Clinical Alerts – the importance of reporting

Clinical Alert: A condition which has the potential to be of critical importance to a patient's management during the first 24 hours of their admission to hospital.

Steps to report a new Clinical Alert

Identification of a new clinical alert

- by doctors, nurses, pharmacists and clinical coders

Examples of clinical alerts:

Medication: Serious/life threatening adverse drug reaction (ADR)

- e.g. anaphylaxis, Stevens-Johnson Syndrome

• Medical: e.g. Pacemaker insertion, myasthenia gravis, asplenia, advanced

health directive

Anaesthetic: e.g. difficult intubation, malignant hyperthermia

2

Document on your hospital's MRALERT2 form

- Complete the form by selecting the appropriate clinical alert code (ONE condition only per form).
- Submit the completed paper form to the ward clerk.

Clinical alerts should also be documented:

- · in the patient's medical record
- on the WA Hospital Medication Chart for ADRs
- in the discharge summary (NaCS).



3

Approved clinical alerts are added to web PAS/TOPAS (by clerical staff)

• The submitted clinical alert is reviewed by the Clinical Alert Committee which will either 'Approve' or 'Reject' the submission.

4

How to access the patient's clinical alert information

- Clinical alerts will appear in iSoft Clinical Manager with 'MEDALERT EXISTS FOR THIS PATIENT' appearing on patient profile.
- Details can be viewed by selecting 'Allergy/Comments' when on the 'Patient Info' tab.

