Perioperative Amiodarone in Cardiovascular Surgery: Pharmacist Dosing Service

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Background

Atrial tachycardias\textsuperscript{1,3}
- Most common post-operative complication in cardiac surgery patients
- Increase hospital stay 1.4 days
- Increase cost by >$6300 per patient

Amiodarone

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Methods

1. Identify targeted patient population for amiodarone use
2. Develop "Pharmacist to Dose Perioperative Amiodarone Protocol" 
3. Develop CV Department and pharmacist workflow for consult service
4. Implement protocol and workflow
5. Measure and evaluate results
   - Primary outcome:
     - Incidence of post-operative atrial fibrillation
   - Compared to historical cohort using Fischer Exact

Results

Identify targeted patient population for amiodarone use

Patients undergoing CABG and/or valve surgery during current inpatient stay

Excluded:
- Clinic patients
- Same-day interventional patients being discharged home and returning for elective surgery

Develop "Pharmacist to Dose Perioperative Amiodarone Protocol"

- Collaboration with CV surgeons and electrophysiologists
- PAPABEAR trial as protocol basis
- (see provided handout)

Develop CV Department and pharmacist workflow for consult service

Workflow

1. CV surgeons and extenders identify patients for pharmacist evaluation
2. Pharmacist evaluation using protocol
3. Initiate amiodarone (if determined appropriate)
4. Pharmacist patient education
5. Progress note placed in chart with plan
6. Daily evaluation by pharmacist and provider for amiodarone continued appropriateness
7. Update amiodarone orders during transitions of care (post-operative and discharge)

Conclusions

- Patients receiving the pharmacist dosing protocol had a numerically lower incidence of post-operative atrial fibrillation
- Number of patients included was low and statistical significance was not reached
- Data collection on-going
- Using a pharmacist protocol for dosing amiodarone in cardiovascular surgery may be effective to increase amiodarone use and decrease post-operative atrial fibrillation.

References