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Implementation of Medication Reconciliation Service in the Hong Kong Buddhist Hospital

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Introduction

Medication Reconciliation (MR) is employed as a solution by World Health Organization Alliance for patient safety; it is a wellknown method to prevent drug related problems. Transitions of care are regarded as the most vulnerable moments of medication safety especially for elderly patients who are less aware of their medications. As a result MR is in place in HKBH, a convalescent hospital with most of the patients referred from QEH after acute episode stay.

Objectives

To determine the frequency of pharmacist interventions and the type of interventions.

Methodology

In-patient MAR and discharge prescriptions were reviewed by a resident pharmacist in Ward A3, the Hong Kong Buddhist Hospital. Drug related problems and related intervention were recorded on a recording form, data was then entered to KCC pharmacy clinical pharmacist intervention database webpage and categorised by PCNE classification scheme version 6.2. A Medical Consultant was responsible to rate the severity of each intervention recoded on the system.

Result

149 patients were recruited in this retrospective study with 21 DRPs identified. The most frequent problems identified were 'effect of drug treatment not optimal' and 'untreated indication'. 20 interventions were made at prescriber level while 70% of them were approved. 57% of interventions were rated as 'significant' and 19% were 'serious'. Medication Reconciliation is a completely new service provided in the Hong Kong Buddhist Hospital, this study is to review the important role of ward pharmacist in reviewing medication charts as well as discharge prescriptions. Early rectification of DRPs

could ensure the appropriate use of medication regarding the dosage, frequency, route, duration, especially in elderly who are prone to have impaired renal function while renal function could usually be neglected after a long hospital stay. Also pharmacist could safeguard the continuity of chronic medications which could be missed out before transfer.