow device. Know how to verify free flow protection. Immediately take out of service any pumps that do not function properly and notify clinical engineering.
- 6. Improve the effectiveness of clinical-alarm systems:**
Make sure you have properly set all equipment alarms specific to the patient's parameters and that you can hear alarms.
- 7. Reduce the risk of health-care acquired infections:**
Wash with soap and water for 15 seconds or use antiseptic hand gel before and after any patient encounter. Wash your hands if visibly soiled.

ALSO – see www.jcaho.org for additional information regarding the 2005 Ambulatory Care National Patient Safety Goals.

7/2004

