

Medication incidents in primary care (MIPC)

Initial reporting (Version 1.0, January 25th 2015)

Internet version: not available in English

1. Sentinella identification number:
2. Number of physicians within your practice:
3. Number of them who report to Sentinella
4. Your weekly workload, h/w: <16 , 16-30 , >30
5. Number of hours within your practice (%): <50% , ≥50%
6. Approximate proportion of medication prescribed (as compared to directly delivered drugs): <33% , 33-66% , >66%
7. Do you have an X-ray (machine)? yes no
8. Do you have an ECG? yes no
9. Do you have an ultrasound? yes no
10. Do you have an electronic system for controlling electronic drug interaction? yes no
11. Do you have electronic patient history documentation? yes no
12. Do you prescribe electronically? yes, with a medication thesaurus
yes, but without one (use of a typewriter) no
13. Is your practice certified (e.g. EQUAM)? yes no
14. Do you regularly schedule team sessions? Yes, at least monthly , yes, but less frequently , no
15. Do you attend quality circle sessions (in accordance with "Hausärzte Schweiz")? yes, regularly , yes, now and then , no
16. Did you complete a special education (e.g. manual or psychosomatic medicine), or do you have special interests (e.g. toxic maniac patients)? yes , no ,
if yes, please specify :
17. Are you contracted by an institution? yes , no ,
if yes, please specify (prison, home etc.):
18. If yes, does this institution have specific problems with medication?
yes , no , if yes, please specify:
19. Are you involved in other special activities (teaching, research, insurance doctor)? yes , no ,
if yes, please specify the kind of activity:

Thank you very much!