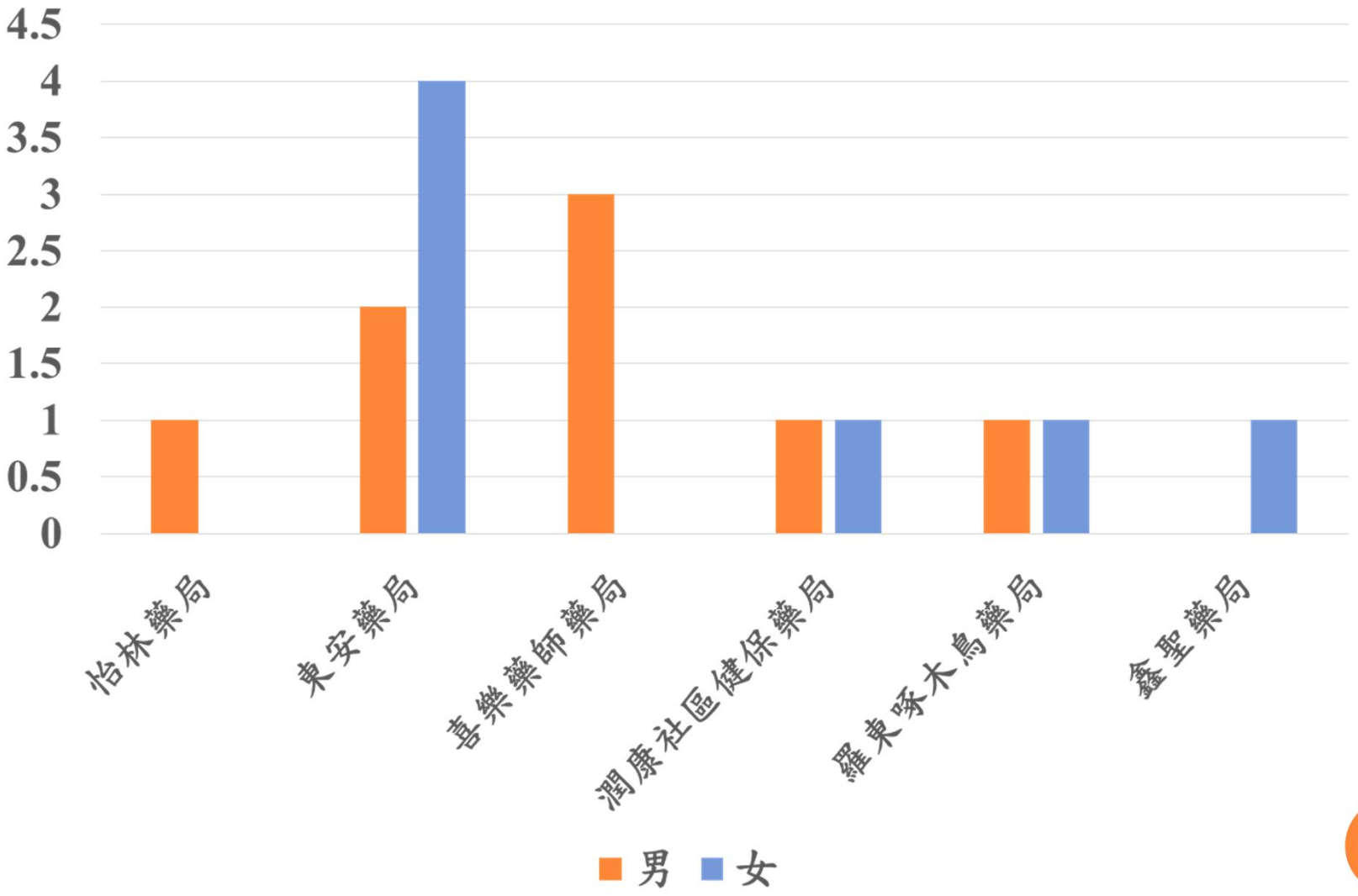
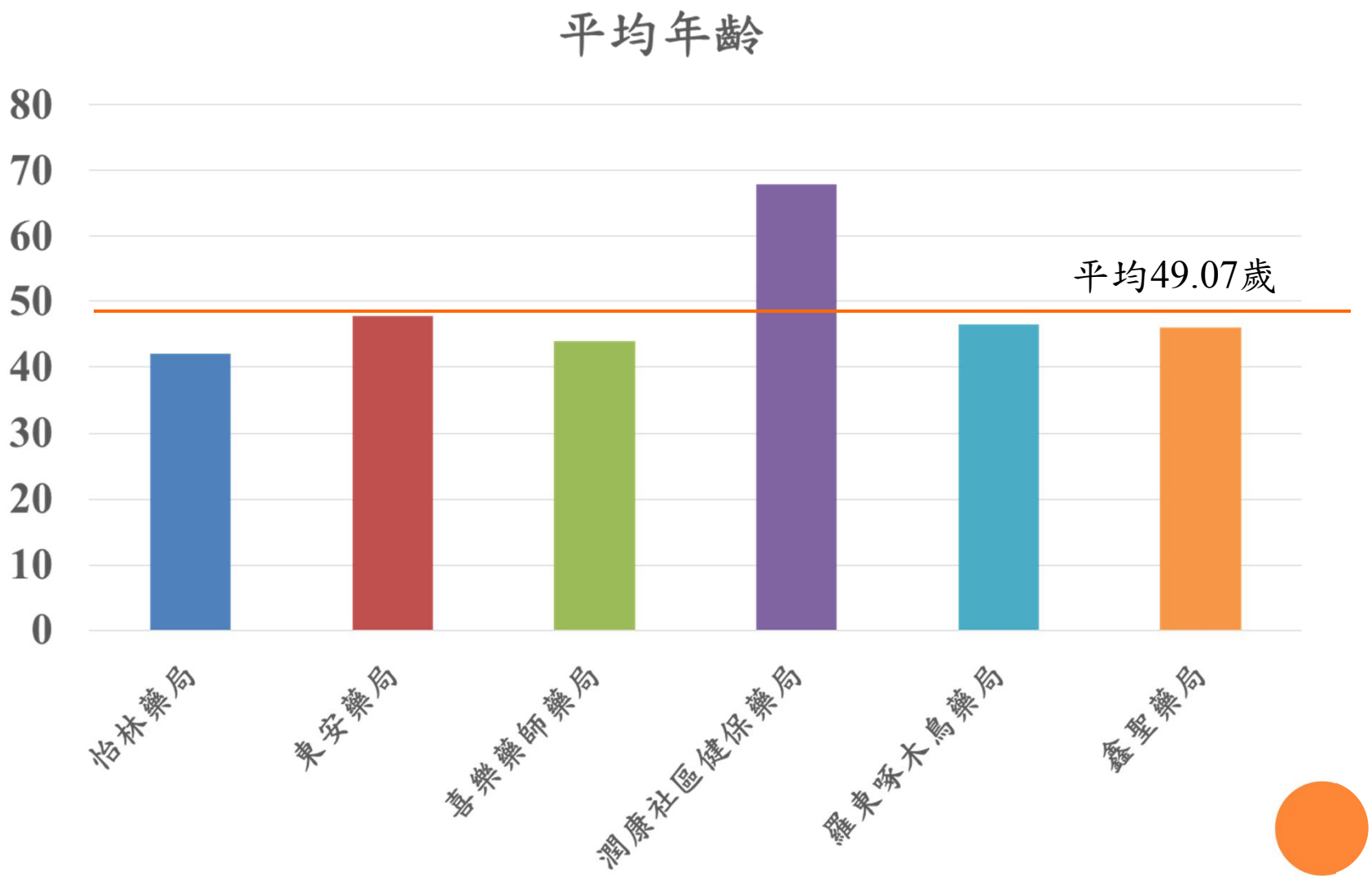
判斷性服務分析討論

