

ASHP Abstracts & Program Resources on CDROM
2006 Midyear Clinical Meeting
December 3-7, 2006 Anaheim, CA

Project Medication Reconciliation: Strategies for Success

Program # 204-000-06-289-L04

December 2006 – 2:00 – 4:00 pm

Moderator: Brian D. Benson, R.Ph., Pharmacy Manager, Iowa Lutheran Hospital, Des Moines

Presentation

Tools for Successful Medication Reconciliation and Technological Advances

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Speaker Information

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Biographical Information

Sharon Meyer, Pharm.D., M.S. serves as the Executive Director of Pharmacy for Iowa Health – Des Moines composed of Iowa Methodist Medical Center, Iowa Lutheran Hospital, and Blank Children’s Hospital. Responsibilities include oversight of pharmacy services throughout this health system serving as a liaison between pharmacy operations and administration and the statewide health system (Iowa Health System), and coordinating the functions of the pharmacy management team which manages the full spectrum of pharmacy services. Particular areas of interest and involvement revolve around development and implementation of expanded pharmacists’ patient care role, health system-wide patient safety efforts and budget management.

Presentation Outline

- I. Objectives
 - a. List transition points where medication reconciliation may be necessary
 - b. Describe the advantages and disadvantages of manual tools and electronic tools for medication reconciliation
 - c. Describe the role of the pharmacist and other healthcare professionals as medication reconciliation tools become more widespread

- II. Tools

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- a. Forms, Lists, Cards
 - b. Handwritten
 - c. Electronic
 - d. Usability by patient
 - e. Usability by healthcare provider(s)
- III. When and where tools are useful
- a. Admission
 - i. Garbage in/garbage out
 - ii. Development of list
 - iii. Utilizing list as order sheet with options
 - iv. Handwritten
 - 1. Preprinted form to facilitate compilation of list
 - 2. Utilize as order form
 - 3. Options to continue, not continue, make changes
 - v. Electronic
 - 1. Admission assessment
 - 2. Medications entered into electronic medical record
 - 3. Generation of order sheet
 - b. Transfer
 - i. Current medications
 - ii. Pre-hospital medications
 - iii. Order sheet with checkboxes
 - 1. Requires careful review
 - 2. May also be used at discharge
 - c. Discharge
 - i. Same tool as transfer
 - ii. Useful for discharge to another health care facility
 - iii. Requires rework for patient-friendly list
 - iv.
 - d. The rest of the world
 - i. Who owns the process
 - ii. What tools are available
 - iii. How can tools facilitate the process
 - iv. How can tools hinder the process
- IV. Wallet Cards
- a. Handwritten
 - b. Preprinted, handwritten
 - c. Electronic
- V. Use of Medication Database
- VI. Portable Electronic List
- VII. Prescription Claims Database

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- VIII. Universal Electronic Tool?
 - a. Similarities to CPOE and EMR
 - b. Inhibitors of Progress

- IX. Tools in Skilled Hands
 - a. The list
 - b. The regimen

- X. Skilled Hands
 - a. Patient and/or caregiver
 - b. Pharmacist
 - c. Other health care professionals
 - d. Prescribers

- XI. Teamwork

Abstract

<TI> Tools for successful medication reconciliation and technological advances

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<AB> Efforts to perform medication reconciliation have spawned a variety of tools aimed at facilitating the process. The tools may differ depending on the patient's transition point where medication reconciliation is necessary. Transition points include the hospital settings of admission, transfer, and discharge as well as the numerous episodes of care such as each healthcare provider visit. A discussion of various tools is presented. The tools include manual tools such as handwritten lists, forms, and wallet cards or electronic such as lists in databases, prescriber orders, and electronic medical records. Every tool has its advantages and disadvantages as well as differing levels of usability by healthcare professionals and the patients themselves. The active role of the pharmacist and other healthcare providers is not replaced by the presence of these tools. Examples of a few products will be presented as examples only of the market that medication reconciliation is creating.

<AB> Learning objectives:

1. List at least three transition points where medication reconciliation may be necessary.
2. Describe the advantages and disadvantages of a manual tool and an electronic tool utilized for medication reconciliation.
3. Describe the role of the pharmacist and other healthcare professionals as medication reconciliation tools become more widespread.

<AB> Self-assessment questions: True or False:

1. Medication reconciliation may need to be performed every time a patient is admitted and discharged from a hospital.

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2. One tool has been validated to meet all of a patient's medication reconciliation needs.
3. Medication reconciliation tools eliminate the role of a pharmacist in medication reconciliation.

<AB> Answers: 1. (T); 2. (F); 3. (F).

Slides

Attached

Tools for Successful Medication Reconciliation and Technological Advances

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Objectives:

- List at least three transition points where medication reconciliation may be necessary.
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Tools

- Forms, Lists, Cards
- Handwritten
- Electronic
- Usability by patient
- Usability by health care provider(s)

When and where are tools useful?

