中文題目: 慢性腎臟病患者的腎功能其臨床上劑量調整與治療效果的評估

英文題目: Evaluation of The Renal Dosing Compliance and Effectiveness on Patients with Chronic Kidney Disease

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Introduction: Patients with chronic kidney disease require appropriate medication dosing for disease severity and the level of renal function for avoiding adverse drug events, preventing additional renal injury, and optimizing patient outcomes. The present study aims to explore the current situation and challenges of renal dosing noncompliance for CKD patients using qualitative data from a group discussion. This intervention demonstrates a way in which computer-based decision support systems can improve care.

Methods: The integrated database query was performed to identify that the electronic medical record listed daily the hospitalized patients whose serum creatinine level was 1.5mg/dL or above during the program between 1st June, 2013 and 31st December, 2013.

Result: The patients with renal dosing noncompliance were divided by total patient whose serum creatinine was 1.5 mg/dL or above, and the calculated number timed 100%. Hence, (28 patients x 133 patients) x 100% = 21.05%. We aimed the target to improve 50% of renal dosing noncompliance. We surprisingly found only 9 patients among total 131 hospitalized patients whose creatinine was 1.5mg/dL or above. Incidence of renal dosing noncompliance reducted to 6.87%. We followed up the incidence of renal dosing noncompliance. Only 7 patients with poor renal dosing compliance were selected among 161 participants with renal insufficiency. 158.7% of

patients were completely satisfied with the goal of overall renal dosing noncompliant improvement they achieved. It is also likely that progress rate (79.3%) was a more straightforward concept to understand the effects of the program’s point of medical practice.

Conclusion: The hospital policy purportedly yielding large cost savings employs public health practice and education for the elimination of renal dosing noncompliance.