羅東聖母醫院 林子舜

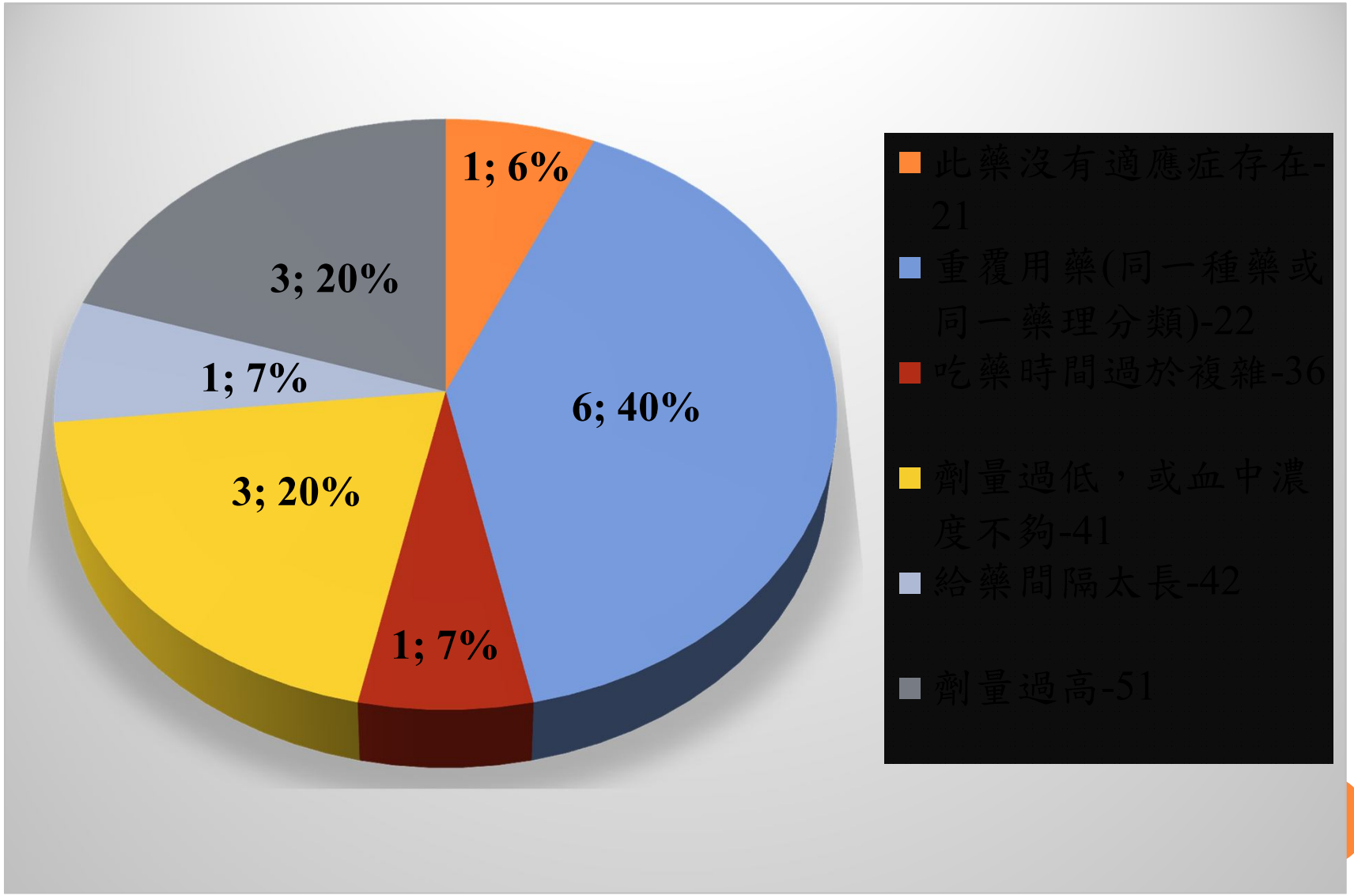
基本資料-服務病人性別分佈



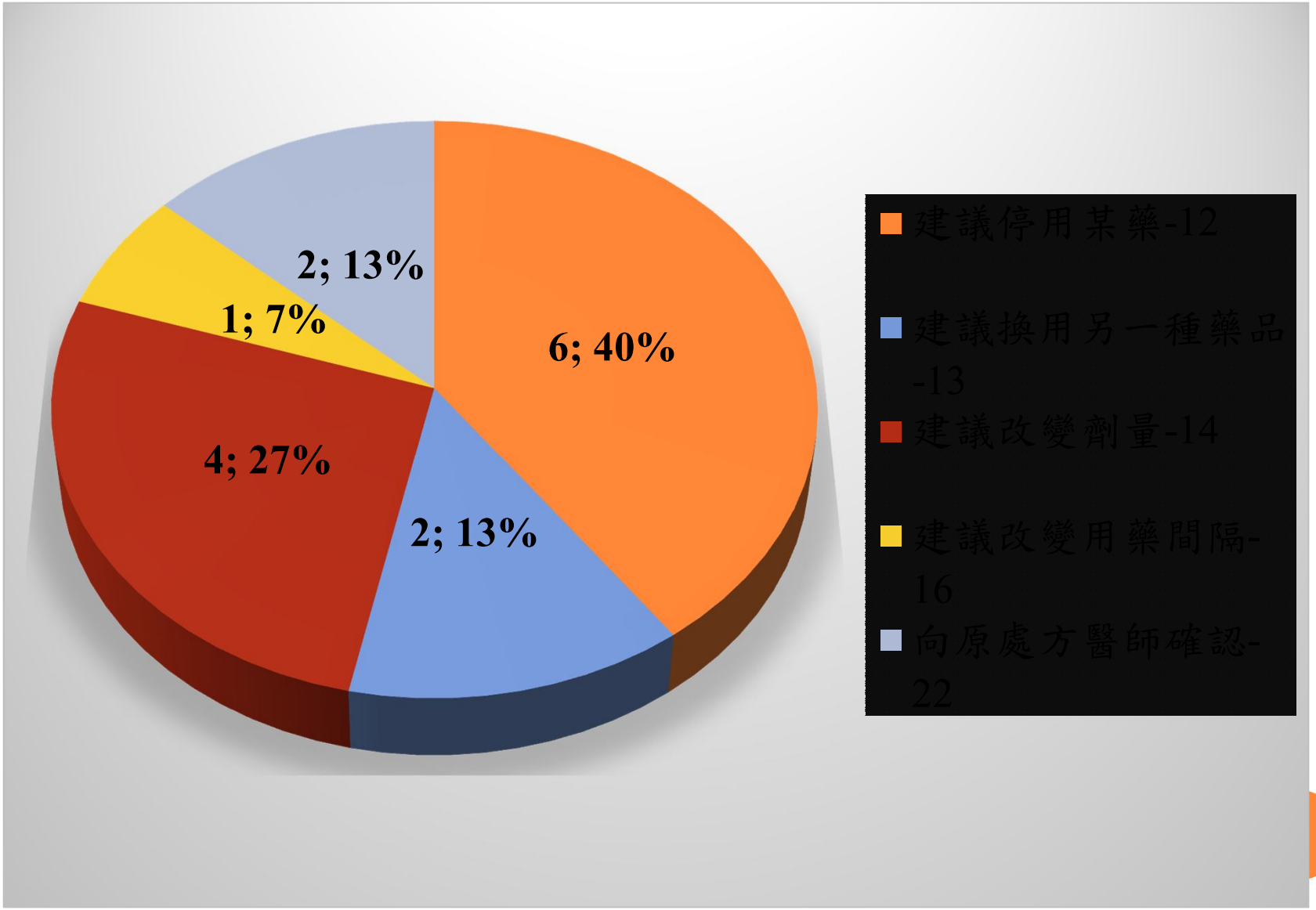
