

## DID YOU KNOW? ELECTRONIC TRANSFER MEDICATION RECONCILIATION Hospital to Hospital

February 20, 2024

### Issue:

- Transitions in care are inherently associated with a high risk of medication discrepancies that have potential to cause patient harm<sup>1</sup>.
- The increased acuity and volume of patient transfers **between Health PEI Hospitals** has further highlighted the importance of following established workflows and process for electronic medication reconciliation (Med Rec) within the clinical information system (CIS).

### Key Points When Transferring a Patient **Between Health PEI Hospitals**

#### **Prescriber at the 'sending' facility:**

- Please choose **Hospital to Hospital** Med Rec
  - **NOT** In Hospital Transfer reconciliation
  - **NOT** Discharge reconciliation
- Review each medication and decide whether to continue or stop *each* order
- When complete, user must **reconcile and Transfer**.
  - Please do **NOT** choose 'plan'

#### **Prescriber at the 'receiving' facility:**

- Please wait until the new CIS encounter is created; ensure you are on the correct encounter at receiving facility (i.e., the NEW bed the patient is in)
- **DO NOT** place orders prior to the patient's arrival
- Complete **Admission** Med Rec
  - Review each line, 'continue' or 'do not continue' are pre-selected, however you may change the selection if appropriate

Refer to this short [YouTube video](#), attached information, and the posted [Health PEI CIS Training Materials](#) video for more details.

### **Following this process:**

- Improves efficiency
  - easier to place orders at the receiving facility
  - intent is clear, therefore fewer phone calls from nursing/pharmacy/etc. to clarify orders
  - pharmacy and nursing staff save time investigating medication discrepancies (e.g. missing medications, or medications that were restarted after lengthy suspensions)
- Prevents medication errors
  - decision whether to continue or stop medication is clearly documented so subsequent MRP/nurses/pharmacists understand the plan for each medication order
  - medication or dose changes from the home regimen at sending facility are reflected in new orders at receiving facility

1. Medication Safety in Transitions of Care. Geneva: World Health Organization; 2019 (WHO/UHC/SDS/2019.9). License: CC BY-NC-SA 3.0 IGO.

### **Failure to follow this process:**

- will lead the receiving facility's MRP to choose admission Med Rec
- is unsafe because the list of meds presented will be the last BPMH; this may be outdated and will not reflect any medication changes (new medications, discontinued medications, dose changes) from the sending hospital

**For more information, Please Contact:**

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# Hospital to Hospital Medication Reconciliation

## When does it need to be done?

- Any time an inpatient is moved to another Health PEI facility and becomes an inpatient at that new facility
  - Hip fracture in PCH comes to QEH for surgery
  - Admitted to PCH, decompensates and comes to QEH ICU
  - Admitted to QEH, goes to KCMH to wait for LTC bed
- Repeat with each new transfer
  - PCH admit with hip fracture, QEH for OR, back to PCH

## When does it not need to be done?

- Transfer for outpatient encounter
  - ACC clinic visit
  - Ortho clinic
  - Wound care

Order Reconciliation: Hospital to Hospital - NOTOUCH, QEHCIL2

NOTOUCH, QEHCIL2      Age: 58 years      Sex: Female      Loc: PAND Unit 3 QEH: ... ARO: MRSA  
 Inpatient [2024-Jan-22 00:15:00 - <No - Dischar...      DOB: 1965-Jun-23      MRN: 041000208      \*\* Allergies \*\*      RESUS: Do Not Resuscit...  
 Violent/Aggressive: Yes

+ Add | Manage Plans | Print | Reset Reconciliation | Transfer To: (None) | Reconciliation Status:  Meds History  Admission  Discharge  Show More Details

Orders Prior to Reconciliation				Orders After Reconciliation			
Order Name/Details	Status			Order Name/Details	Status		
<b>Medications</b>							
atorvastatin (Lipitor) 20 mg, Oral, Supper	Ordered	<input checked="" type="radio"/>	<input type="radio"/>	atorvastatin (Lipitor) 20 mg, Oral, Supper	Order		
clarithromycin (Biaxin) 250 mg, Oral, BID	Ordered	<input checked="" type="radio"/>	<input type="radio"/>	clarithromycin (Biaxin) 250 mg, Oral, BID	Order		
clarithromycin (Biaxin) 250 mg, Oral, BID	Prescribed	<input checked="" type="radio"/>	<input type="radio"/>				
digoxin 0.125 mg, Oral, Daily	Ordered	<input checked="" type="radio"/>	<input type="radio"/>	digoxin 0.125 mg, Oral, Daily	Order		
digoxin 0.125 mg, Oral, Daily	Documented	<input checked="" type="radio"/>	<input type="radio"/>				
metformin 500 mg, Oral, BID	Ordered	<input checked="" type="radio"/>	<input type="radio"/>	metformin 500 mg, Oral, BID	Order		
metformin 500 mg, Oral, BID	Prescribed	<input checked="" type="radio"/>	<input type="radio"/>				
multivitamin (StressTabs Multiple Vitamins or... 1 tab(s), Oral, Daily	Documented	<input checked="" type="radio"/>	<input type="radio"/>	multivitamin (StressTabs Multiple Vitamins or... 1 tab(s), Oral, Daily	Order		
temazepam (Restoril) 15 mg, Oral, Bedtime, PRN: Sleep	Ordered	<input checked="" type="radio"/>	<input type="radio"/>	temazepam (Restoril) 15 mg, Oral, Bedtime, PRN: Sleep	Order		
temazepam (Restoril) 15 mg, Oral, Bedtime, PRN: Sleep	Documented	<input checked="" type="radio"/>	<input type="radio"/>				

0 Missing Required Details      All Required Orders Reconciled

Reconcile and ~~Transfer~~      Transfer      Cancel