Genki Murakami et al., Biol Med 2018, Volume 10 DOI: 10.4172/0974-8369-C1-006

Annual Congress on Medicine

November 05-06, 2018 Bangkok, Thailand

Hospital resilience in deep vein thrombosis preventive measures

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There is an increasing focus on the prevention of Deep Vein Thrombosis (DVT) in medical care from the perspective of ▲ healthcare safety. However, when implementing preventive measures, physicians will first conduct an overall evaluation of each patient's condition and may choose to administer measures that deviate from these guidelines to ensure optimal treatment. The aim of this study was to ascertain and conduct a descriptive analysis of resilience in the implementation of DVT preventive measures in a tertiary care teaching hospital in Japan. The study sample comprised patients who had been newly admitted to the subject hospital between October 2016 and September 2017 and had undergone DVT risk assessments during hospitalization. Data were collected on the results for each risk assessment item and the final assessed risk, as well as on the preventive measures implemented for each patient. Among the patients who had undergone DVT risk assessments at the subject hospital, there were 5,311 patients who had undergone surgery, 549 patients who were prescribed bed rest for 48 hours or more and 7,045 patients who did not require any bed rest. Regardless of surgical status, there were 5,059 patients with moderate DVT risk; among these, 1,008 patients were administered preventive measures that were less stringent (i.e., early ambulation and active mobilization only) than those prescribed in the guidelines. There is a trade-off between preventing DVT and mitigating the risk of hemorrhage and physicians must implement the most appropriate DVT prevention strategy based on each patient's condition. The adoption of resilience measures that allow deviations from conventional rules can be effective for non-standard cases. However, such deviations must be supported by each physician's specialized expertise and experience and should not be implemented lightly.

Biography

Genki Murakami has his expertise in public health and management engineering especially safety management in hospital. He practices the hospital's safety management method using the resilient engineering, which is safety management method based on ergonomics. He has completed his graduation in Management Engineering and Public Health.

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