- Admission
- Transfer
- Discharge
- The rest of the world – every episode where medication therapy might be changed

Admission

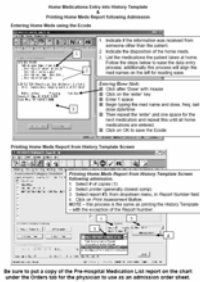
- Garbage in/garbage out holds true
- Development of list of medications prior to admission
- Efficiency of utilizing list as an order sheet with options
- Handwritten
- Electronic

Admission - Handwritten

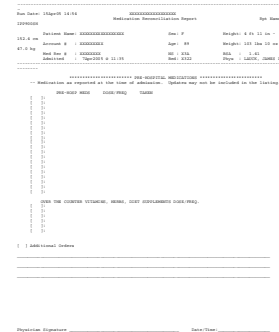
- Use of preprinted form to facilitate compilation of list
- Utilize as an order form
- Options to continue, not continue, make changes

Admission – Electronic Tools

- Part of admission assessment process
- Medications entered into electronic medical record
- Portion of admission assessment may be printed for use as an order sheet

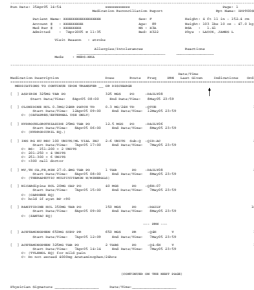


Admission – Order Sheet Generated



Change in Level of Care (Transfer)

- Current medications
- Pre-hospital medications
- Order sheet with checkboxes



Generation of Order Sheet for Use at Change in Level of Care



- Includes current medications
- Separate listing of pre-hospital medications
- Requires careful review
- Also utilized at discharge

Discharge

- Same tool as transfer
- Useful for discharge to another health care facility
- Requires rework for patient-friendly list

The Rest of the World

- Who owns the process?
- What tools are available?
- How can tools facilitate the process?
- How can tools hinder the process?

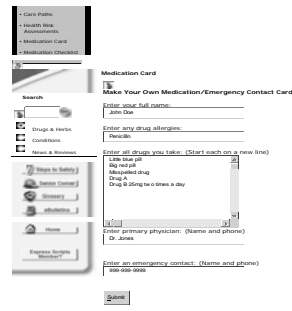
Wallet Cards

“Electronic” Wallet Cards



Enter Data, Print, Cut, and Fold

Is Simpler Better?



Medication Card
Your personal Medication and Emergency Contact Card
Print, trim, fold and place in your wallet or pocketbook as a reference.
Don't forget to update the list as your prescriptions change.

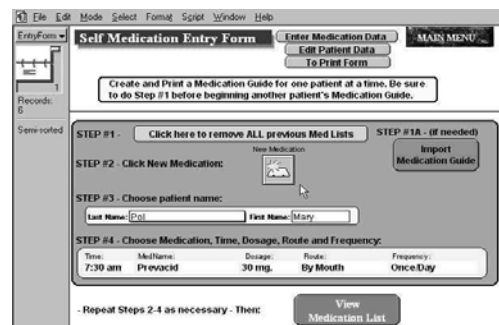
Medication and Emergency Contact Card

Drug Allergies:
Primary Doctor:
Emergency Contact:

Brought to you by:

Last update: Sep 20, 2006

Use of Medication Database



Portable Electronic List

Prescription Claims Databases

- Searches PBM and other electronically adjudicated claims
- Generates list and order sheet

Universal Electronic Tool?

- Format that would be user friendly for patient, healthcare provider, hospital, community pharmacy, and other health care settings
- Format that would be universal and affordable
- Analogous to CPOE and EMR strategies
- Will CPOE and EMR facilitate?

Inhibitors of Progress

- Systems specialists not sufficiently attuned to the information and time needs of clinicians resulting in systems that slow work flow
- Conversely, clinicians too busy and microfocused to appreciate ubiquitous constraints, system errors, and inefficiencies in information access
- Vendor-driven development, leading to closed, proprietary systems and fragmentation rather than open standards with sunk investment in older technology
- Lack of standards, inhibiting interconnectivity
- Concerns surrounding data confidentiality, security, and ownership

Adapted from Computerized Prescribing: Building the electronic infrastructure for better medication usage JAMA. 1998; 279:1024-1029

Same Tools – Same Results?

Tools in Skilled Hands

- “The List”
 - Up to date
 - Complete
 - Accurate
 - Accessible
 - Legible
 - Understandable
- “The Regimen”
 - Clinically appropriate

Skilled Hands

- Patient and/or caregiver
- Pharmacist
- Other health care professionals
- Prescribers
- TEAM

