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# RECONCILIATION OF SHARED MEDICINE RECORD AT DISCHARGE

Hospital pharmacy ensures correct information on patients' transition

## Why was it done

- On discharge from hospital, patient's SMR is updated by the doctor
- Pharmacy technicians dispense medicines for discharge
- The technicians, at this stage, often find discrepancies in the SMR compared to the medication prescribed and given during admission
- The SMR is electronically 'updated' but not adequately reconciled
- False information in the SMR may ultimately lead to adverse drug safety events in the primary sector

## **Example**

SMF	Admission							
Start Form	ATC 📥	Præparat	Vej Dosis			Start Form	ATC Præparat	Vej Dosis
18.05.22 ENTTAB	A02	Pantoprazol "Stada" - 40 MG	CR 1 tablet morgen		F	18.05.22 ENTTAB	A02 Pantoprazol Stada - 40 MG	OR 40 mg x 1 dagligt
13.05.22 TAB	A03	Metoclopramide "Accord" - 10 MG	OR 1 tablet efter behov, højst 3 gange daglig		Pt	13.05.22 TAB	A03 Metoclopramide Accord - 10 MG	OR 10 mg max 3 gange pr. døgn
22.10.20 TABFILM	A10	Metformin "Actavis" - 500 MG	🦷 🕕 OR 1 tablet 2 gange daglig Bemærk: ved		F	09.05.22 TABFILM	A 10 Metformin Aurobindo - 500 MG	OR 500 mg x 2 dagligt
15.11.16 DEPTAB	A12	Kaleorid - 750 MG	(1 OR 1 tablet morgen og middag	Ð	<b>3</b> F	22.02.19 DEPTAB	A12 Kallumklorid Orifarm - 750 MG	OR 750 mg x 1 dagligt
18.05.22 TABFILM	B01	Eliquis - 5 MG	OR 1 tablet morgen og aften	$\neg$	F	18.05.22 TABFILM	1 B01 Eliquis - 5 MG	OR 5 mg x 2 dagligt
11.05.22 TABFILM	B03	Betolvex - 1 MG	OR 1 tablet morgen		F	11.05.22 TABFILM	1 B03 Betolvex Teva Søborg - 1 MG	OR 1 mg x 1 dagligt
10.05.22 TAB	B03	Folimet - 5 MG	OR 1 tablet morgen		F	10.05.22 TAB	B03 Folimet - 5 MG	OR 5 mg x 1 dagligt
25.09.13 TAB	C03	Furix - 40 MG	🦷 🕕 OR 1 tablet morgen og middag	Ð	G F	22.02.19 TAB	C03 Furix - 40 MG	OR 40 mg x 1 dagligt
17.05.22 TABFILM	301	Selexid - 400 MG	OR Dosering fra d. 17. maj 2022 til d. 24		F	17.05.22 TABFILM	1 J01 Selexid Leo - 400 MG	OR 400 mg x 3 dagligt
10.05.22 TABFILM	N02	Panodil - 500 MG	OR 2 tabletter morgen, middag, aften og nat		F	10.05.22 TABFILM	1 N02 Panodil - 500 MG	OR 1000 mg x 4 dagligt

#### In this example:

- the doctor has updated the 2 lists as reconciled to his/her satisfaction (although the blue arrows represent discrepancies)
- the dosages are not the same for potassium chloride or furosemide

#### What was done and how

- The technician recorded discrepancies found before contacting the doctor to get the SMR corrected
- Discrepancies were sent to the national patient safety database
- The technicians do not dispense medicines to all discharged patients, so our results were extrapolated to all discharged patients in the time period (there was no reason to expect bias)
- The study was carried out in the whole region (5 hospitals) during the same week in September 2022 (WHO patient safety week)

What was achieved	Actual
Number of patients technicians dispensed to in project	283
Patients with ≥1 discrepancy in medicine list	66
% of patients with ≥1 discrepancy	23,3
Technician time used to solve discrepancies (hours)	13

## **SMR**

- In Denmark every citizen has an electronic Shared Medicines Record (SMC)
- The SMR shows the current medication that the citizen has been prescribed, from all sectors
- All sectors can see the SMR, which is considered/ought to be the 'truth' about the citizens' medicines



Central Denmark Region – population 1.3 million

#### **Conclusions**

- Despite doctors electronically updating the patients' SMR at discharge (as required), there are still discrepancies between the medicines lists in 23% of patients
- Pharmacy technicians highlight these discrepancies and ensure they are corrected before the medicines are dispensed and the patient discharged
- Extrapolation of our results to all wards in the region shows that there are potential discrepancies in 58,350 patients annually

### What is next

 The local and regional quality organisations have the results and are working on a further strategy

