

164

REDUCTION OF IPRATROPIUM UTILIZATION IN HOSPITALIZED PATIENTS THROUGH PHYSICIAN EDUCATION (B4), Sarah Deines, Kyle Kojiro. Legacy Health System, Portland, OR (sdeines@lhs.org) IRB approval pending.

Ipratropium containing products comprise a major expense to health care systems. Aside from acute asthma exacerbations in emergency department patients, there is little evidence to support the routine use of ipratropium in hospitalized patients. National guidelines discourage the use of ipratropium as a first line agent in COPD, and advise against continued in hospital use in patients with asthma. In addition, recent publications have raised concern about the potential cardiovascular risk of anticholinergic inhalers. The goal of this project is to reduce the unnecessary and inappropriate use of ipratropium in both hospitalized adult and pediatric patient populations through education of health care providers. A baseline cross sectional chart review will be conducted to assess current ipratropium prescribing practices. After the baseline assessment, education on the evidence, risks and costs of ipratropium therapy will be provided to Legacy physicians, medical residents, respiratory therapists, and pharmacists. After completing the educational sessions, a second cross sectional chart review will be performed to evaluate changes in prescribing practices. The goal for this intervention is a 20% reduction in the number of patients prescribed ipratropium containing products. If the goal is realized and the results are projected system-wide, this intervention has the potential to save the

health system \$60,000 a year on albuterol/ipratropium combination inhalers alone. The results will be discussed.