Nurses' Experiences of the Most Common Medical Errors in the Intensive Care Unit and the Coronary Care Unit A Hermeneutic Phenomenological Study

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Abstract:

**Background:** Human errors occur in every profession. Medical errors can result in an incident or an actual injury to a patient who has nothing to do with the underlying disease. Intensive care is one of the highest prevalence of medical errors and patient injury in any particular medical field, believed to be related to the rapidly changing patient status and complex diagnoses and treatments.

**Aims:** The primary aim of this study is to investigate whether nurses' experiences of the most common medical errors in intensive care and cardiac intensive care.

The secondary aim: to assess the nature, consequences and associations of medical errors in ICU / CCUs to investigate the factors influencing nurses' errors and to propose strategies to prevent errors.

**Setting:** Five intensive care units (ICU) and two cardiac intensive care unit (CCU) in five public hospitals and a cardiac care unit at a private hospital in the West Bank in Palestine.

**Participants:** Fifteen nurses (12 ICU nurses, three CCU nurses) who have at least worked for four years in the critical and cardiac care units.

**Design:** Using a qualitative approach, a hermeneutic phenomenological method. Semi-structured interviews guided by an interview guide.

**Results:** Nurses' experiences of the most common medical errors in ICU and CCU presented in nine themes: medication errors, equipment errors, the patient's fault monitoring, resuscitation errors, nursing practice error, intravenous solutions errors, nursing care errors, documentation and evaluation errors and communication errors between the health team.

**Conclusion:** Practical nurses made significantly more medical errors than staff nurses. Working frequent shifts of 24 hours is a strong factor for committing medical errors. Increase the competence and the number of nurses per patient and reduce the number of working hours can reduce medical errors and address patient safety in intensive and cardiac care units.

**Keywords:** nurses' experience; intensive care; cardiac care unit; medical errors; patient safety; hermeneutics; phenomenology.

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