

Medication Reconciliation and Patient Safety Outcome

Abstract

Medication reconciliation is the process for creating and initiation the most complete and the accurate list possible of a patient's with current medications and comparing the list to those in the patient medical record or medication orders that According to the Joint Commission5 (p. 1). Medication reconciliation is the process of the comparing a patient's medication orders to all of the medications that the patient has been taking medicine. This reconciliation is done to avoid medication errors such as dose or medication omissions, therapeutic duplications, inappropriate dosing, or drug - drug interactions. It should be done at every transition of care in which new medications are ordered by prescriber or existing orders are re ordered , Transitions in care include changes in the care setting, the service provided , practitioner, or level of care. This process comprises five steps: (1) \a list of current medications shall be developed; that include the Medication Prior to admission (2) a list of medications that to be prescribed; (3) compare the medications on the two mentioned lists in step 1 and 2; (4) make clinical decisions based on the comparison; and clinical needed for patient (5) communicate the new list to appropriate caregivers and to the patient. The steps in medication reconciliation are the following for a newly hospitalized patient, the steps include obtaining and verifying the patient's medication history prior to admission, documenting the patient's medication history, writing the medication orders for the hospital medication regimen that clinically needed to patient, and creating a medication administration record. At discharge, the steps include determining the post discharge medication regimen, developing discharge instructions for the patient for home medications, educating and counseling the patient, and transmitting the medication list to the follow-up physician. For patients in ambulatory settings and outpatient, the main steps include documenting a complete list of the current medications and then updating the list whenever medications are added or changed and the list shall be given to patient.

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