Children's Hospitals and Clinics of Minnesota Receives 2014 Intelligent Hospital Award

Infusion pump interoperability collaboration with CareFusion and Cerner wins award for Improving the Patient Experience: Care and Safety

SAN DIEGO, CA and KANSAS CITY, MO, Feb. 18, 2014 PRNewswire/ – The RFID in Healthcare Consortium (RHCC) and IntelligentHospital.org today announced that Children's Hospitals and Clinics of Minnesota has received a 2014 Intelligent Hospital Award for "Improving the Patient Experience: Care and Safety" for its infusion pump interoperability solution collaboration with CareFusion (NYSE: CFN) and Cerner (NASDAQ: CERN).

The solution connects the hospital's Alaris® System smart infusion pumps with the electronic health record (EHR)*Cerner Millennium®* through *CareAware Infusion Suite®*[1] and is designed to help reduce the risk of harmful and costly intravenous (IV) medication programming errors at the patient bedside. Children's Hospitals and Clinics of Minnesota is the first pediatric hospital system in the U.S. to enable bi-directional communication between the infusion pump and the EHR for both syringe pumps and large volume infusions.

"We are honored to receive an Intelligent Hospital Award for Improving the Patient Experience, but it is even more rewarding to know that this technology is improving patient safety in our hospitals every day," said Bobbie Carroll, senior director of patient safety and informatics at Children's Hospitals and Clinics of Minnesota. "Since we've implemented this solution, we have seen a 57 percent increase in smart pump drug safety parameters utilization, combined with a 37 percent decline in safety learning reports related to medication administration events."

The most common and dangerous types of medication errors are made in administering medications intravenously—especially when the patient is a child[2]. The error is most often because of how the medication is administered[3], and the dosage and timing of the medication must be calibrated precisely using calculations largely based on the patient's weight. This creates greater risk for children than adults because of their smaller size.

Utilizing *CareAware®* Device Connectivity and Alaris® Connectivity Services, the Alaris System can be wirelessly pre-populated with precise infusion order parameters directly from the *Cerner Millennium* EHR. Instead of manually programming the pump using the keypad, the pump is pre-populated with the patient's medication order after scanning the barcodes on the patient's ID band, on the medication to be administered and on the smart pump. Automatically programming the pump with the patient's medication order from the verified physician order in the EHR helps ensure accurate IV medication administration and documentation, and reduces opportunities for human error.

The interoperability of smart medical devices and HIT systems has become critically important, as the ability to automatically capture and manage patient data plays an increasing role in improving patient safety, clinical outcomes, staff productivity and financial performance. Most importantly, the added safety and efficiency of the new systems at Children's of Minnesota allows nurses to focus more attention on what is most important for everyone—caring for the patient.

Children's Hospitals and Clinics of Minnesota will be presenting key findings from their infusion pump interoperability solution at the Intelligent Hospital Pavilion of the Healthcare Information and Management Systems Society (HIMSS) Annual Conference and Exhibition, being held Feb. 23-27 in Orlando.

For more information, visit http://www.carefusion.com/emrinteroperability and https://www.cerner.com/solutions/Medical_Devices/Smart_Pump_Infusion_Integration/.

About BD

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[1] *CareAware Infusion Suite* and *Cerner Millennium* are registered trademarks of Cerner Corporation, Kansas City, Mo.

[2] "Integrated solution helps improve pediatric patient safety, streamline IV medication management," Carroll, B.,*Patient Safety & Quality Healthcare*, March/April 2013.

[3] Leape, L. L. et al. (1995), "Systems analysis of adverse drug events,"*JAMA*, 274, 35-43.

SOURCE CareFusion Corp.

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