Hospital to Hospital Medication Reconciliation

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Hospital to Hospital Medication Reconciliation is used when discharging a patient from one Health PEI Acute Care Hospital to another, e.g. QEH to PCH. It is to be used by the physician at the sending facility to place a patient's medication orders in a 'Proposed' state to be considered by the physician at the receiving facility. It allows the medication orders to flow through the system without being manually re-entered at the receiving facility.

How to Perform Hospital to Hospital Medication Reconciliation

Sending Physician:

• The Best Possible Medication History and Admission Medication Reconciliation should have already been completed:



1. From the Orders Page, click on Reconciliation and choose Hospital to Hospital:

+ Add \mid \bigcirc Document Medication by Hx \mid	Reconciliation 📲 🚴 Check Inter	actions
Orders Medication List	Admission	
	In Hospital Transfer	
	Hospital to Hospital	Active []
View	Discharge	
Diagnostic Imaging		

- All inpatient medication orders and documented home medication orders are displayed.
- Orders are sorted alphabetically and orders for the same medication are grouped together and shaded either blue or white to differentiate them from the others.

		Orders Prior to Reconciliation					Orders After Reconciliation
- B	8	Order Name/Details	Status			B} \?	Order Name/Details
⊿ Me	dicatio	ns					
	3	acetylsalicylic acid (ECASA) 81 mg, Oral, Daily	Ordered				
3	0	acetylsalicylic acid (ECASA) 81 mg, Oral, Daily	Documented		0		
ð	3	atoryastatin 20 mg, Oral, Daily	Ordered		~		
9	3	atoryastatin 20 mg, Oral, Daily	Documented		0		
ð	3	bisacodyl (Dulcolax) 10 mg, Rectal, Daily, PRN: Constipation	Ordered	0	0		
ð	8	carbidopa-levodopa (Sinemet 250/25 oral tablet) 1 (tab(s), Oral, BID	Ordered		0		
3	8	carbidopa-levodopa (Sinemet 250/25 oral tablet) 1 tab(s), Oral, BID	Documented				
ð	3	digoxin 0.125 mg, Oral, Daily	Ordered	0	0		
ī,	3	digoxin 0.125 mg, Oral, Daily, 30 tab(s)	Prescribed	0	0		
ð	E 🕄	dimenhyDRINATE (Gravol inj) 12.5 - 50 mg, IM, q4h timed, PRN: Nausea/Vomiting	Ordered	0	0		
ð	B 🕄	dimenhyDRINATE (Gravol inj) 12.5 - 50 mg, IV, 94h timed, PRN: Nausea/Vomiting	Ordered	0	0		
ð	E 🕄	dimenhyDRINATE (Gravol) 12.5 - 50 mg, Oral, g4h timed, PRN: Nausea/Vomiting	Ordered	0	0		
ð	P 🕄	enoxaparin (Lovenox) 40 mg, Subcutaneous, q24h timed	Ordered	0	0		

- Inpatient medications are indicated by a hospital icon[®] and a status of Ordered or suspended.
- Documented home medications are indicated by either a scroll icon and a status of Documented or a pill bottle icon and a status of Prescribed.
- Review each medication order and choose either Continue ▶ or Do Not Continue ■ by clicking the associated radio button.
- If an inpatient medication order was converted from a documented home medication, via Admission Medication Reconciliation or Convert to Inpatient, there will only be one radio button for both medications. Clicking the Continue radio button will continue the inpatient medication order.



- If an inpatient medication order was not converted from a documented home medication, there will be two radio buttons, one for each medication order.
- Each order will need to be managed separately. In general, if both orders are the same, it is preferable to continue the inpatient medication over the home medication.

Orders Prior to Reconciliation						
	₿.	7	Order Name/Details	Status		
	()	3	digoxin 0.125 mg, Oral, Daily	Ordered	0	0
	[] •	3	digoxin 0.125 mg, Oral, Daily, 30 tab(s)	Prescribed	0	0
	L	•••		0 I I		

 Home medications for which there is no associated inpatient order are also visible. An example of this would be if Do Not Continue was chosen during Admission Medication Reconciliation.

⊡ş	8	Order Name/Details	Status			
1	*	LORazepam 0.5 mg, Oral, BID, PRN: Anxiety	Ordered	0		
— •	*	LORazepam 0.5 mg, Oral, BID, 30 days, PRN: Anxiety	Prescribed			
.	3	metFORMIN 500 mg, Oral, BID	Prescribed	0	0	
	- CO CO.					e -

 If it is not appropriate to resume a home medication at this time, choose Do Not Continue. It will remain in the documented home medications and may be ordered at a later date.

Suspended Medication Orders:

- Suspended inpatient orders will appear with a status of Suspended.
- Choosing Continue will place the order in a "proposed" Ordered status (i.e. not Suspended) for the receiving encounter.
- It will not resume the order in the current encounter.