基本資料-服務病人平均年齡



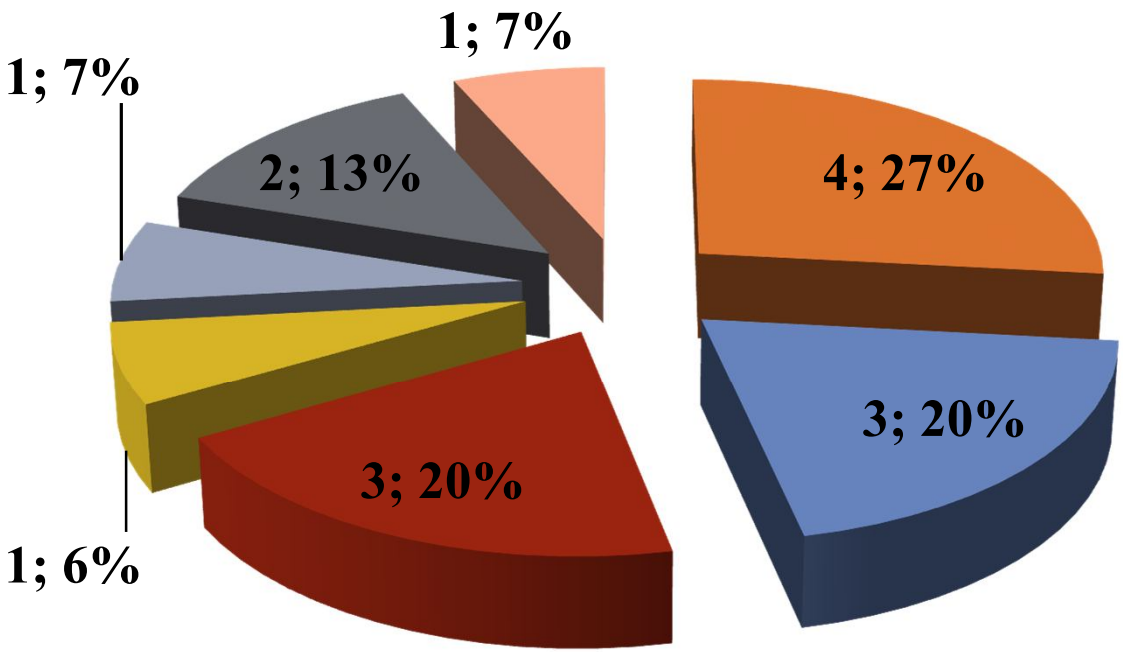
發現到之藥物治療問題(AA)



藥師對醫師之建議(BB)

