Intravenous literature: News-Medical.net report "In a study published in the Journal Archives of Internal Medicine on the 26th of April the causes of procedural failure and clinical errorâ€ by nurses in Australian hospitals were analyzed. The study found that nurses made at least one mistake or oversight in a whopping 80.2% of cases where they were administering drugs or other therapy to patients. These mistakes could range from not checking the patients identity before giving the drug to not washing hands. Researchers say that in some cases these mistakes could be fatal.

Professor Johanna Westbrook from the University of Sydney's Health Informatics Research and Evaluation Unit and the lead author of the study said that the more a nurse was interrupted in her work the more likely it was that they would make errors. â€œIn 80 per cent of administrations of medication there was at least one procedural failure or one clinical error What we showed is that if you were interrupted you we more likely to make one of those errors We found as interruptions increased within a single drug administration, the greater the severity of error(And) the risk of a patient experiencing a major clinical error doubled in the presence of four or more interruptions, she said. She specified that common interruptions were when â€œsomeone came to ask them a question and so they stopped what they were doing, or a patient asked them something or an alarm went off in the room and so they stopped administering a drug.â€ She said that there are hospitals that provide â€œDo not disturbâ€ vests to nurses while they administer drugs to minimize errors. But she believes that, â€œNot any one strategy is going to solve the problemâ€¦And because we haven't had the evidence (in the past) we haven't been educating clinicians about the potential dangers of interrupting each other.â€ Interruptions occurred during more than half (53.1%) of all

administrations, and each interruption was associated with a 12.1% increase, on average, in procedural failures and a 12.7% increase in clinical errors."

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