

New York State Partnership for Patients

# NYSPFP ADE Optimizing Anticoagulation Care Series:

#### Understanding Risks, Benefits, and Treatment Indications

April 2018

A partnership of the Healthcare Association of New York State and the Greater New York Hospital Association



# NYSPFP ADE Optimizing Anticoagulation Care Series

• Partnering with the Society of Hospital Medicine

### Engaging expert clinical faculty

- David Rosenberg, MD, MPH, FACP, SFHM
  - Director, Evidence Based Clinical Practice
  - Hospitalist, Department of Medicine
  - Northwell Health
  - Associate Professor of Medicine





- Donald and Barbara Zucker School of Medicine at Hofstra/Northwell David Coriale, RPh, PharmD, BCPS
- Clinical Pharmacy Manger Oneida Healthcare

Kim Zammit, PharmD, BCPS, BCCCS, FASHP

- Clinical Pharmacy Coordinator, Kaleida Health
- Buffalo General Medical Center





## NYSPFP ADE Optimizing Anticoagulation Care Series

#### Webinars: Future dates to be determined

- April Webinar: Understanding Risks, Benefits and Treatment Indications
- July Webinar: VTE Prevention Who, What, Where, When, How . . .
- September Webinar: Transitions of Care for Patients on Anticoagulants

#### **2018 In Person Conferences:**

- The Nuts and Bolts of Anticoagulation
  - NYC: Wednesday, May 16, 2018
  - Syracuse: Thursday, May 24, 2018



# Why Anticoagulants?

- Anticoagulants account for 17.6% of all ED visits for outpatient adverse drug effects, more than any other class of drugs
- Anticoagulants continue to account for large numbers of reported serious injuries (n=18,978) and deaths (n=3,018) in the US.
- Heparin and warfarin have been associated with medication errors more than many other medications
- Most adverse effects are preventable

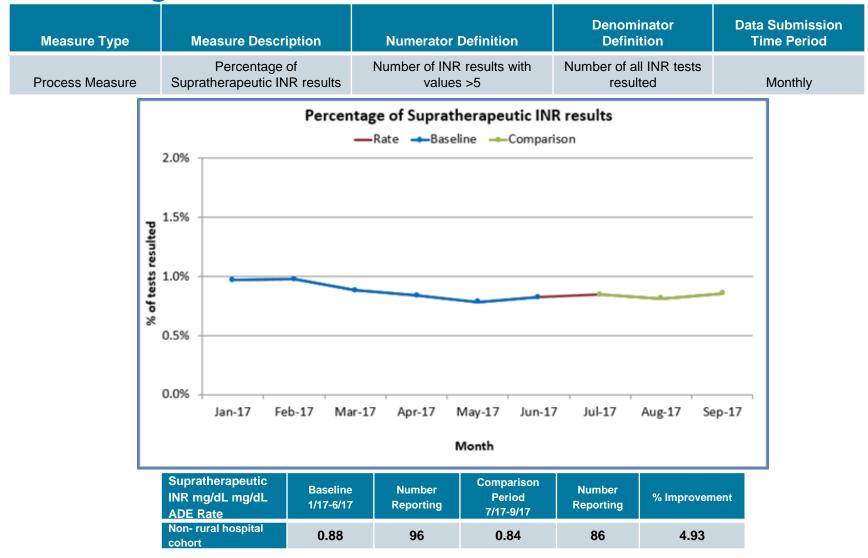


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# **NYSPFP Hospital Experiences**



### Anticoagulant ADE Measure





### **VTE Measures**

Measure Type		Me	asure Descripti	ion	Numerator Definition			Denominator Definition	
Outcome Measure		VTE rate	e per 100 adult in discharges	npatient	Number of facility among adult inpa		surgica	Number of medical and surgical adult inpatient discharges	
	O O O O O O O O O O O O O O O O O O O	.35	E Rate Per 100 I	Discharges	mboembolism Baseline Baseline Seb-12 Mar-16 Mar-17 Comparison Period 7/17 – 9/17	Com			
	Non- rural hospital cohort								



## **VTE Measures**

Measure Type	Measure Description			Numerator Definition			Denominator Definition		
Outcome Measure	AHRQ PSI 12 — Perioperati or DVT (secondary diagnosi 1000 surgical discharges patients > 18 years old				irgical patients quired DVT or I		Number of adult surgical discharges		
		Perioperative Pu	-	bolism or Deep Rate	Vein Throm	bosis			
2	g 4.50 -	PPE/DVT Rate  Baseline  Comparison							
Surveiced Discharges	20 20 4.00 -						_		
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â	0.00 -	2015-Q4 2016-Q1	2016-Q2 201	L6-Q3 2016-Q4	2017-Q1 201	7-Q2 2017-C	23		
			Y	ear and Quarter					
	IRQ PSI-12 :D 10)	2 Baseline 10/15-9/16	Number Reporting	Comparison Period 7/17 – 9/17	Number Reporting	% Improven			
	on- rural spital coho	3.94	151	3.74	149	5.01	May	18, 201	





Торіс	Speaker
Welcome and Introduction Series Overview	NYSPFP Staff
Epidemiology of Thromboembolic Disease	Kim Zammit, PharmD, BCPS, BCCCS, FASHP Clinical Pharmacy Coordinator, Kaleida Health Buffalo General Medical Center
<b>Risk of VTE and Treatment</b>	David B. Coriale, RPh. PharmD, BCPS Clinical Pharmacy Manger, Oneida Healthcare
Indications	David J Rosenberg, MD, MPH, FACP, SFHM Director, Evidence Based Clinical Practice Northwell Health Hospitalist, Department of Medicine Associate Professor of Medicine Donald and Barbara Zucker School of Medicine at Hofstra/Northwell
Closing Remarks and Q&A	NYSPFP Staff



# NYSPFP ADE Optimizing Anticoagulation Care Series Next Steps

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# **Thank You!**



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