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## Ensuring perioperative and PACU drug safety

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The perioperative period is a time of increased risk. While under surgery the patient is not able to communicate and the body is being subjected to a variety of new stresses. Acute inflammatory mediators are being released during surgery, both acute and chronic pain processes are activated, patients have fluctuating levels of consciousness and their ability to accurately verbalize their needs may be hampered. The need to rapidly administer medications, facilitate throughput, and ensure rapid turnover places an extra level of urgency and risk for both the patient and healthcare provider. It is during this period that the risk of inadvertent administration of either an incorrect medication or incorrect dose poses the most difficulty. So, during this period what can be done to minimize this risk and ensure patient safety? In addition, how can the needs of efficiency and facile throughput be reconciled with patient safety?

## Biography

A D John completed BA from Harvard University and MD from New York Medical College. He has undergone training in Internal Medicine at MetroWest Medical Center, Framingham; MA and Residency in Anesthesia and Critical Care Medicine at Johns Hopkins Hospital in Baltimore, MD; and a Fellowship in Cardiac Anesthesiology at the Massachusetts General Hospital in Boston, MA. He is an Assistant Professor of Anesthesiology and Critical Care Medicine at the Johns Hopkins University School of Medicine in Baltimore, MD. He is Co-editor with Sancho Rodriguez Villar for the publication, "Protocols in Critical Care" and Editor for "Essential Clinical Updates for Providers".

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