

Decreasing Controlled Substance Discrepancies in the Post-Anesthesia Care Unit with CSAR (Controlled Substance Administration Reconciliation)

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Introduction

Controlled substance discrepancies have been an ongoing issue in the Post-Anesthesia Care Unit and impact the overall accountability and accuracy of important documentation. Accurate documentation of controlled substances in the post-operative environment is integral in upholding patient safety. Most discrepancies stem from nurses forgetting or inaccurately documenting the administration and/or wastage in the eMAR (Electronic Medication Administration Record) and/or Pyxis. This can result in unsafe patient outcomes, punitive consequences, and detrimental effects on both patients and nurses. Also, the Drug Enforcement Administration has imposed regulations on the administration, security, and recordkeeping of controlled substances.

Additionally, this issue indirectly ties to the current Hospital National Patient Safety Goals: NPSG.03.06.01 Record and pass along correct information about a patient's medicine. Find out what medicines the patient is taking. Compare those medicines to new medicines given to the patient. Give the patient written information about the medicines they need to take. Tell the patient it is important to bring their up-todate list of medicines every time they visit a doctor.

Objectives

To decrease the number of narcotic discrepancies by ≥50% within four years as measured by the narcotic discrepancy reports.

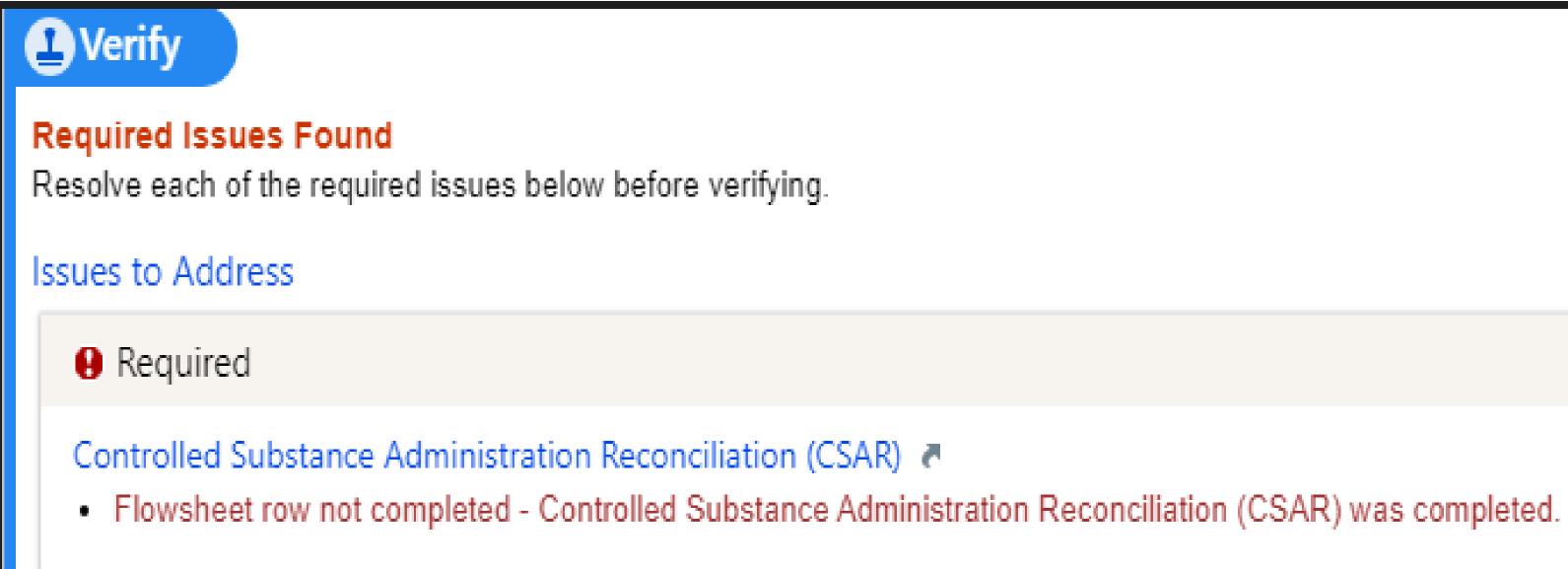
Methods/Project Implementation

5 Pavilion PreOp/PACU was the unit used to initiate CSAR.

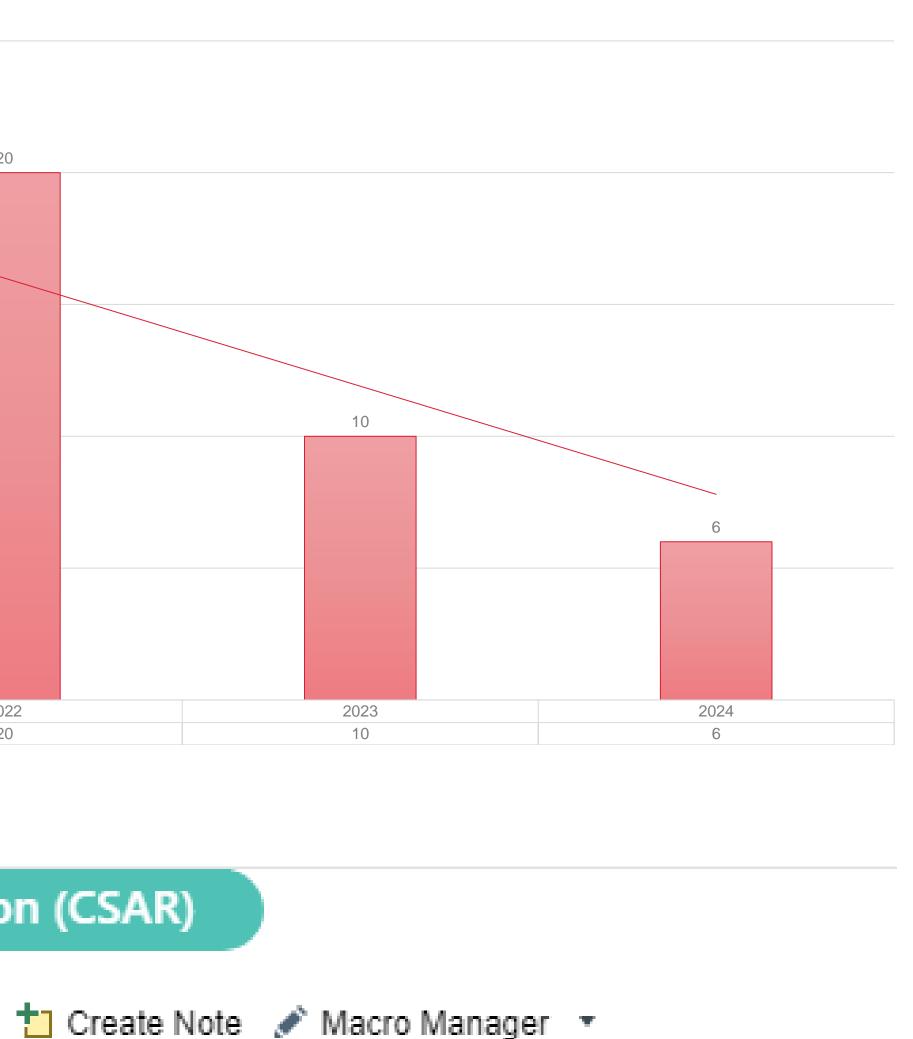
- Discrepancy report was requested for the years 2020 to 2024.
- A request was submitted to Cedars-Sinai's data analysts for an optimization that will serve as a hard-stop feature reminding PreOp and PACU nurses to reconcile their controlled substances prior to chart closure. That custom-built enhancement programmed within our Epic documentation was named CSAR (Controlled Substance Administration Reconciliation)
- CSAR will serve as a hard-stop during chart closure giving nurses the opportunity to review the eMAR, inspect locked drawers for leftover meds, and perform wastage in the Pyxis if needed.

