



Electronic Medication Reconciliation Update (MD Edition)

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Novant Health, Inc

Upcoming Enhancements Based on your feedback!

- Starting on January 3, 2012 There will be a new “Outpatient Medication Reconciliation Form”.
 - It is printed the day of surgery/procedure for outpatients going home the same day as the surgery/procedure.
 - This serves as both the admission and discharge reconciliation order sheet and is to be filled out by the physician post surgery/procedure.
- Also Beginning January 3, 2012 All Inhouse IVs and prn medications **will no longer show up** on the discharge medication reconciliation order sheet. The physician will only have to address the patient’s home medications and inhouse scheduled medications. Any new prns or IVs to be taken by the patient after discharge will need to be written in on the discharge reconciliation order sheet
- In an effort to “flag” the therapeutic interchanges that are done by pharmacy for formulary and non-formulary drugs, all of these will show up with “**TI:**” and the name of the drug it is substituted for. Please note that therapeutic substitutions are not restricted to “Home Medications” and can be utilized during the patients stay based on the medication ordered.

Sex F Age 35 Unit / Bed 9GEN / 921101
Attn Dr PINKERTON, GREGORY N
Isol MRSA/VRE C DIFF MDRO: OTHER

Medication Reconciliation Print Options

Physician Order Sheets

- Admission / SDA Medication Reconciliation
- Outpatient Medication Reconciliation
- Transfer / Post Surgical-Procedure Order Reconciliation
- Discharge Medication Reconciliation

Patient Version

- Discharge Medication Patient Instructions
- Fax Cover Sheet

FLUTICASONE/SALMETEROL 250-50 (ADVAIR 250-50 DISKUS EQUIV
(2.INH INH) 1 INH INH BID
TI: SYMBICORT 160/4.5 2 PUFF

Helpful Hints for Making a Safer Med Rec Process

The Med Exec Committee approved the process for Discharge Medication Reconciliation:

- The Home med should be reconciled first (Stop, Change, Continue)
- **Duplicates** found in the “In House” medications should be **stopped**
- Prescriptions should be written in on the “additional orders” lines so that the nurse can add them to the patient list electronically and they will show up in the patient instructions
- Please review the medications carefully and watch for duplication
- Any new prn medications or IV medications that the patient is to be discharged on must be written in on the additional lines of the discharge reconciliation order form

