



JOINT COMMISSION JEWELS

NPSG #8: Accurately and completely reconcile medications across the continuum of care

08.01.01:

A process exists for comparing the patient's current medications with those ordered for the patient while under the care of the hospital.

08.02.01:

When a patient is referred or transferred from one organization to another, the complete and reconciled list of medications is communicated to the next provider of service and the communication is documented. Alternatively, when a patient leaves the organization's care directly to his or her home, the complete and reconciled list of medications is provided to the patient's known primary care provider, or the original referring provider, or a known next provider of service.

08.03.01:

When a patient leaves the organization's care, a complete and reconciled list of the patient's medications is provided directly to the patient, and the patient's family as needed, and the list is explained to the patient and/or family.

08.04.01:

In settings where medications are used minimally, or prescribed for a short duration, modified medication reconciliation processes are performed.

Medication Reconciliation at Trinitas Regional Medical Center:

- **Obtain and document** a complete list of the patient's current medications upon the patient's admission to TRMC.
- Obtain admitting orders from the Physician if none are present on the chart.
- **Compare** the medications ordered by the Physician with those on the patient's medication list from home or other facility.
- **Review** the current medication list with the attending physician to ensure medications are continued or discontinued, as appropriate.
- **Fax** the "Medication Reconciliation Form" to the Pharmacy for review. **Place** the completed form in the patient's chart (Physician Record Section)
- **If your patient goes to surgery, communicate** the current list of medications to the surgeon in the PACU. The surgeon needs to review and reconcile all pre-op and post-op medication orders.
- **If your patient is transferred to another unit or facility, communicate** the current medication list to the next provider of care at transfer to another unit or discharge to another facility.
- **Communicate** the current medication list to the patient or caregiver at discharge with clear instructions about which medications to continue at home.
- **Instruct** the patient or caregiver about which medications to resume, discontinue or start at home.