

## **Implementation of Computerized Physician Order Entry for Chemotherapy: A Latin American Experience.**

Valencia FS, Ruiz R, Neciosup SP, Mas LA, Aliaga KM, Huaman F, Ruiz J, Vasquez E, Llacctahuaman N, Pedraza R, Paz M, Aguirre W, Gomez HL.

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### Abstract

**PURPOSE:** We describe the implementation process of a computerized physician order entry (CPOE) for outpatient chemotherapy at a Latin American hospital, with the intent of providing other institutions with general guidance and insight through our experience. **METHODS:** In 2012, under the direction of the Department of Medicine of the Instituto Nacional de Enfermedades Neoplásicas, a multidisciplinary team composed of oncologists, nurses, pharmacists, and informatics engineers was formed to develop software for a CPOE for chemotherapy within a preexistent homegrown electronic medical record system in various phases. This included mapping and redesigning processes in an entirely electronic format, integrating the needs of the user for the development of electronic order sets, developing a checkpoint and a warning system to minimize prescription errors, and finally, training all the staff in implementation of the system. **RESULTS:** A CPOE for outpatient chemotherapy was successfully implemented in 2016. We have successfully standardized 266 chemotherapy orders, including for both solid tumors and hematologic malignancies, on the basis of appropriate guidelines. The software is linked to laboratory results and allows entry of important details for the patient's safety, such as anthropometric information for an automatic dose calculation and ranges for safe prescription. In addition, it is linked to the nursing plan sheets. Finally, it is possible to assess and continuously monitor the complex process of chemotherapy prescription. **CONCLUSION:** This is the first report of implementation of a CPOE for chemotherapy in our region. The system was designed by a multidisciplinary team with its own resources. Our experience demonstrates the feasibility of computerizing the chemotherapy prescription process, constituting a tangible example for other institutions with potential impact on patient care.

## **Chemotherapy and dialysis: A challenge.**

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### Abstracto

España es uno de los países europeos con mayor prevalencia de enfermedad renal crónica, con una población de más de 4 millones de pacientes. De estos, se hallan en tratamiento sustitutivo renal 31.735 entre los programas de trasplante renal, diálisis peritoneal y hemodiálisis (HD), de los cuales 23.709 personas pertenecen a este último grupo, con impacto mayor en hombres que en mujeres. Las causas de la enfermedad renal crónica terminal (ERCT) son múltiples (diabetes, glomerulopatías, enfermedades vasculares, etc.); en estos pacientes el tratamiento sustitutivo ha demostrado beneficio e incremento de la esperanza de vida.