VA MedSAFE

VA Center for Medication Safety

MUET: Medication Use Evaluation Tracker

A RESOURCE FOR OPTIMIZING THERAPY AND PATIENT OUTCOMES

Medication **U**se **E**valuation **T**racker (MUET) is VA's very own state-of-the-art, data-driven, web application developed by the VA Center for Medication Safety (VA MedSAFE) for assessment of potentially at-risk patients. This program allows providers to follow patients that require additional monitoring or change in therapy due to an identified safety risk for action and intervention (where clinically appropriate) in an effort to ensure optimal care and prevent adverse outcomes.

MUET GOALS

- To provide VA medical centers with secured lists of target patients that meet pre-set criteria for intervention.
- To enable these interventions to be recorded into a centralized database for real-time tracking and reporting.
- To optimize patient outcomes while maintaining evidence-based standards of care.

MUET PROCESS

- ***At-risk*** patients are identified centrally and loaded into secure MUET web application at pre-determined time intervals as ***Pending Interventions***.
- Locally designated clinicians access MUET to address the issue at hand. Responses are stored as ***Completed Interventions*** and can be used for tracking, reporting, or further analysis at the national, VISN, and facility levels.

DEFINITIONS

- **At-risk:** Prescribing inconsistent with approved criteria; deficiencies in monitoring; identification of adverse events which prompt re-evaluation of drug therapy.
- **Pending Intervention:** Record for a patient identified to meet pre-set criteria for intervention that has not been completed.
- **Completed Intervention:** Record for a patient identified to meet pre-set criteria for intervention that has documented follow-up and actions.

medication safety solutions for your patient-care needs

FROM THE VA NATIONAL PHARMACY BENEFITS MANAGEMENT SERVICES (PBM) AND CENTER FOR MEDICATION SAFETY (VA MEDSAFE)

TARGET DRUG DISCONTINUED

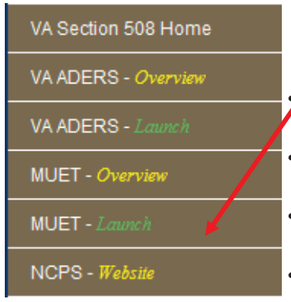
FIGURE 1. Drug discontinuations represent one form of intervention that may result from evaluating pharmacotherapy of at-risk patients identified by MUET. Reasons for discontinuation are indicated by shaded areas.

- Adverse drug event (N=11 or <1%)
- No longer indicated (N=1735 or ~ 36%)
- New drug started to replace target drug (N=998 or ~ 21%)
- Other reason (N=797 or ~ 17%)
- Drug discontinued prior to review (N=1272 or ~ 26%)

IMPACT

MUET facilitates national-level assessments of patients with a potential risk for developing an adverse outcome based on factors such as non-adherance to evidence-based standards/criteria and/or monitoring requirements. For all initiatives over all time, the target drug was documented as discontinued in 4813 interventions (Figure 1 and Table 1). While this is not an exact quantification of adverse events prevented by the MUET tool, it does demonstrate substantial impact where an at-risk population is documented to no longer be receiving the target drug.

WHERE AND HOW TO ACCESS MUET



https://medora.va.gov/MedSafe_portal/

- ***Click*** MUET Launch
- ***Select*** VISN/Station - Use VISTA sign-in access/verify codes
- ***Click*** on desired initiative from drop-down window
- ***Click*** on patient list from most recent month

For more information about MUET, contact Von.Moore@va.gov and/ or Muriel.Burk@va.gov .

TABLE 1. Targeted interventions for at-risk patients per initiative facilitated by MUET application.

IMPACT POTENTIAL	2012	JANUARY	FEBRUARY	MARCH	APRIL	MAY	JUNE
ESA INITIATIVE	Pending Interventions	904	996	977	1025	1108	1047
	Completed Interventions	273	234	303	270	239	234
	Total Unique Patients Screened	4707	4512	4745	4634	4766	4603
GLYBURIDE INITIATIVE	Pending Interventions	178	170	163	176	198	205
	Completed Interventions	101	80	89	56	53	19
	Total Unique Patients Screened	35,941	33,655	34,673	32,368	33,968	31,399
DABIGATRAN INITIATIVE	Pending Interventions	N/A	N/A	N/A	N/A	299	328
	Completed Interventions					137	67
	Total Unique Patients Screened					2,638	2,621

COMPLETED INITIATIVES

Pseudoephedrine and excessive quantities

High dose citalopram prescribing

Sevelamer and excessive quantities

ACTIVE INITIATIVES

Erythroropoeisis-stimulating agents (ESA) and Hgb

Glyburide use in eldery with renal insufficiency

Dabigatran use in the presence of risk criteria

INITIATIVES IN DEVELOPMENT

Amiodarone monitoring

FEEDBACK FROM MUET USERS

- Great safety net to help manage patients that fall through the cracks.
- Useful QA/QI tool.
- Excellent educational opportunity for providers.