25 —				25		
20 —						
	19					
15 —						
10 —						
5 —						
0	2020			2021		
Number of Discrepancies Fig. 1	19			25		
Fig. I						
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					1	
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Time taken: 3					1	
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Time taken: 3	/18/2025	2	2100	(1	Resp	onsib
Time taken: 3 OTHER Controlled Yes taken	/18/2025 I Substan today	2	2100	(1	Resp	onsib
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Time taken: 3 OTHER Controlled Yes taken	/18/2025 I Substand today	2	2100	(1	Resp	onsib

Chart Verification Hard Stop



Discrepancies for 5 Pavilion



R) was completed.

Results

We have decreased 5 Pavilion's narcotic discrepancies from 19 (prior to CSAR in 2020) to 6 (post-CSAR 2024). This brought a narcotic discrepancy reduction of 68.4% for 5 Pavilion.

Conclusions

The implementation of CSAR (Controlled Substance Administration Reconciliation) in CS-Link was successful in reminding nurses to reconcile their controlled substance administration and wastage, as evidenced by a 68.4% reduction in discrepancies based on a 4-year data analysis (Fig.1).

Acknowledgments

CPAN



Pavilion Staff L-R (Back Row): Christine Dinh, MSN, RN, CPAN, Yeni Santizo, MSN, RN, CPAN, Crystal Gutierrez MSN, RN, CPAN, CAPA, Andrea Kepner, MSN, RN, CMSRN, Lawrence Roxas, MSN, RN, CPAN, CNML (Front Row): Rowena Gonzalez, BSN, RN, CPAN, CAPA, Shirley Sabarre, BSN, RN, CPAN, Adolfo "Jun" Bagunu, BSN, RN. CMSRN

• In 2020 (Prior to CSAR), there were 19 controlled substance discrepancies for 5 Pavilion for that whole calendar year.

• In mid-2021 (Building CSAR/Trial/Identification of glitches), there were 25 controlled substance discrepancies. Soft roll-out of the project was initiated and was discussed in huddles, newsletters, and staff email. Unit staff education and re-education about CSAR was frequently highlighted during unit huddles.

• For calendar year 2022, the number of discrepancies dropped to 20 • For calendar year 2023, the number of discrepancies dropped to 10. • For calendar year 2024, the number of discrepancies dropped to 6.

5 Pavilion PreOp and PACU Staff, Kimberly Wesley, MSN, RN, CNML,