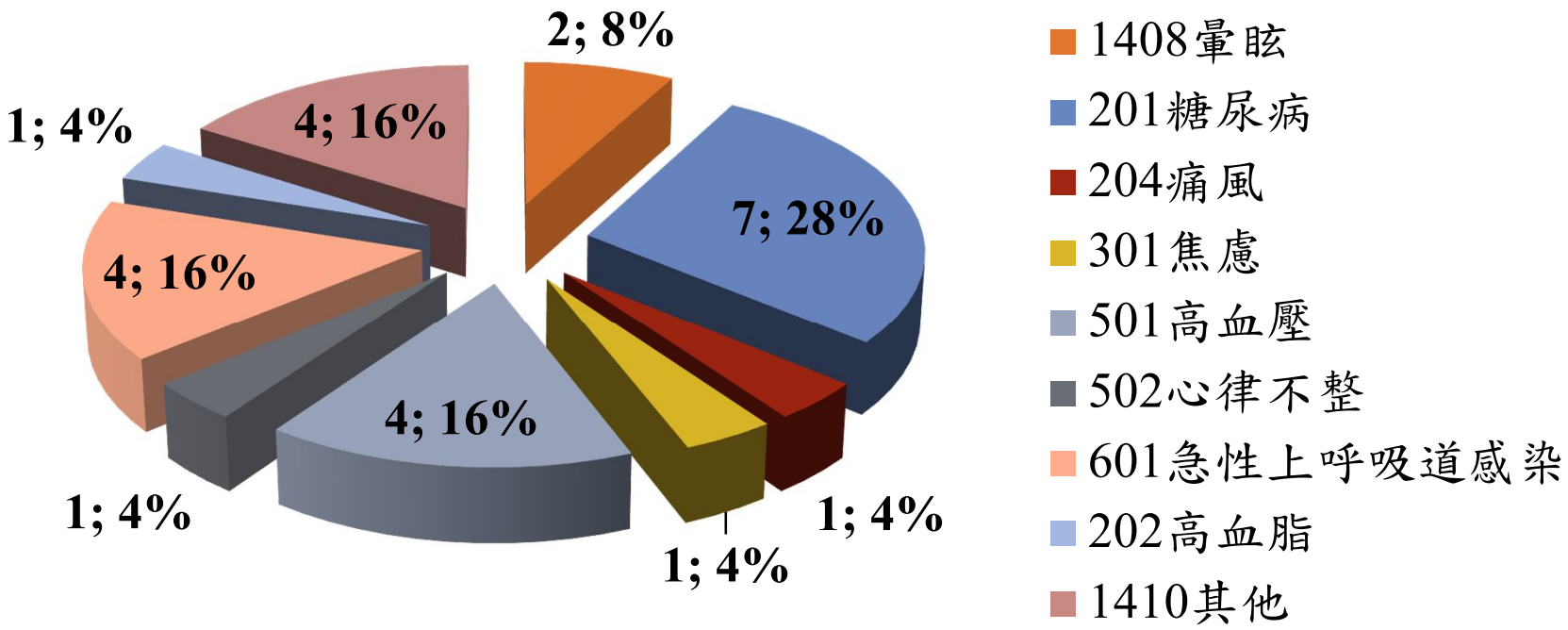

2; 13%
1; 7%
6; 40%
4; 27%
2; 13%
建議停用某藥-12
建議換用另一種藥品-13
建議改變劑量-14
建議改變用藥間隔-16
向原處方醫師確認-22

醫師之回應結果(CC)

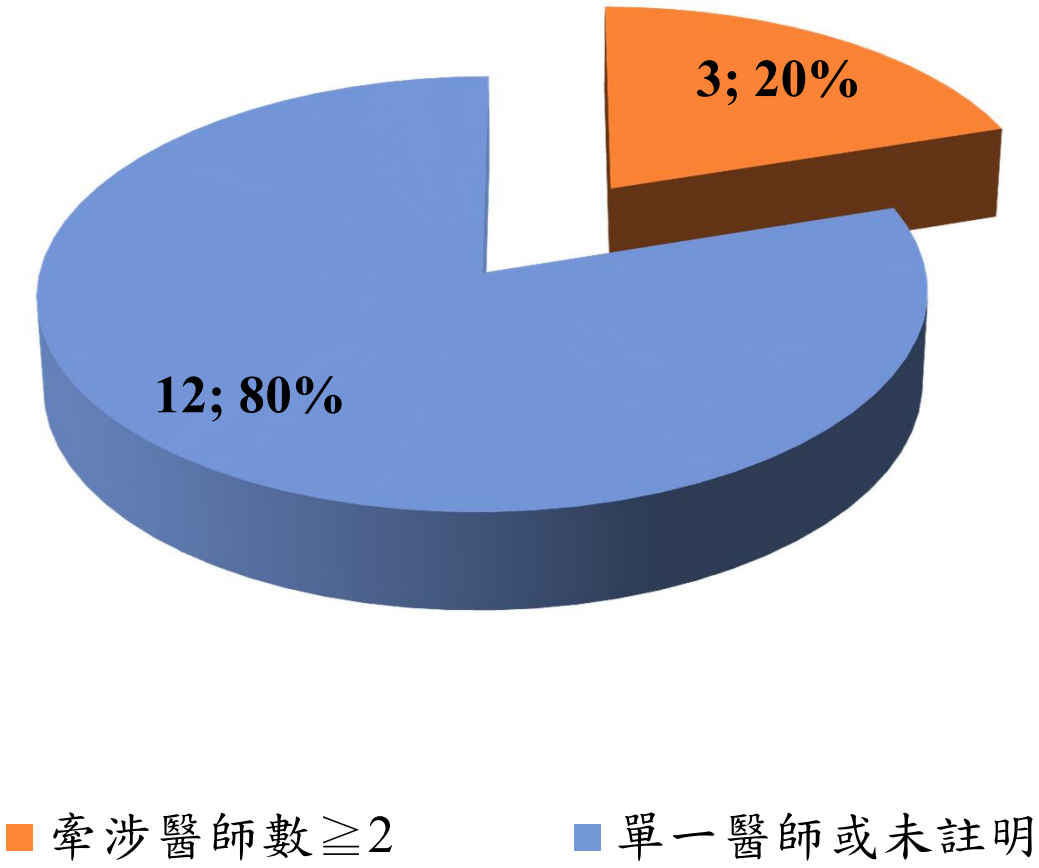


- 停用某藥-12
- 換用另一種藥品-13
- 更改劑量-14
- 更改用藥間隔/頻率-16
- 更改給藥時間/用藥方法-19
- 經醫師確認依原處方調配藥品-21
- 醫師的問題不能解決-25