()	zopiclone (Imovane) 10 mg, Oral, Bedtime, PRN: Sleep	Suspended	~	0	d) 🥚	zopiclone (Imovane) 10 mg, Oral, Bedtime, PRN: Sleep
J.	zopiclone (Imovane) 10 mg, Oral, Bedtime, PRN: Sleep	Documented	Ľ			

- Choosing Do Not Continue will leave the medication in a suspended status on the current encounter and it will not be available on the receiving encounter.
- If there is an associated home medication, it will still be visible in the documented home medications and may be ordered at a later date.

()	<mark>zopiclone (Imovane)</mark> 10 mg, Oral, Bedtime, PRN: Slæp	Suspended	
²	zopiclone (Imovane) 10 mg, Oral, Bedvime, PRN: Sleep	Documented	<u> </u>

Duration:

• If the duration has been specified on an order (e.g. 7 day course of antibiotics), it will be carried over into the proposed order at the receiving facility.

Adding Additional Orders:

- Additional medication orders can also be added in the Hospital to Hospital Reconciliation screen by clicking the Add button + Add in the upper left corner of the screen.
- These orders will not be active on the current encounter, but will go into a proposed state for the receiving facility.
- Power plans (e.g. HH Psych Admit) can also be added and put into a <u>planned</u> <u>state</u> for initiation at the receiving facility.
- The counter in the lower left-hand corner of the screen will show how many orders are unreconciled.

0 Missing Required Details 2	22 Required Unreconciled Order(s)
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3. When all orders have been reconciled, choose Transfer:

Reconcile and Plan	Transfer	<u>C</u> ancel
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Medication Reconciliation Transfer Report:

4. After clicking Transfer, the Print dialogue box will appear. Click Cancel to close this window.



 After Hospital to Hospital Reconciliation has been performed, the Reconciliation Status bar will show that there are proposed Admission orders and that Discharge Reconciliation is complete:



• The Discharge Readiness dashboard will show that Meds Rec is complete:

Discharge Summary						🗖 – 🖡 🧷 🗉
Discharge Readiness						≡∗⊗
LOS	Estimated D/C Date	Dx	Meds Rec	Discharge Documents	Patient Education	D/C Order
00:20:53	-	0	٠	0	0	0
						Review and Sign

Saving your work:

If your work is interrupted and you would like to save your work, choose Plan:

Reconcile and	Plan	Transfer	<u>C</u> ancel
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The In Hospital Transfer Reconciliation status icon will appear:

Reconciliation Status V Meds History V Admission 😚 In Hospital Transfer 🕒 Discharge

This does not mean In Hospital Transfer Med Rec was performed. It means Hospital to Hospital Med Rec was not finished.

If the Hospital to Hospital Reconciliation has not been completed or if the physician has chosen Plan instead of Transfer, Meds Rec will appear to be incomplete on the Discharge Readiness Dashboard.

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Discharge Sum						🖂 – 🖳 🗐
Discharge Readiness						≡•⊗
LOS	Estimated D/C Date	Dx	Meds Rec	Discharge Documents	Patient Education	D/C Order
00:20:32		0	0	0	0	0
						Review and Sign

Important:

1. After Hospital to Hospital Reconciliation is complete, the orders **will remain in a proposed state for 72 hours**. If the patient doesn't get transferred or if Admission Medication Reconciliation isn't performed at the receiving facility within 72 hours of Hospital to Hospital Reconciliation, the proposed orders will be canceled by the system

2. Once Hospital to Hospital reconciliation is complete, the only way to cancel it is to redo Admission Medication Reconciliation. If the physician attempts to do Discharge Medication Reconciliation, the following alert will be presented.

Reconcile	e and Plan Service	×
1	The pending Admission Reconciliation must be completed before actions can be taken on another reconciliat	ion.
	OK	

Receiving Physician:

• At the receiving facility (new encounter), the Reconciliation Status bar will show that there are pending admission medication reconciliation orders.



• If a BPMH has been completed at the previous facility, the Nurse or Pharmacy Technician will complete the BPMH using 'Use Last Compliance.'



Remember if a patient has transferred from another facility, the BPMH is based on what medications the patient was taking <u>prior</u> to admission to the first facility (at home).

1. From the Orders page, the receiving physician will perform Admission Medication Reconciliation by clicking Reconciliation and choosing Admission:



- The medication orders appear in alphabetical order with orders for the same medication grouped together and shaded either blue or white to differentiate them from the others.
- The orders on the left side of the screen represent the patient's documented home medications while the medication orders on the right side of the screen represent the proposed inpatient medication orders.
- The pending orders will have a question mark icon ^(a) beside them to indicate that they are in a proposed state.

