



U.S. Pharmacopeia  
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CONTACT: Laura Provan  
301/816-8268; [lnp@usp.org](mailto:lnp@usp.org)

## USP Transitions Medication Error Reporting Programs

**Rockville, Md., December 4, 2008** — In a decision to focus full attention and resources on its core standards-setting activities, USP will transfer its reporting programs, MEDMARX® and the Medication Errors Reporting (MER) Program, to Quantros and the Institute for Safe Medication Practices (ISMP), respectively. This decision in no way signals a shift by USP away from its important patient safety efforts. Rather, USP will use data from these and other programs to enhance its standards-setting activities to promote patient safety and safe medication use. USP will take advantage of the growing number of new Patient Safety Organizations (PSO) to inform the product and practice standards established by its standards-setting body, the Council of Experts. The PSO is a designation created by the Federal Patient Safety and Quality Improvement Act of 2005 to encourage clinicians and healthcare organizations to identify, analyze, and reduce the risks and hazards associated with patient care, including errors associated with the administration and use of medications.

USP's leadership in medication error reporting and prevention has been an important part of its public health activities for several decades, with major contributions based on the work of distinguished volunteers in USP's Council of Experts using data and information from MEDMARX and the MER Program. "USP has been an incubator for groundbreaking pilot programs in the arena of medication error data collection, analysis and reporting," stated Roger L. Williams, M.D., USP's executive vice president and CEO. "These programs have reached the level of development where there is greater benefit to public health for USP to transfer core activities of these programs to our strategic partners, who will bring the programs to the next level of effectiveness and impact." USP will maintain access to the data from the two programs so it can be used in standards-setting activities of the Council of Experts and, particularly, in those Expert Committees that speak directly to practitioner interests. These and allied standards-setting activities are outlined in the USP Board of Trustees' new strategic plan ([www.usp.org/aboutUSP/whereWereGoing.html](http://www.usp.org/aboutUSP/whereWereGoing.html)).

USP began collecting medication error data through its own programs in 1991, but has been involved in analyzing such data for more than 30 years. USP found early on that information gleaned from error records added a medication safety component to its product standards and later led the way for its work in practice standards. USP also played an important role in the drafting and enactment of legislative changes such as the Patient Safety and Quality Improvement Act of 2005. USP continues its 188-year commitment to medication safety through its core mission of standards setting.

The following provides further information about USP reporting programs, medication safety standards setting and continued patient safety activities.

- **Expert Committees:** USP's Safe Medication Use (SMU) and Nomenclature Expert Committees will continue their crucial work on setting standards for nomenclature, packaging, labeling and naming of medications to help ensure their safety.
- **National Coordinating Council for Medication Error Reporting and Prevention (NCC MERP):** In 1995, USP spearheaded the formation of NCC MERP. Fourteen leading national health care organizations came together for the first time to collaborate on addressing the interdisciplinary causes of medication errors and to promote the safe use of medications. USP will continue in its role as secretariat for NCC MERP and its 25 member organizations. Information about NCC MERP is at [www.nccmerp.org](http://www.nccmerp.org).

#### Headquarters

12601 Twinbrook Parkway  
Rockville, Maryland 20852  
+1-301-881-0666

#### Europe/Middle East/Africa

Münchensteinerstrasse 41  
CH-4052 Basel, Switzerland  
+41 (0)61 316 30 10

#### USP-India Private Limited

ICICI Knowledge Park  
Genome Valley  
Labs 7-10, Phase III  
Turkapally, Shameerpet  
Ranga Reddy District  
Hyderabad 500 078, A.P., India  
+91-40-2348-0088

#### USP-China

Building 11  
Lane 67 Libing Road  
Zhangjiang Hi-Tech Park  
Shanghai, 201203, China  
+86-21-51370600

#### USP-Brazil

Avenida Ceci, 1600 - Tamboré  
Barueri/SP, Brazil  
06460-120  
+55-11-3245-6400

- **Drug Error Finder:** The Drug Error Finder database was launched by USP earlier in 2008 to provide clinicians and patients with a tool to help identify medications with look-alike/sound-alike names that are most frequently involved in the most harmful errors. USP will not add to the database going forward, but will leave it posted at [www.usp.org/hqi/similarProducts/drugErrorFinderTool.html](http://www.usp.org/hqi/similarProducts/drugErrorFinderTool.html) for free access in the interest of public health.
- **MEDMARX:** For the past year, USP has worked closely with Quantros, a healthcare technology company recently named as a PSO, to create a more robust database of medication and other medical errors, and to deliver the output to a larger base of providers through an improved user interface. Quantros is well positioned to take over the complete MEDMARX operation, from data collection to analysis to dissemination. In the interest of public health and to assist practitioners and patients, USP will post its five years of MEDMARX data and eight annual reports on [www.usp.org/hqi](http://www.usp.org/hqi) for free, ensuring full access to this clinically important information. All queries about MEDMARX should be addressed to Quantros ([www.quantros.com](http://www.quantros.com)).
- **Medication Errors Reporting (MER) Program:** Since 1991, USP has had a strong partner in the Institute for Safe Medication Practices in creating this key reporting program, which has become a national model for healthcare professionals and patients to report medication errors on a confidential basis. ISMP will continue to use these reports to affect changes in products and practice both nationally and internationally. ISMP's PSO designation makes it the right organization to move the MER program forward. All queries about MER should be addressed to ISMP ([www.ismp.org](http://www.ismp.org)).

Please direct media inquiries to [mediarelations@usp.org](mailto:mediarelations@usp.org).

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The United States Pharmacopeial (USP) Convention is a private, non-profit, standards-setting organization that advances public health through public standards and related programs that help ensure the quality, safety, and benefit of medicines and foods. USP's standards are recognized and used worldwide. For more information about USP visit <http://www.usp.org/newscenter>. **FY0921**