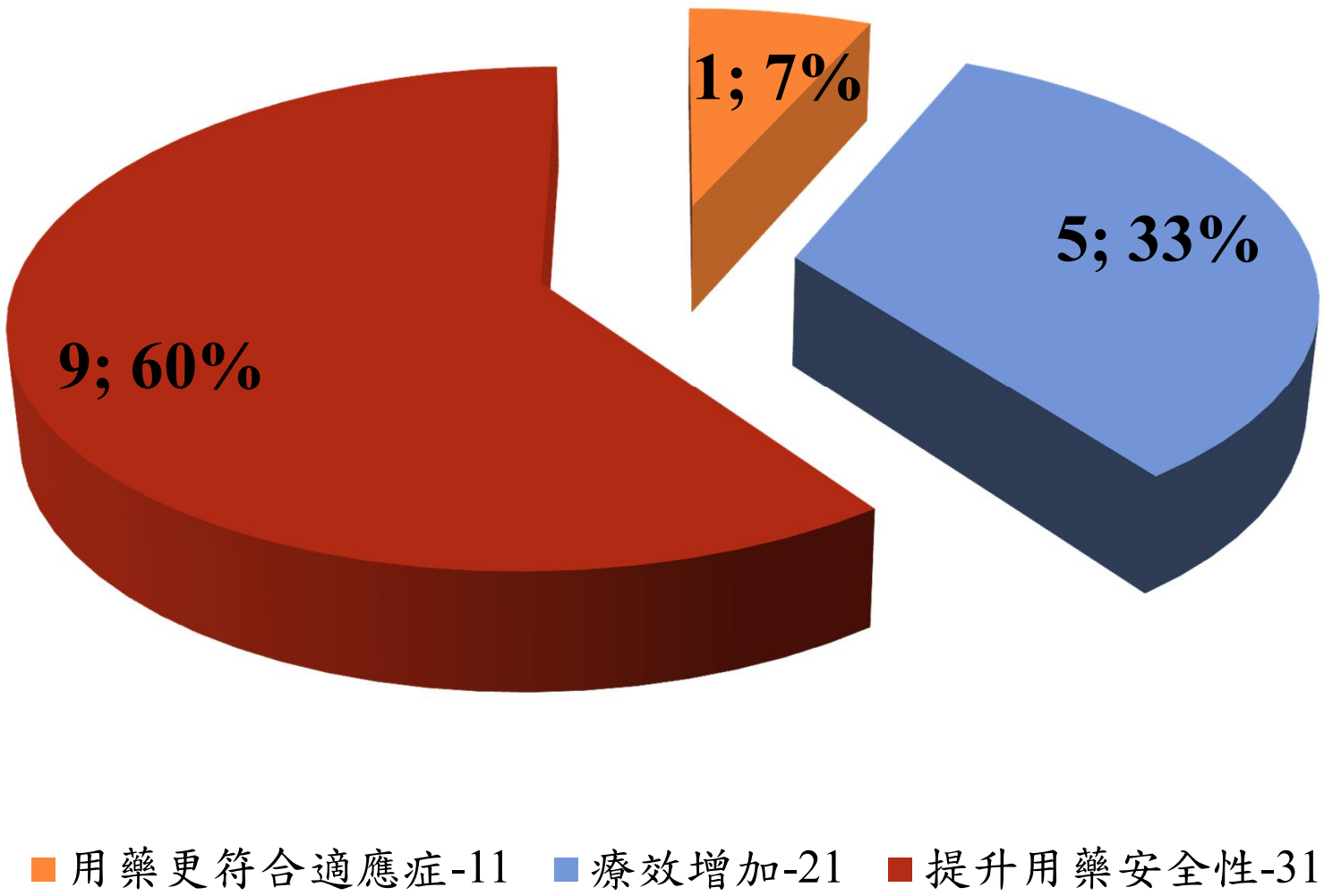
藥物治療的疾病別


2; 8%
7; 28%
1; 4%
1; 4%
1; 4%
4; 16%
1; 4%
4; 16%
4; 16%
1408暈眩
201糖尿病
204痛風
301焦慮
501高血壓
502心律不整
601急性上呼吸道感染
202高血脂
1410其他

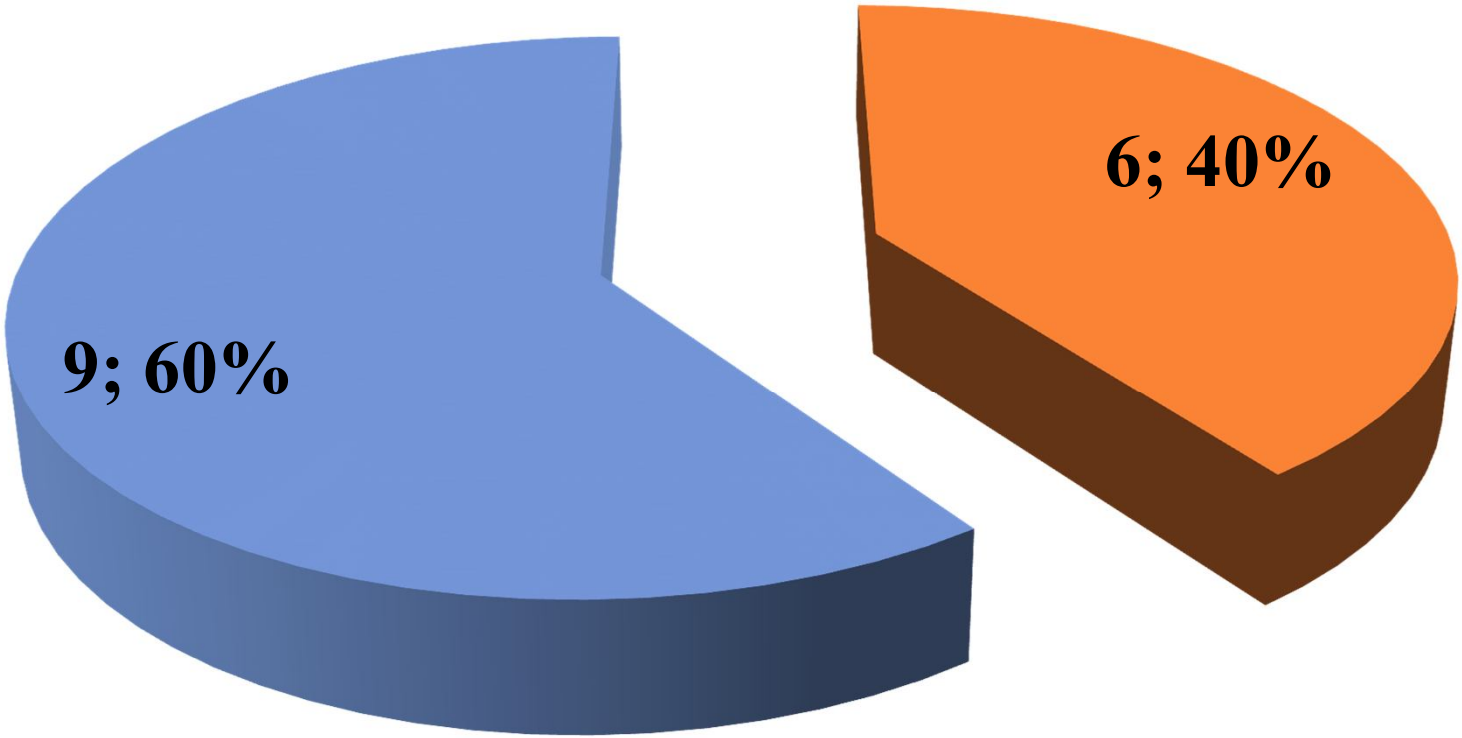
處方醫師複雜度分析



藥師介入後病人藥物治療結果(單選)