Add 📴 M	anage Plans 🍣 Reset Reconcilation				Reconcilation Status	🕘 Discharç
	Orders Prior to Reconciliation				Orders After Reconciliation	More Detai
57	Order Name/Details	Status			명 🕅 Order Name/Details Status	
⊿ Medica	itions					
3	acetylsalicylic acid (ECASA) 81 mg, Oral, Daily	Documented	۲	0		
			•	0	Bi mg, Oral, Daily Order	
J	atorvastatin 20 mg, Oral, Daily	Documented	۲	0		
			۲	0	👘 ? 🛞 atorvastatin Order 20 mg, Oral, Daily	
			۲	0	bisacodyl (Dulcolax) Order 10 mg, Rectal, Daily, PRN: Constipation	
J	carbidopa-levodopa (Sinemet 250/25 oral tablet) 1 tab(s), Oral, BID	Documented	۲	0		
			۲	0	👘 ? 🥥 carbidopa-levodopa (Sinemet 250/25 oral tablet) Order I tab(s), Oral, BID	
"∎•	digoxin 0.125 mg, Oral, Dally, 30 tab(s)	Prescribed	0	۲		_
			۲	0	👘 ? @ digoxin Order 0.125 mg, Oral, Daily	
			۲	0	dimenhyDRINATE (Gravol inj) Order 12.5 - 50 mg, IM, q4h timed, PRN: Nausea/Vomiting	
			۲	0	dimenhyDRINATE (Gravol inj) Order 12.5 - 50 mg, IV, q4h timed, PRN: Nausea/Vombing	
			۲	0	dimenhyDRINATE (Gravol) Order 12.5 - 50 mg, Oral, q4h timed, PRN: Nauxea/Vomiting	
			۲	0	Image: Subcutaneous, q24h timed Order	
4	fluticasone-salmeterol (Advair Diskus 250 mcg-50 mcg inhalation powder) 1 puff(s), Inhalation, BID	Documented	۲	0		
			۲	0	Herrich Strategie	
□•	gliclazide (gliclazide MR) 90 mg, Oral, Daily, 30 tab(s)	Prescribed	۲	0		
			۲	0	Generation (Giclazide (gliclazide MR) Order Soma, Oral, Daliv	

- Note the Continue and Do Not Continue buttons are pre-selected for all proposed medications.
- Any additional medications that may have been ordered prior to Admission Medication Reconciliation being complete will need to be reconciled.
- Check in the bottom left corner to see if all medications have been reconciled.

0 Missing Required Details All Required Orders Reconciled

• To continue the medications as proposed by the physician at the sending hospital, click Reconcile and Sign in the bottom right corner:

Reconcile And Sign	<u>C</u> ancel
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• The Admission Medication Reconciliation Status indicator will change to a green check mark.

⊢ Reconciliation Sta	atus	
🗸 🗸 Meds History	V Admission	🕒 Discharge

Managing Proposed Orders in Admission Medication Reconciliation Screen:

Reset Reconciliation:

 Choosing 'Reset Reconciliation' will *discard the proposed inpatient orders* from the previous facility and leave only the patient's documented home medications, prescriptions and any inpatient orders that were added on the new encounter prior to Admission Reconciliation.

N	Orders Prior to I	Reconciliation
🕂 Add 🕃 Manage Plans 🕊	Reset Reconciliation	

If 'Reset Reconciliation is clicked in error, choose 'Cancel' and go back into the Admission Med Rec screen.

Linked Orders:

- If two orders were 'linked' on the previous encounter (i.e. one radio button), and they were Continued by the sending physician, the radio button for both the home med and the inpatient med will be defaulted to Continue in the Admission Med Rec screen.
- This will not result in both orders being continued at the receiving facility; the inpatient order from the previous encounter will be ordered while the documented home medication will remain in the BPMH.

3	atoryastatin 20 mg, Oral, Daily	Documented	۲	0	
			۲	0	👘 ? 🥹 atorvastatin 20 mg, Oral, Daily

Removing Individual Proposed Inpatient Orders:

- Choosing Do Not Continue on a proposed inpatient order will remove it from the proposed orders.
- The order will still be visible in the Orders After Reconciliation (right-hand side of the screen) until another medication order is discontinued.
- This allows the prescriber a chance to reconsider.



• Once Do Not Continue is chosen on another medication order, the previously discontinued will disappear from view.



 To bring back a medication order that has disappeared from view, choose 'Cancel' and go back into the Admission Med Rec screen and start over. Do not choose 'Reset Reconciliation.'

Modifying Proposed Inpatient Orders:

- 1. Click on the proposed order in the Orders After Reconciliation to open the Details screen.
- 2. Modify the order as desired and minimize the Details screen to go back to reconciling orders.

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0 •	gliclazide 90 mg, Ora	<mark>(gliclazide MR)</mark> /, Daily, 30 tab(s)		Prescribed	۲	0				
					۲	0	👘 😢 gliclazide 90 mg, Ora	(gliclazide MR) I, Daily		Order
0 •	hydrochlo	rothiazide-valsartan (Diovan HCT 12.5	Prescribed						
z Details	for glicla	azide (gliclazi	de MR)							
	5 🔃 Order	Comments								
+ 🕯	lh.	*						Remair	ning Administrations: 0	Stop: (Unkno
	*Dose:	60 mg	~			*Ro	ute of administration:	Oral	~	
	Drug Form:	<no items=""></no>					*Frequency:	Daily	¥	
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Suspending Proposed Inpatient Orders:

- It is not possible to Suspend orders from the Admission Med Rec screen.
- Continue the order in question and then go back and Suspend it from the Orders page after Admission Med Rec has been complete.

If a med order is modified AFTER hospital to hospital is completed, the link between the originating order and the proposed order will be broken and the proposed order will not come across to the admission med rec at the receiving facility.