

## ACADEMIC MEDICAL PROFESSIONALS INSURANCE EXCHANGE RISK RETENTION GROUP

1250 Broadway, Suite 3401 New York, NY 10001

www.academicins.com

Tel: 646 808 0600 Fax: 646 808 0601

AHPIA Solutions, Inc. Attorney-in-Fact

## Groups target alarm fatigue at hospitals

Accrediting panel finds problem worsening

By Liz Kowalczyk, Globe Staff | April 18, 2011

The national organization that accredits hospitals will tackle the failure of medical staff to respond to patient alarms, making it a top priority this year. The decision follows a growing number of instances in which desensitized nurses didn't hear or ignored beeping monitors warning that a patient was in trouble.

"There is uniform agreement that this is a major problem" that appears to be worsening, Dr. Paul Schyve, a senior vice president at the Joint Commission, said in a telephone interview. The Illinois organization has decided that the issue, referred to as alarm fatigue, will be one of a small number it focuses on in 2011, and it plans to meet with Food and Drug Administration officials and pinpoint a strategy over the next few months, he said.

The FDA said Friday that it already has been discussing with two industry groups the development of "a strategic approach" to alarm fatigue.

These decisions come two months after a Boston Globe investigation identified at least 216 deaths nationwide between January 2005 and June 2010 linked to alarms on patient monitors that track heart function, breathing, and other vital signs. In many cases, medical personnel didn't react with urgency or didn't notice the alarm, a type of desensitization that occurs from hearing alarms — many of them false — all day long.

The Globe based its numbers on an analysis of an FDA database of problems involving medical devices. Because the health care industry fails to report many cases, some believe the number of deaths actually is far higher.

In Massachusetts, the Globe identified at least 15 alarm-related deaths in the past six years.

In one case, at UMass Memorial Medical Center in Worcester, nurses failed to respond to an alarm that sounded for about 75 minutes, signaling that a patient's heart monitor battery needed to be replaced. The battery died, so when the patient's heart failed, no crisis alarm sounded.

In another instance at Massachusetts General Hospital last year, an elderly man suffered a fatal heart attack while the crisis alarm on his cardiac monitor was turned off and staff did not respond to numerous lower-level alarms warning of a low heart rate. Nurses told state investigators they had become desensitized to the alarms.

"If you have that many alarms going off all the time, they lose their ability to work as an alarm," Schyve said.