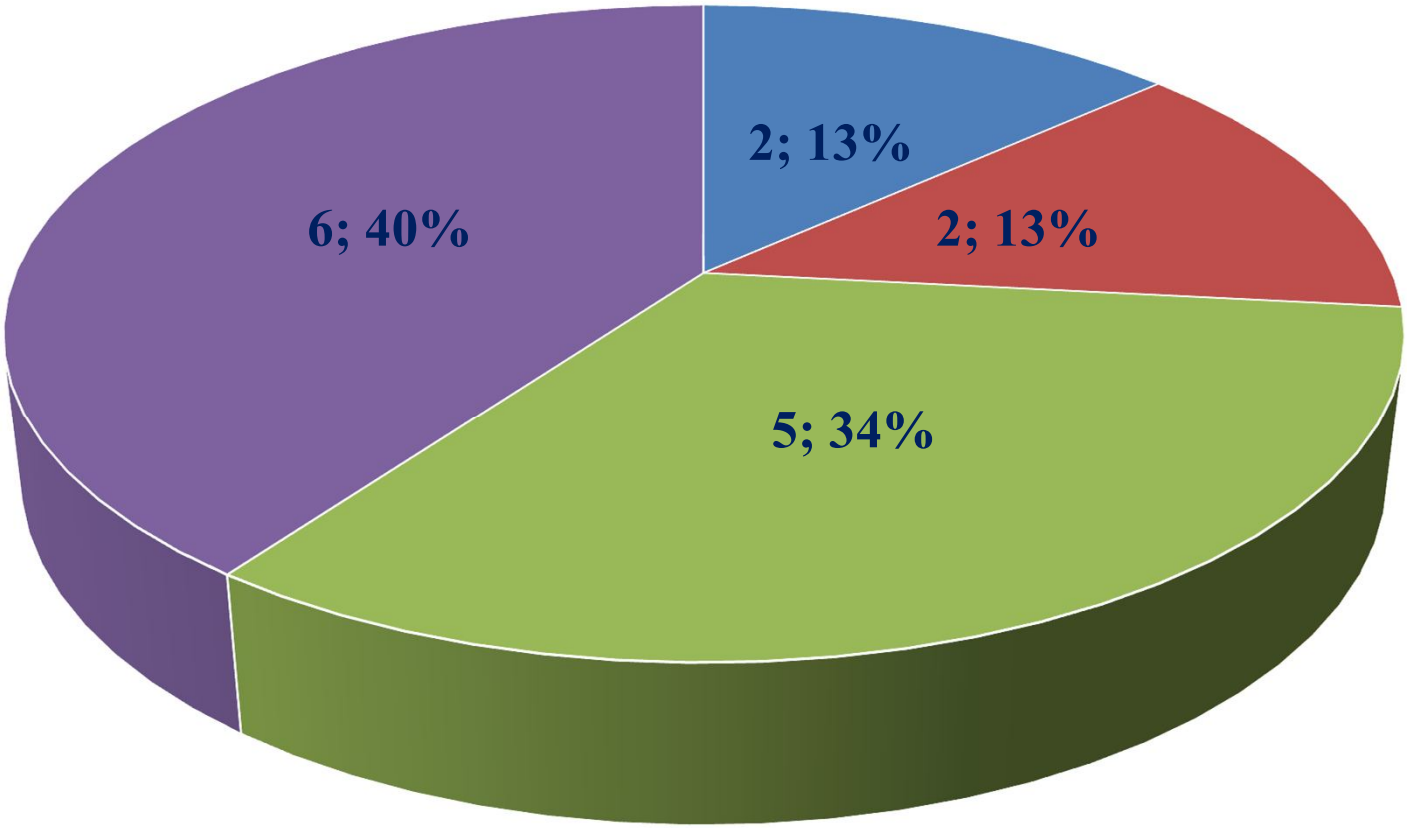


藥師介入之影響(單選)



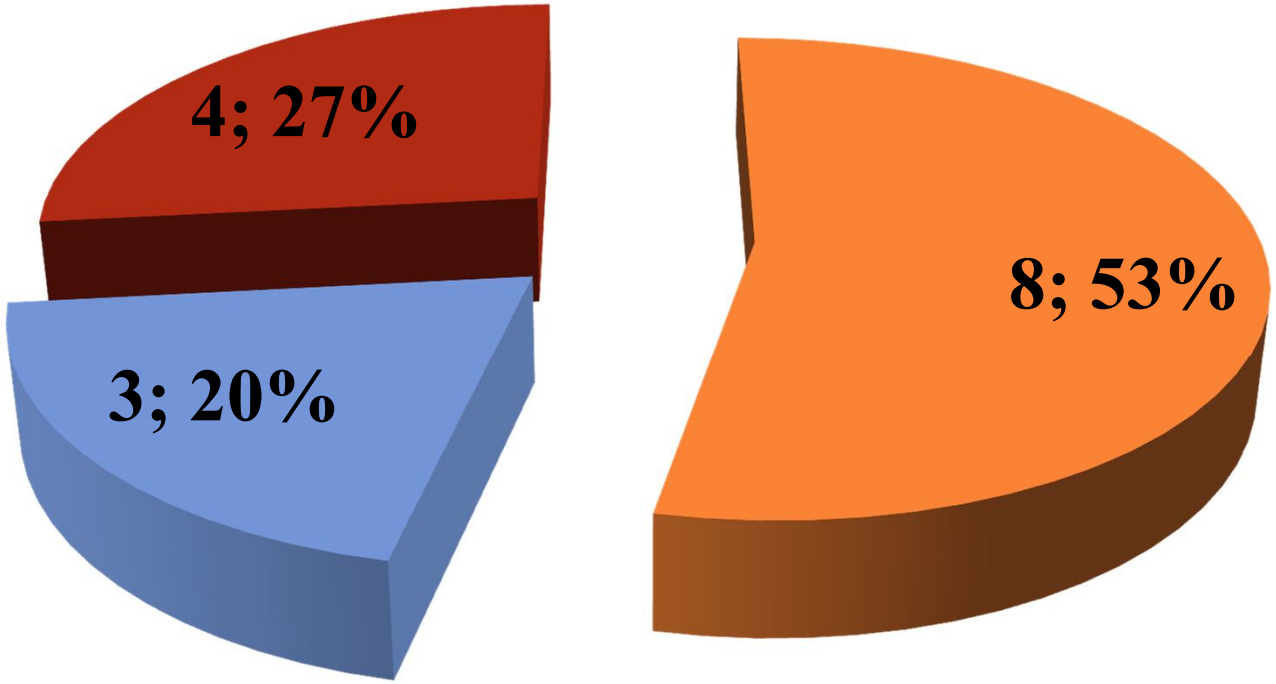
■ 避免嚴重ADR發生-52　■ 提高照顧品質-53

藥師介入後對藥費之影響(單選)



