

### ICU Clinical Pharmacist's Interventions Result in Cost Avoidance, Savings

An intensive care unit (ICU) clinical pharmacist – by conducting patient care rounds, chart reviews, and other interventions – saved a hospital as much as \$280,000 over a 4.5-month period by preventing potential adverse drug events (ADEs) and reducing costs, according to a December 1, 2007, article in the American Journal of Health-System Pharmacy.

“According to our results, the total cost to the institution over a 4.5-month period without the ICU pharmacist would have been \$209,000-\$280,000.” Of this amount, \$205,919-\$280,421 was attributed to preventing potential costs by avoiding ADEs. Another 12 interventions individually reduced costs from a range of \$10 to more than \$1,000 per intervention. Two critical care pharmacists working at the institution, who did not collect data for this study, reviewed the ICU clinical pharmacist's interventions and ranked them by the severity of the potential error and the significance of the intervention. Cost avoidance by preventing the possible ADE was determined by establishing the probability of the ADE occurring without the intervention. Probability values were multiplied by the estimated cost of a preventable ADE, with the cost updated based on the consumer price index, and multiplied by the number of interventions.

During the study period, 129 interventions were recorded, with 126 of those accepted. Sixteen of the interventions were initiated by healthcare professionals, other than the ICU clinical pharmacist, soliciting information. The remaining interventions were initiated by the ICU clinical pharmacist.

The complete research results are available at  
[www.ashp.org/s\\_ashp/docs/files/advocacy/policy\\_alert/AJHP\\_ICU\\_Pharmacist\\_12\\_1\\_07.pdf](http://www.ashp.org/s_ashp/docs/files/advocacy/policy_alert/AJHP_ICU_Pharmacist_12_1_07.pdf)

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ASHP Health Policy Alerts are synopses of new studies highlighting the medication-use process in health care, especially studies assessing contemporary pharmacists' role in improving medication-use outcomes. The American Society of Health-System Pharmacists encourages recipients to keep a copy of this synopsis for future reference.

