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From tragedy, a mission

His daughter, 2, died of a medication error. Now, he promotes safety.

By Michael Cohen
 FOR THE INQUIRER

Emily Jerry was just 2 years old when she died from a medication error made by a pharmacy technician in a Cleveland hospital. She had undergone surgeries and four rounds of chemotherapy to treat what doctors said was a highly curable malignant tumor at the base of her spine.

Emily's past treatments had been so successful that her last MRI showed the tumor had miraculously disappeared, her parents say. This last treatment on her second birthday was just to be sure that no traces of cancer were left inside her. Tragically, the technician mixed her final dose of chemotherapy improperly, in a saline solution that was 23 times more concentrated than it should have been.

Emily woke up after her treatment and asked her mom to hold her in her lap. She began to grab her head and moan that it hurt.

Spotting her mom's can of Coke, she begged to have a sip. Then, in a few seconds, she drank the entire can. The massive amount of saline had already begun to cause her brain to dehydrate. She began crying again about her head hurting and then became limp.

Within the hour, she was on life support, and the next morning, doctors met with Emily's parents to break the news that Emily was brain-dead. Instead of holding a planned belated birthday and cancer-free party for Emily in the coming days, their little girl was delivered to the Cuyahoga County morgue.

Because Eric Cropp was



After Emily Jerry, 2, died, Chris Jerry campaigns for safer pharmacy practices.



the supervising pharmacist that day and was in a position to catch the error, many family members as well as the media came down hard on him publicly. The Ohio State Board of Pharmacy and, later, the county prosecutors agreed that Cropp was responsible for the toddler's death because he had overseen the preparation of her chemotherapy. Cropp spent six months in the county jail.

As I've written before at www.philly.com/checkup, I completely understand the angst and the call for retribution by families after a fatal medical error. I also recognize that they need someone to blame for their horrific loss.

But I truly admire one family member who took a different path, Chris Jerry, Emily's dad. Almost from the start, he opposed Cropp's jailing, and now, he says, he has even forgiven him. In fact, Chris Jerry and Eric Cropp have been working together, traveling around the country to speak at pharmacy meetings on the vital importance of safety



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practices. I have received several e-mails from colleagues around the country who have attended these programs — “enthraling” is how they describe them.

Like me, Jerry believes that the greater good is served by focusing on system failures that enable tragedies like this to occur in hospitals. He argues that by focusing on those involved in the error, it is too easy to avoid addressing the many contributing factors, such as those that literally set Cropp and the pharmacy technician up for failure.

Our real power to protect patients lies in the systems we build around imperfect human beings. By “systems,” I mean the clinical processes, technology, and environment of the groups providing care.

Jerry has also established the Emily Jerry Foundation in his daughter's name. Among its many objectives is to establish state and federal legislation that ensures strict controls in professional training, education, and testing. At the time of the error, the Ohio board did not even require the registration of pharmacy technicians. There were no standards for training and no licensing or certification requirements. That has changed in Ohio, thanks to Emily's Law, which was enacted in 2009. To qualify, pharmacy technicians now must be 18 years old or older, possess a high school diploma,

have no felony convictions, and pass a competency exam approved by the Ohio board.

No such requirements exist in Pennsylvania. Registration is required in New Jersey.

Jerry is also working with existing groups dedicated to improving patient safety. Recently, he gave the opening presentation at a two-day medication-safety summit that my organization conducted here in Philadelphia, with nearly 60 experts from around the United States. The summit's focus was on safe preparation of solutions that are given to patients intravenously. Jerry eloquently set the tone of the meeting with the mantra “we can do better.”

While humans will make mistakes, we can build stronger systems to prevent errors before they hurt patients.

Chris Jerry worries, as we do, that regulatory and accreditation agencies have not learned enough from his family's tragedy. He hopes, as we do, that all hospitals will adjust their systems to prevent the same type of error. If not, the death of his little girl is a heartbreaking commentary on health care's inability to learn from its mistakes.

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