

Class III Obese Patients Experience Adverse Events More Frequently

Class III obese patients are more likely than a patient in the general adverse event population to experience a harmful adverse event, according to information in the Pennsylvania Patient Safety Authority's March *Pennsylvania Patient Safety Advisory* released today.

The Authority analyzed 1,774 events submitted by Pennsylvania healthcare facilities over a five-year period in which class III obese patients were involved in a Serious Event (an event that caused harm to the patient). Serious Events accounted for 24% of the total number of reports submitted involving a class III obese patient. In comparison, the general adverse event patient population experiences a Serious Event in less than four percent of the time.

"Class III obese patients require special equipment that is big enough and strong enough to support them safely while they are in the care of others," Lea Anne Gardner, Ph.D., RN, senior patient safety analyst for the Pennsylvania Patient Safety Authority said. "Our analysis shows these patients experience equipment failures, treatment delays, and an overall higher risk of harm in the healthcare setting."

A further review of the Pennsylvania healthcare events identified 180 (10%) equipment-use event reports involving class III obese patients. In comparison, the general adverse event patient population equipment-related reports accounted for 0.8% of all adverse event reports in 2011. In July 2012, the Authority completed a statewide survey of Pennsylvania hospitals to determine how prepared they were to care for the class III obese patient population.

"Results from the Authority survey showed that thirty-six percent of respondents said that their hospital does not have an evacuation plan in place for moving class III obese patients to a safe location during an emergency," Gardner said. "We also found that more hospitals rent versus own equipment specifically made for class III obese patients. This may explain why, in some of the reports, patients had delays in treatment or equipment was not available."

Class III obese patients are identified as having a body mass index (BMI) greater than 40 or weighing at least 100 pounds more than their ideal body weight. From 2000 to 2005, the prevalence of individuals reporting a BMI greater than 40 increased by 50% and the prevalence of individuals reporting a BMI greater than 50 increased by 75%.

"Not all obese patients require special care and equipment, but class III obese patients have different needs," Gardner said. "Healthcare facilities need to be prepared to provide safe general medical care to class III obese patients whose size

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surpasses the capacity of present equipment.

"Class III obese patients should also know what kind of equipment a facility has available to meet their healthcare needs," Gardner added.

The Authority offers facilities guidance as to how they can provide safe care for class III obese patients that includes addressing patient equipment needs, staff education and sensitivity training, and structural considerations.

"There are several steps healthcare facilities can take to increase the safety of obese patients and staff caring for them," Gardner said. "Some of these steps are as simple as making sure class III obese patients have identification wristbands that are long enough to fit properly.

"Others may require more thought, such as where to place these patients if they need to be transferred to another unit quickly, but as the numbers of class III obese patients increase, the issue of delivering safe care to this patient population must be addressed," Gardner added.

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