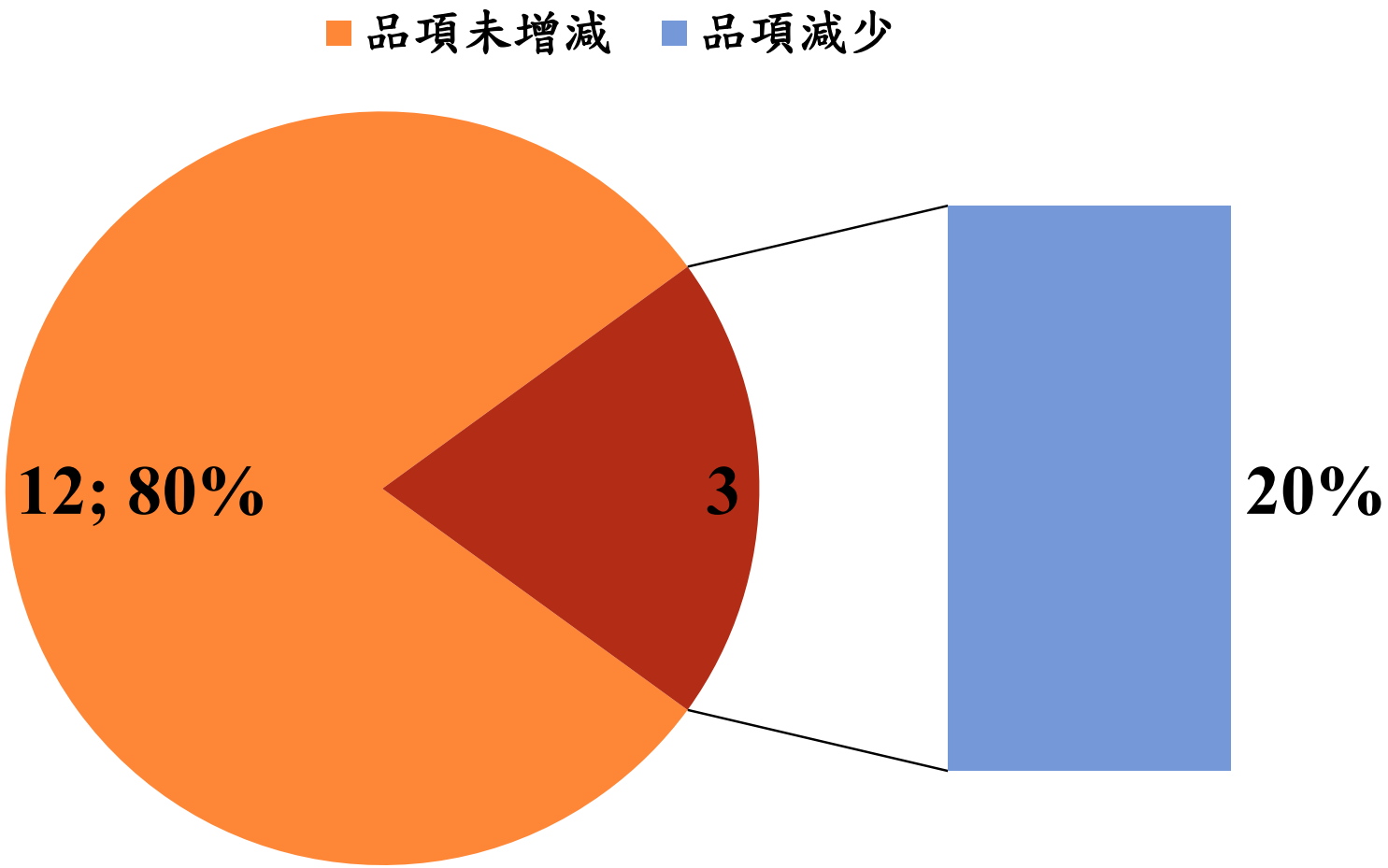
- 降低藥費-61
- 藥費不變-62
- 增加藥費-63
- 藥物品項增減數量:+/-(64)

