USING ARTIFICIAL INTELLIGENCE (AI) TO CREATE A SCORING SYSTEM TO REDUCE ALERT FATIGUE AND IDENTIFY RELEVANT QT DRUG-DRUG MEDICATION ALERTS FOR PEDIATRIC PATIENTS

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METHODS

This project will review pediatric patients with and without QT interval prolongation and find risk factors to create a scoring tool that will be implemented into the electronic health

POPULATION

Pediatric patients admitted to Monroe

VOLUME OF QT DRU



DEVELOPMENT OF ARTIFICAL INTELLIGENCE CLINICA Validation Implement Development of CDS using AI External validation **Review unexpected** Compare to practice standards predictions Anticipate further Solicit feedback from stakeholders inaccuracies with minority **Review viability** subgroups Implement as pilot in small cohort **QT DRUG-DRUG ALERTS BY MEDICATION AND OVERRIDE RATE Duplicate Therapy** 25% Override Rates (Medication) Alert Description Alert Status (group) FLUCONAZOLE / OT PROLONGING AGENTS Removed or Canceled 2% QUETIAPINE / QT PROLONGING AGENTS Overridden emoved or Canceled 4% HYDROXYZINE / QT PROLONGING 94% AGENTS Removed or Canceled 6% METHADONE (NON MAT) / SELECTED Overridder Removed or Canceled 📃 2% AZITHROMYCIN / OT PROLONGING Removed or Canceled 4% AMIODARONE / QT PROLONGING AGENTS Overridder 100% Removed or Canceled 0% Drug-Drug 22%

Overri	de Rates By Alert	Туре		Med Al Drug-D	ert Type rug
•	METHADONE (NON N SELECTED ANTIPSYCHOT PROLONG QT	ИАТ) / ICS THAT	FLUCONA	ZOLE / QT PROL AGENTS	ONGING
	HYDROX	YZINE / QT PROLO AGENTS	NGING	QUETIAPINE / Q	T PROLONGING NTS
300. Disco	0 400.0 ount Count of Alerts	500.0	600.0	700.1	D
De Incorpor population Assess participation Discomin	emonstrate ate into larger on atient outcomes		• Pee • Mia • Cor	Dissemi er review grate into EH ntinual impr	nate IR systems ovement





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