

Reconciliation of medications from hospital discharge summaries

A primary care experience

Background to the Karori Medical Centre

- Every day the Centre receives an electronic list of all discharges from CCDHB
- Last year there were 1,300 in patient discharges and 1,800 ED discharges
- In an effort to reconcile medications we offer a free consultation to patients when they are discharged

Audit of discharge summaries was done in three phases:

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- Phase 1 was to identify the timeliness of the arrival of the discharge summary
 - Phase 2 was to determine the accuracy of medication reported on admission and discharge
 - Phase 3 was to explore reconciliation methods

Phase 1 .. timeliness

Time	EDS	EDS	+FAX	+FAX
	Oct %	Nov%	Oct%	Nov%
	(71)	(52)		
24hrs	59	60	63	62
2-7days	13	12	16	19
8-14	4	2	4	2
	76%	73%	83%	83%

Phase 2 .. Accuracy of admission data

Month	October	November
number	103	89
Admission Rxs Stated	23%	21%
Accuracy	46%	71%

Phase 2 accuracy of discharge medications

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- This was qualitative and the errors were small in number
 1. Error due to timeliness (clopidogrel)
 2. Ditto (warfarin stopped in hospital)
 3. Possible dosage errors (admission vv discharge) 15
 4. Dosage error (calcitriol 1.25mcg vv0.25mcg)

Phase 3 reconciliation

- ❑ Dedicated pharmacist working in KMC
- ❑ Drs did not want drug chart changed
- ❑ Changes noted in case notes and “light bulb”
- ❑ Changes to Medtech prescribing module

Summary and Solutions

- ❑ We need to start with accurate recording..and this applies to both KMC and hospital (MMH)
- ❑ Timeliness is critical (dedicated staff?)
- ❑ Dedicated staff member is important (part time pharmacist)
- ❑ Changes to PMS systems (underway)

