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# ANALYSIS OF PHARMACEUTICAL INTERVENTIONS REGARDING ADMISSION RECONCILIATION

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## BACKGROUND AND IMPORTANCE



Medication reconciliation (MR) is a pharmaceutical activity that aims to resolve errors that occur in the continuation of chronic treatment at the transition among different levels of Healthcare Systems and that increase patient morbidity and mortality.

## AIM AND OBJECTIVES



To analyse the MR activity on admission by the Pharmacy Service of a second level hospital to determine its usefulness as a method for preventing medication errors.

## MATERIAL AND METHODS



Retrospective descriptive observational study (January 2022-July 2022) of the pharmaceutical interventions (PI) reviewed in relation to MR.



### Variables studied

- Acceptance
- Clinical service
- Pharmacotherapeutic group
- Type of error

### Sources of Information

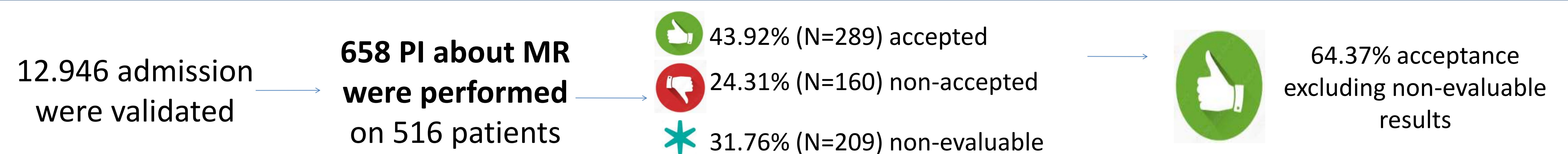


Programme of electronic medical record for reviewing chronic treatments

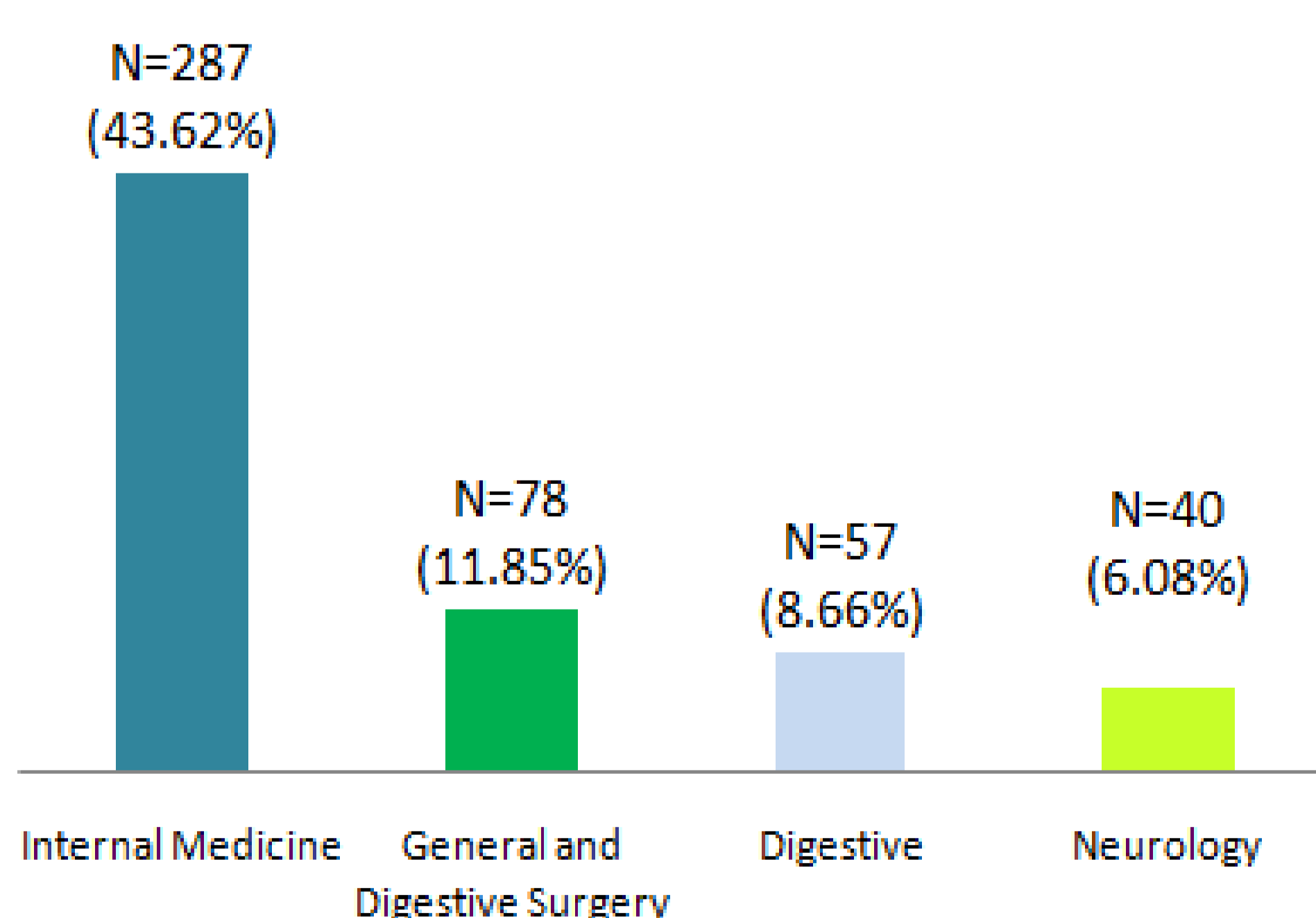


Pharmaceutical validation programme

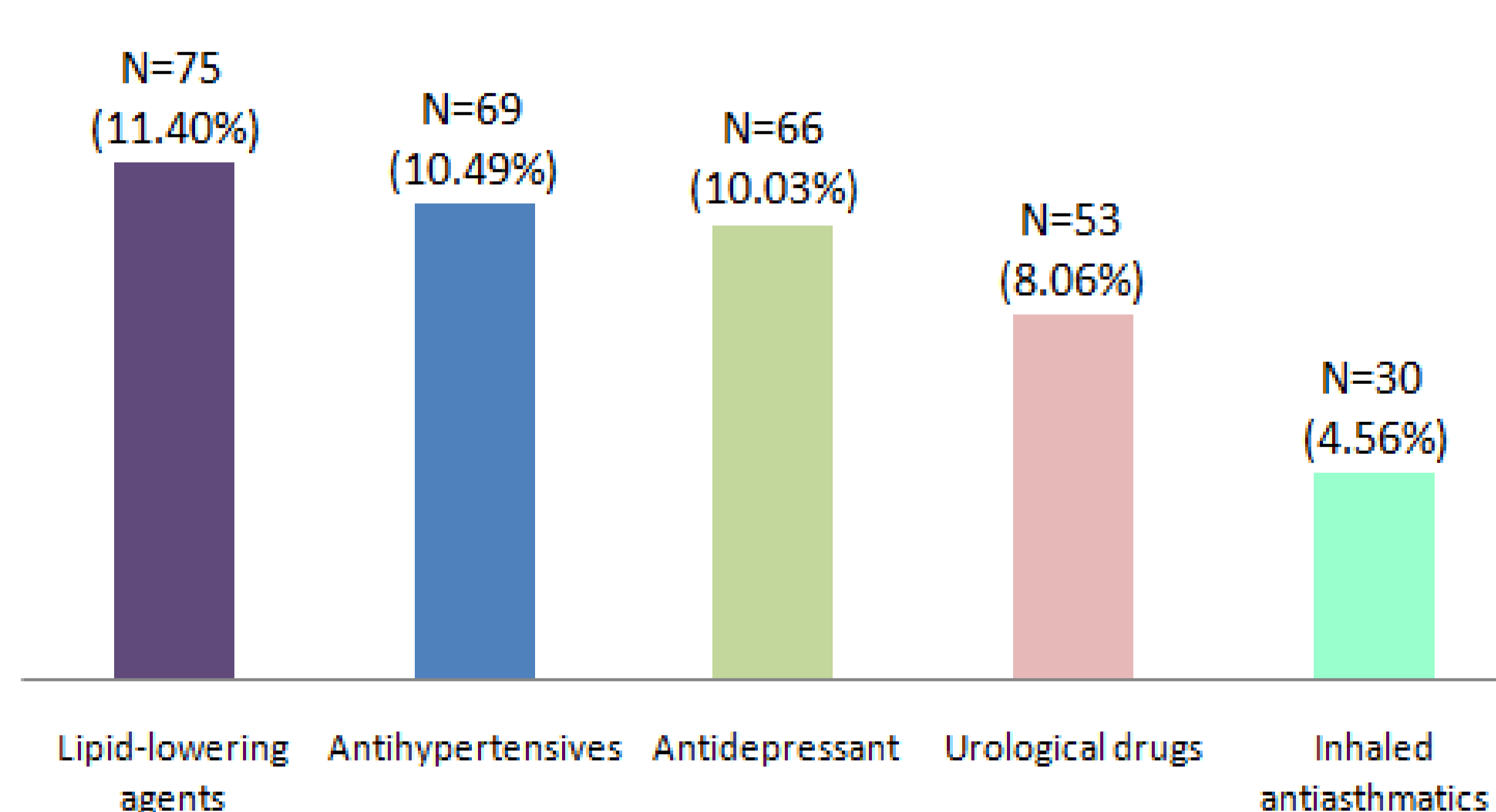
## RESULTS



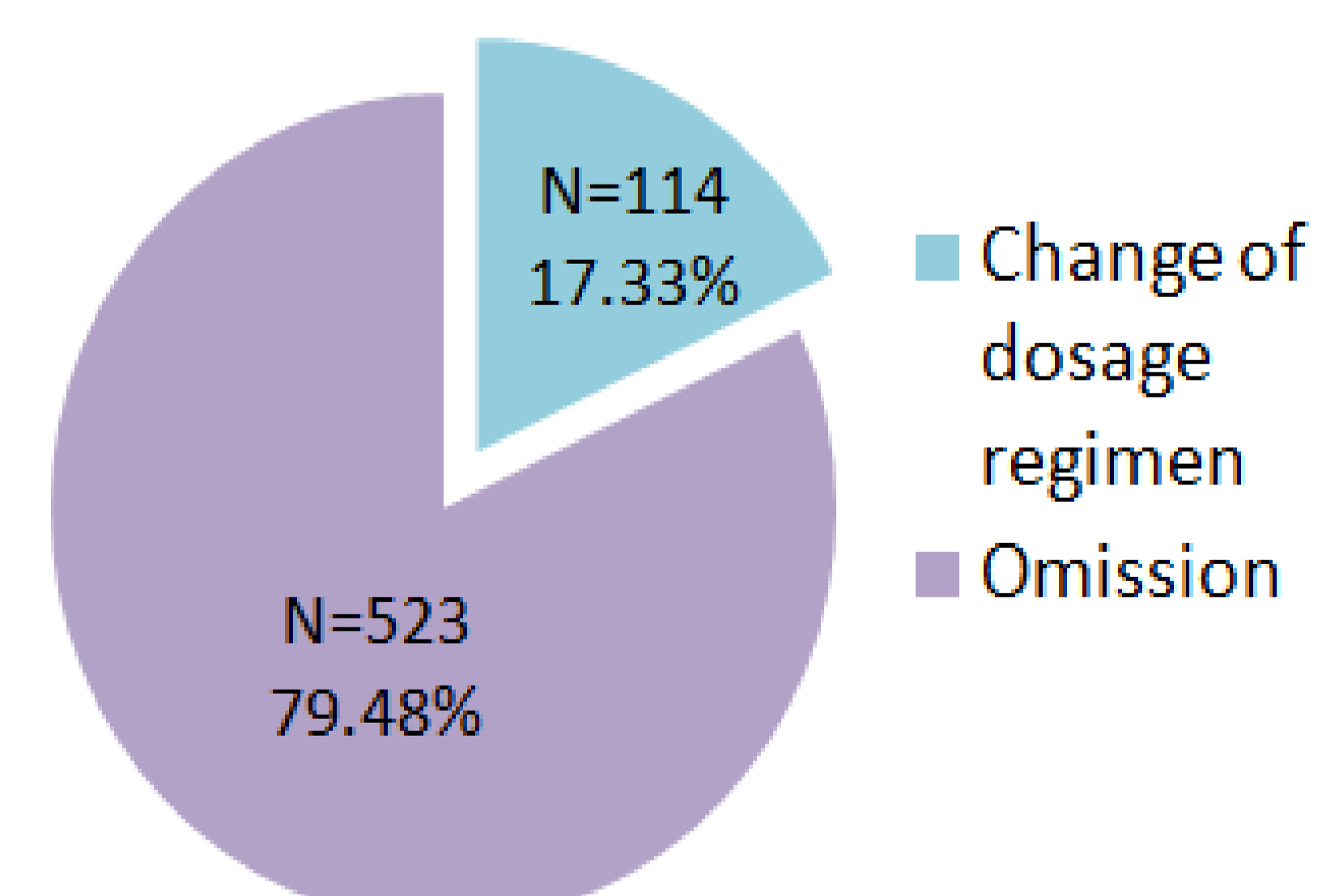
### Clinical Service with more PI



### Pharmacotherapeutic groups with more PI



### Most frequent type of reconciliation error



## CONCLUSION AND RELEVANCE



- Although less than half of the PI were accepted, the role of the pharmacist in MR is useful. This activity could be optimised by the presence of the pharmacist both in the emergency department and on the hospitalation unit, as well as by implementing actions such as patient interviews.
- The detection of the main clinical services and pharmacological groups requiring this type of intervention would make it possible to prioritise MR criteria and create protocols in order to improve the patient safety and reduce the proportion of non-evaluable results.