

ACCREDITATION

Required Organizational Practice (ROP) of the Month

ADHERING TO A DO-NOT-USE LIST OF ABBREVIATIONS, SYMBOLS, AND DOSE DESIGNATIONS

- The Required Organizational Practice (ROP) ensures clinical teams adhere to a current **do-not-use list of abbreviations, symbols, and dose designations** in all medication-related communication.
- **Misinterpreted abbreviations** including drug name abbreviations, symbols, and dose designations can cause medication safety incidents such as incorrect medications, incorrect doses, or incorrect directions for use that may result in client harm.

AT HEALTH PEI:

- There is a provincial “**Do Not Use**” *Abbreviations, Symbols and Dose Designations for Medication-Related Documentation Policy*.
- The policy includes a list of abbreviations, symbols and dose designations that are not to be used within the organization. The list is adapted from the *Institute of Safe Medication Practices (ISMP) Canada’s ‘Do Not Use List’*.
- Health PEI promotes reporting of safety incidents in the **Provincial Safety Management System (PSMS)** to avoid harm, reduce errors, and lessen impact of errors. Audits of abbreviations used within medication orders are conducted and feedback is provided.
- Powerplans, pre-printed order sets, forms and labels are **reviewed by the Provincial Drug & Therapeutics Committee** and the **Pharmacy Department** to ensure inappropriate abbreviations are avoided.
- All healthcare professionals involved in the writing and transcription of medication orders are reminded to avoid using abbreviations, and when orders are handwritten, to ensure the orders are legible.
- Free-text orders are verified by the pharmacist and inappropriate abbreviations are removed.

Examples of Do-Not-Use Abbreviations, Symbols, and Dose Designations:

- Short forms of drug names;
- *u* for unit;
- symbols such as @, >, or <;
- leading or trailing zeros;
- D/C used to indicate **Discharge or Discontinue** and the intended meaning isn’t clear.

Questions Surveyors May Ask Staff:

Where can you find Health PEI’s “Do Not Use” List of Abbreviations?

How do you report incidents or near misses with inappropriate abbreviations?

What are some examples of clinical documentation where abbreviations might be dangerous to use?