Development of a pocket card to guide medication counseling at hospital discharge







SAPhS

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INTRODUCTION

Medication related problems:

- Frequent, especially during care transitions such as hospital discharge [1]
- Can jeopardize patient safety
- Measures to prevent them and thus increase medication safety need to be established
- > Discharge medication counseling has the potential to reduce them [2]

AIMS

- Identification of medication safety hotspots of the discharge process in the study hospital
- 2. Patient perspectives on discharge medication counseling
- 3. Obtain an overview of useful techniques for medication counseling
- Based on all findings
 - Proposal of a structured framework for discharge medication counseling

METHODS

This quality improvement project was conducted in the department of General Internal Medicine at the University Hospital of Bern and included the following:

- 1. Semi-structured face-to-face interviews with health care professionals (physicians, nurses, care coordinators)
- 2. Telephone interviews about discharge counseling and medication management with patients discharged to home
- 3. Scoping literature review in PubMed, Embase, and CINAHL databases
- Identification of useful techniques for discharge medication counseling



Development of a pocket card to systematically guide discharge medication counseling based on the findings from projects 1 to 3



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MAIN FINDINGS

Back side of the card:

explanation on specific topics

Section 1: preparation

- Clarification of the necessity of participation of relatives
- Clarification of the need for an interpreter
- Medication reconciliation of pre and post hospital medication
- → Note differences between pre and post hospital medication in the clinical information system under "Change prescription" → "Comment on prescription" → If possible, provide the medications that were brought along
- Create and print documents:
- → Dosage card, prescription (+ narcotic prescriptions for opiates), discharge report, oral anticoagulation card if new oral anticoagulation therapy.

Section 2: explaining the goal

"The goal of this counseling is to inform you about your medications and how you should be using them at home."

Section 3 (main part): medication counseling:

All medications:

- Explicitly explain and discuss **changes** and conversions
- > refer to the current discharge medication list: explain indications and effects in a patient-friendly way
- Explain dosage (incl. as needed meds¹), exact time of administration (before/with/after meals, e.g. fasting: 1 hour before or 2 hours after meals), time to onset of action and duration of therapy using the medication list
- Draw attention to the risk of **interactions**²

Special medications or needs of patients:

- What to do if you forget to take the medication³
- Specific, important adverse drug reactions⁴ (e.g., influence on fitness to drive)
- Special instructions for use⁵
- Information regarding self-monitoring (e.g. weight control with diuretics due to chronic heart failure; measuring blood pressure)

Section 4: conclusion

- Point out the necessity to procure medications at the pharmacy
- Advise on planning a visit with the primary care physician
- Emphasize importance of adherence⁶
- Point out potential aids: medication dispenser, tablet divider
- Give contact details for potential questions
- Ask patients about any uncertainties
- Check patient understanding with the teach-back method⁷

CONCLUSIONS

- Successful development of a pocket card to systematically guide discharge medication counseling
- Implementation of the pocket card is envisioned

REFERENCES

[1] Forster AJ, Murff HJ, Peterson JF, Gandhi TK, Bates DW. The incidence and severity of adverse events affecting patients after discharge from the hospital. Ann Intern Med 2003, Feb 4;138(3): 161-7 [2] Schnipper JL, Kirwin JL, Cotugno MC, et al. Role of Pharmacist Counseling in Preventing Adverse Drug Events After Hospitalization. Arch Intern Med 2006;166(5): 565-571



- Medication counseling can have a positive impact on patient safety
- Clinical pharmacists successfully integrated into the process



Discharge medication counseling by resident physicians

Greatest obstacles:

- Temporal resources
- Discharges on short notice
- Non-standardized process



«We are generally satisfied with the medication counseling»

Wishing for more information about:

- Dose and dose adjustments
- Medication changes
- Indications
- > The process of medication supply

