An Institute of Medicine report estimates the mortality from preventable medication errors at 7,000 deaths each year (1). Children are at increased risk for medication errors because of weight-based dosing, limited FDA indications and human calculation errors.

It was hypothesized that in the pediatric patient, implementation of new modalities such as CPOE and drug prescription writing electronic programs, errors would decrease.

Are we Training medical students in the art of prescription writing correctly?

### Goals/Objectives

Goal: Improve the educational process for prescription writing for all patients particularly for pediatric patients

Objectives:

1. Describe the essential parts of writing a prescription.
2. Demonstrate an ability to write a correct hand written prescription
3. Demonstrate ability to calculate a weight-based drug calculation for pediatric patients.
4. Learn/discuss safe prescribing practices.
5. Analysis sample prescriptions for errors

### Methods/Educational Interventions

Suggested Educational intervention module flow:

- Flipped classroom prior reading: [http://medicalschoolhq.net/prescription-writing-101](http://medicalschoolhq.net/prescription-writing-101)
- Didactic presentation: “Introduction to Writing prescriptions/Safe medication practices” PP slides. (60 Minutes)
- Small group exercises: Hands-on exercises, group critics prescriptions and identifies safe prescribing practices (15 minutes)
- Large group exercises where entire group reconvenes to review each groups sample.
- Prescription writing exercise-multiple sample cases: students review & present findings
- Facilitate discussion/incite/review principles and make corrections from the above cases.

### EVALUATION PLAN

- Prescription writing skills in a pre/post course test.
- Self evaluation-med students/residents groups
- Individual/Group evaluations of the instructors

### IMPACT/LESSONS LEARNED

- Improve medical students/resident skills in prescription writing
- Decrease adverse events in medication errors

### REFERENCES

1. Institute of Medicine (1999). *To Err is Human: Building a Safer Health System.*

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