Prescription errors are simply defined as any error in the prescribing of medication which is preventable while it has not reached the patient yet and could lead to detrimental consequences depending upon its nature. A prospective observational study was conducted for 3 months in which 4502 prescriptions were observed for any errors. The study was conducted in three tertiary care university teaching hospitals of Karachi, Pakistan. A total of 4502 prescriptions were observed for errors in which 3422 prescriptions (76%) contained different types of errors however 1080 prescriptions (24%) were found to be correct. Medication errors were general and could be prevented through counter checking. These errors may mislead the pharmacy thus putting patient’s life at risk. Consulting a pharmacist may reduce the technical errors generally made by allied health care professionals (Ref: Nadia Jameel, Rabiya Kanwal, Atta Abbas. An account of prescription errors in tertiary care university teaching hospitals of Karachi, Pakistan. Medical Science, 2014, 15(62), 39-41). (Image: http://css.drugwatch.com).
An account of prescription errors in tertiary care university teaching hospitals of Karachi, Pakistan
Nadia Jameel, Rabiya Kanwal, Atta Abbas

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Medical Science, 2014, 15(62), 39-41

CASE REPORT
MEDICAL MICROBIOLOGY

Candida lipolytica causing post-traumatic gluteal abscess in a healthy young patient: case report and review of literature

Candida lipolytica is a yeast pathogen with ubiquitous presence in soil. It is industrially important as a source of lipase enzyme. We here describe a case of subacute gluteal abscess developing in a young, healthy, immunocompetent patient following fall from tree, caused by Candida lipolytica. The isolate was identified by dry, cerebriform colonies on Blood agar and Saboraud's dextrose agar, urease and lipase positivity on Egg yolk agar, yeast cells at tip of pseudohyphae and true hyphae but no along its length by Dalmau technique and in vitro susceptibility to Fluconazole by Disc diffusion method on Mueller-Hinton agar supplemented with 2% glucose and 0.5 µg./ml Methylene blue. The case highlights the clinical and epidemiological importance of proper identification of rare yeast isolates from purulent lesions.

Medical Science, 2014, 15(62), 42-43