

The safer, smarter path with infusion device interoperability

St. Vincent Healthcare, located in Billings, MT, embarked on a safety journey in May 2014 by successfully implementing BD Alaris™ EMR Interoperability throughout their facility. With this solution, they hoped to systematically improve outcomes by realizing the following goals: reduce medication errors, alerts and revenue loss, and improve clinical documentation. In just a few months, they saw astounding results.



Prepopulation of infusion parameters to the BD Alaris™ Pump Module and Alaris™ Syringe Module **reduced manual keystrokes on the pump by 86%.1**



Total monthly pump alerts decreased on average, by 22%.1



The number of infusions requiring reprogramming in the pump decreased 19% from an average monthly number of 119 to 96.



Patient identification usage on the pump increased significantly from 36% to 81%.



Lost charges for outpatient IV infusion claims, due to missing start and stop time documentation, decreased by 40%.



Reduction in lost charges represented \$370,000 in incremental revenue for the organization (hospital administration calculation); achieving similar results across the 8-hospital system would equate to \$1.78M in additional revenue.²

References

1 Biltoft J, Finneman L. Clinical and financial effects of smart pump-electronic medical record interoperability at a hospital in a regional health system. Am J Health Syst Pharm. 2018;75(14):1064-1068. 2 ASHP Best Practice Award Nomination in Health-System Pharmacy. Clinical and Financial Benefits of Smart Pump-Electronic Medical Record (EMR) Interoperability at a Regional Health-System Hospital. American Society of Health-System Pharmacists. Bethesda, MD. 2015.

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