

Screening for Adverse Drug Events (ADEs) Associated with Anticoagulants, Antidiabetics and Opioids



List of Targeted Medications and Potential Data Collection Measures

- 1. Screen patients for ADEs who are:
 - a. Medicare fee for service beneficiaries AND
 - b. Taking at least three total medications AND
 - c. Taking an anticoagulant, antidiabetic and/or opioid medication (Tables 1, 3 and 5). Providers may choose to focus on a sub-population of patients taking these high-risk medications.
- 2. "Screening" for ADEs means a patient is evaluated by a pharmacy/pharmacist or other health care provider for adverse outcomes resulting from medication use.
- 3. Each provider setting decides which measure(s) (Tables 2, 4 and 6) to use when determining if a screened patient has experienced an ADE. Based on practicality of obtaining data, a provider may determine that an individual ADE has occurred by using
 - a. One measure alone OR
 <u>Example:</u> Patient taking warfarin has an International Normalized Ratio (INR) > 4.
 - b. Two or more measures together <u>Example:</u> Patient taking insulin has blood glucose < 70 AND signs/symptoms of hypoglycemia.
- 4. Providers communicate to atom Alliance which measure(s) they will use and maintain consistency with those measures.
- 5. Providers will use the data collection tool provided by atom Alliance or another data collection method of the provider's choosing to collect data on all patients screened, whether ADEs are detected or not.
- 6. The following calculation will be used to determine the ADE rate in the screened patient population:

% ADEs in screened beneficiaries =
$$\frac{\text{Total number of ADEs reported}}{\text{Total number of beneficiaries screened for ADEs}} \times 100$$





Anticoagulants

Table 1: Anticoagulant Medications		
Apixaban (Eliquis®)	Argatroban	Dabigatran (Pradaxa®)
Dalteparin (Fragmin®)	Desirudin (Iprivask®)	Edoxaban (Savaysa®)
Enoxaparin (Lovenox®)	Fondaparinux (Arixtra®)	Heparin
Rivaroxaban (Xarelto®)	Warfarin (Coumadin®, Jantoven®)	

Table 2: Potential Data Collection	ction Measures for Anticoagulants	
Primary ADE of Concern: Bleeding		
Lab Values	Reversal Medications/Treatments	Clinical Scenarios
Measures for any Anticoagulant		
Hematocrit drop of > 3 points	Administration of fresh frozen plasma	Anemia due to blood loss
Guaiac positive stool		Blood transfusion without surgery
		Evidence of bleeding, including
		Epistaxis, Hematoma, Hematuria, Hemoptysis
		Hemorrhage, Spontaneous ecchymoses
		Abrupt cessation/hold of anticoagulant*
		Cardiac arrest*
		Life sustaining measures*
		Death*
Measures Specific to Warfarin		
INR > 4	Administration of Vitamin K	
INR > 5		
INR > 6		
Measures Specific to Unfractionated He	parin	
Partial Thromboplastin Time	Administration of Protamine	
(PTT) > 100		
Measures Specific to Low Molecular Wei	ight Heparin	
	Administration of Protamine	

^{*} Requires presence of another measure

Antidiabetics

Table 3: Antidiabetic Medica	tions	
Acarbose (Percose®)	Albiglutide (Tanzeum®)	Alogliptin (Nesina®)
Canagliflozin (Invokana®)	Chlorpropamide (Diabinese®)	Dapagliflozin (Farxiga®)
Dulaglutide (Trulicity®)	Exenatide (Byetta®, Bydureon®)	Glimepiride (Amaryl®)
Glipizide (Glucotrol®)	Glyburide (Diabeta®, Glynase®, Micronase®)	Insulin aspart (Novolog®)
Insulin detemir (Levemir®)	Insulin glargine (Lantus®)	Insulin glulisine (Apidra®)
		Insulin premixed (Humulin 50/50°, Humalog
Insulin lispro (Humalog®)	Insulin NPH (Humulin N°, Novolin N°)	75/25°, Humulin 70/30°, Novolin 70/30°,
		Novolog 70/30°)
Insulin regular (Humulin R®,	Linagliptin (Tradjenta®)	Liraglutide (Victoza®)
Novolin R°)		
Miglitol (Glyset®)	Metformin (Fortamet*, Glucophage*, Glumetza*,	Nateglinide (Starlix®)
	Riomet [®])	
Pioglitazone (Actos®)	Pramlintide (Symlin®)	Repaglinide (Prandin®)
Rosiglitazone (Avandia®)	Saxagliptin (Onglyza®)	Sitagliptin (Januvia®)
Tolazamide		

Note: Medications listed in bold are most likely to cause hypoglycemia.

Primary ADE of Concern: Hypoglycemia			
Lab Values	Reversal Medications/Treatments	Clinical Scenarios	
Blood glucose < 50	Administration of 50% dextrose	Abrupt cessation/hold of antidiabetic*	
Blood glucose < 60	Administration of glucagon	Life sustaining measures*	
Blood glucose < 70	Administration or oral glucose tabs/gel	Loss of consciousness*	
	Administration of juice or other sugary food/	Seizures*	
	beverage to reverse hypoglycemia	Death*	
		Signs/symptoms of hypoglycemia, including	
		Confusion*, Drowsiness*, Excessive sweating*,	
		Tachycardia*, Trembling* and Weakness*	

^{*} Requires presence of another measure

Opioids

Table 5: Opioid Medications		
Alfentanil (Alfenta*)	Apomorphine (Apokyn®)	Codeine (Tylenol #3 or #4°)
	Fentanyl (Abstral® Actiq®, Duragesic®, Fentora®	Hydrocodone (Hycet®, Hydromet®, Lorcet®,
Dihydrocodeine	Lazanda®, Subsys®)	Lortab [®] , Maxidone [®] , Norco [®] , Reprexain [®] , Vicodin [®] ,
		Vicoprofen®, Xodol®, Zohydro®)
Hydromorphone (Dilaudid®, Exalgo®)	Meperidine (Demerol®)	Methadone (Dolophine®)
Morphine (Avinza *, Duramorph*,	Oxycodone (Endocet®, Endodan®,	
Embeda®, Kadian®, MS Contin®, Opium	Magnacet®,Oxecta®, Oxycontin®, Percocet®,	Oxymorphone (Opana®)
tincture)	Primlev*, Roxicet*, Roxicodone*)	
Sufentanil		

Table 6: Potential Data Collection Measures for Opioids Primary ADE of Concern: Accidental Overdose/Oversedation/Respiratory Depression		
	Administration of naloxone	Abrupt cessation/hold of opioid*
		CNS depression
		Death*
		Decreased oxygen saturation
		ETCO2 alterations
		Fall*
		Life sustaining measures*
		Oversedation
		Respiratory arrest
		Respiratory depression (e.g. < 8 or < 10 breaths/
		minute)

^{*} Requires presence of another measure

Resources Used to Compile List of Possible Data Collection Measures

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- Tennessee Center for Patient Safety/Tennessee Pharmacists Coalition Final ADE Measures. Available at: http://www.tnpatientsafety.com/SafetyQualityInitiatives/AdverseDrugEventsADE/PharmacyResources/tabid/312/Default.aspx. Accessed 6/23/15.

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