藥師介入之臨床價值



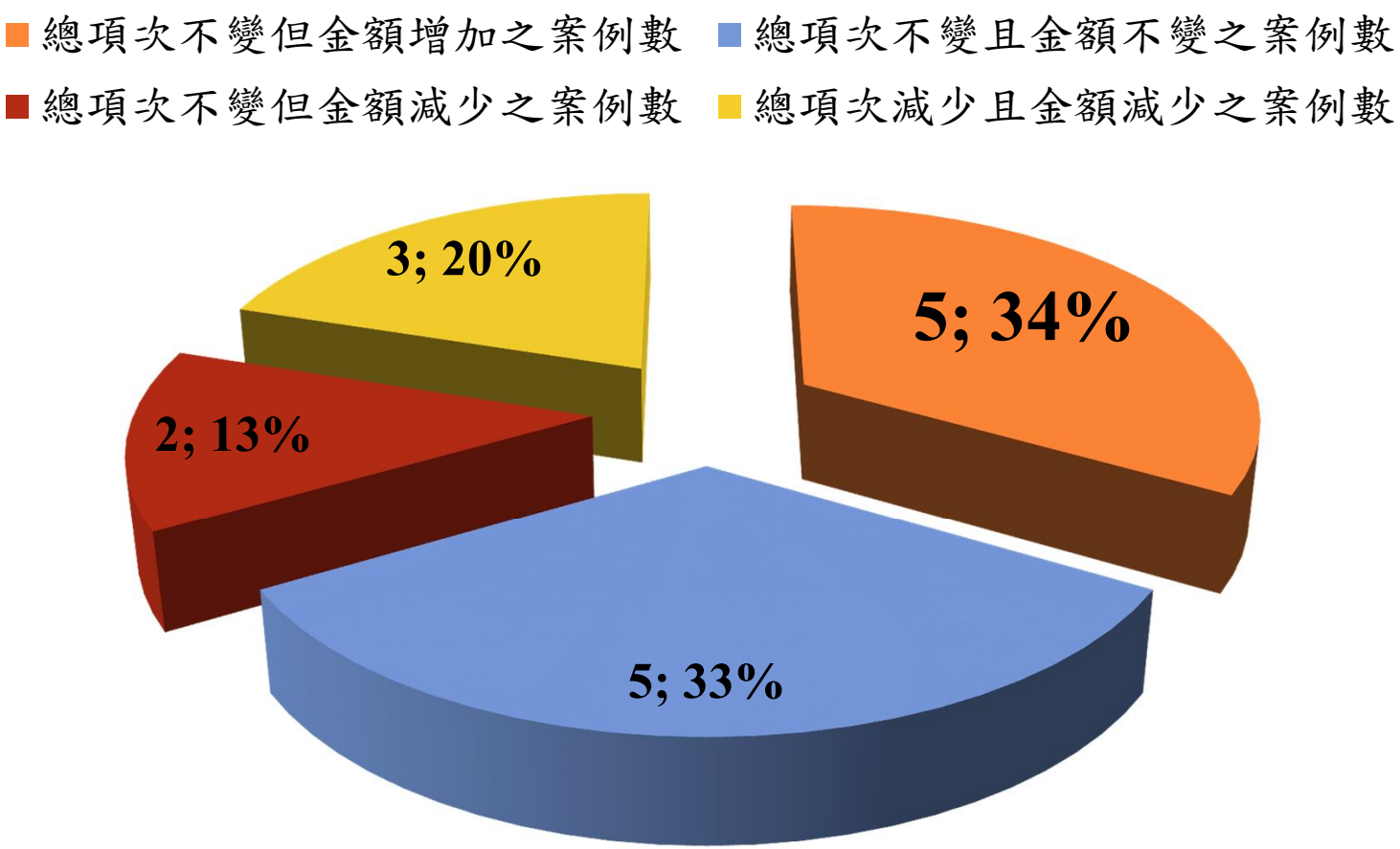
- 有價值(提升照顧品質)-74
- 很有價值(解決問題, 避免器官傷害)-75
- 極具價值(解決問題並預防新問題產生, 潛在避免死亡)-76

藥師介入後病人之品項異動分析



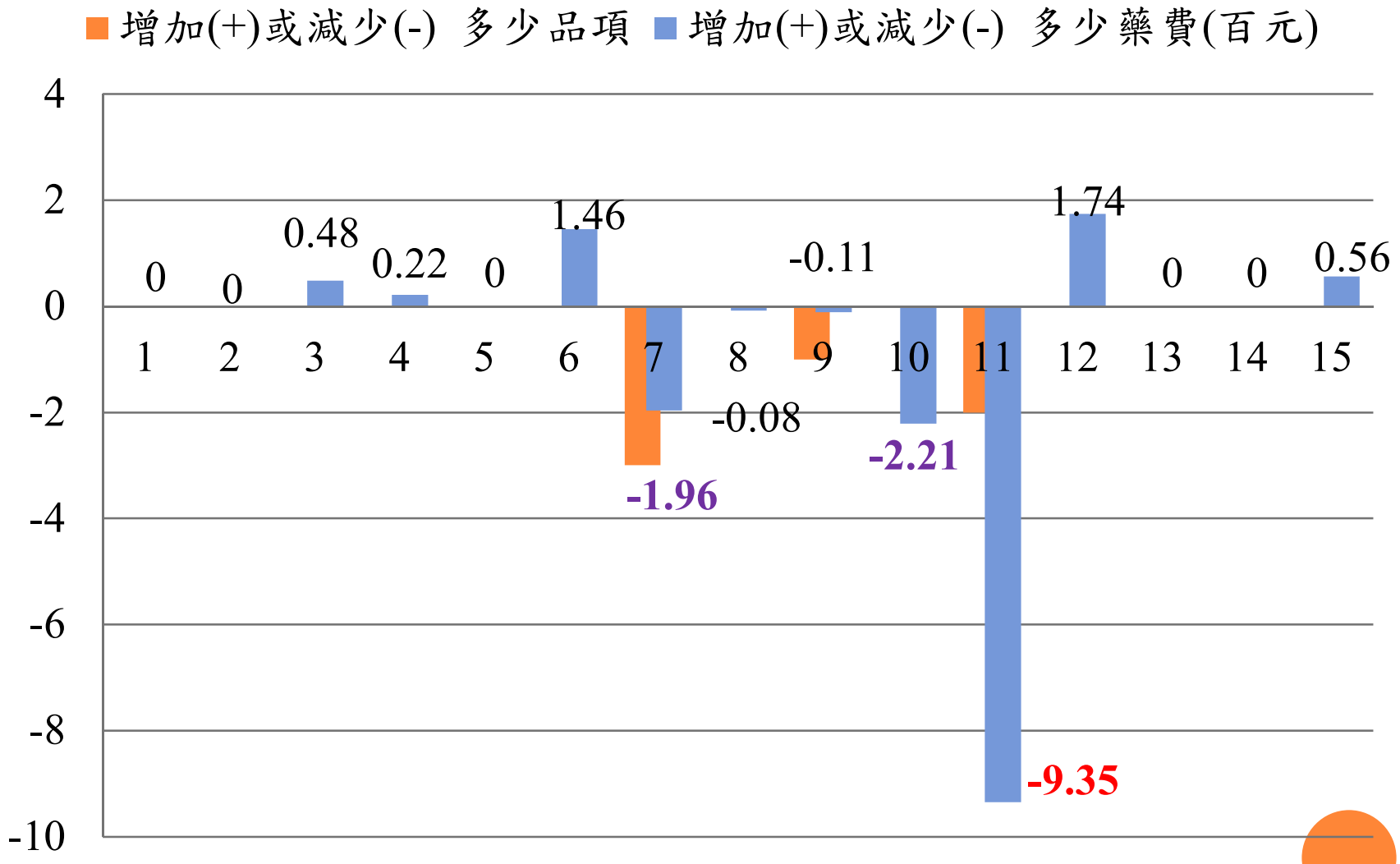
平均每位病人減少項次為0.4筆

藥師介入後病人之藥費異動分析



平均每位病人減少金額為每個月61.67元

藥師介入後病人之品項及藥費異動分析



品項減少者費用都同時降低；總品項未增減者雖費用偶有增加，但有其他照護品質提升的價值

謝謝指導