

IMPACT OF PROACTIVE MEDICATION RECONCILIATION PRIOR TO PRE-ANAESTHESIC CONSULTATION

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BACKGROUND AND IMPORTANCE

Continuity of medication management in hospitals is a major issue, and the clinical pharmacist has a key role to play in it

Higher rate of unintended medication discrepancies (UMDs) during medication reconciliation (MR)

Medical departments



Surgical departments



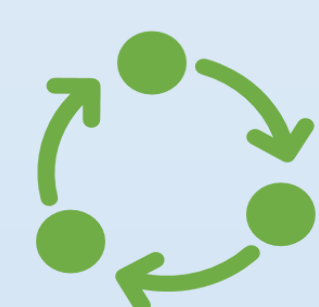
AIM AND OBJECTIVES



An MR process prior to the pre-anaesthetic consultation (PAC) has been set up, to improve the continuity of care for patients hospitalized in our vascular surgery departments



We wanted to assess the impact of carrying out proactive MR by a clinical pharmacist prior to the PAC versus retroactive MR.



MATERIAL AND METHODS

1 Proactive MR (performed by a pharmacy intern)

- Phone interview with the patient
- The retail pharmacy and/or primary care physician were contacted to collect the patient's prescriptions.

First prescription completed after a the proactive MR

One week before PACs

PAC

Patient entry



The best possible medication history (BPMH) form was given to the anaesthetist and registered into the patient's medical record.

2 Retroactive MRs were carried out on another group of patients, using the same sources, after the patient's entry and after the first prescription.

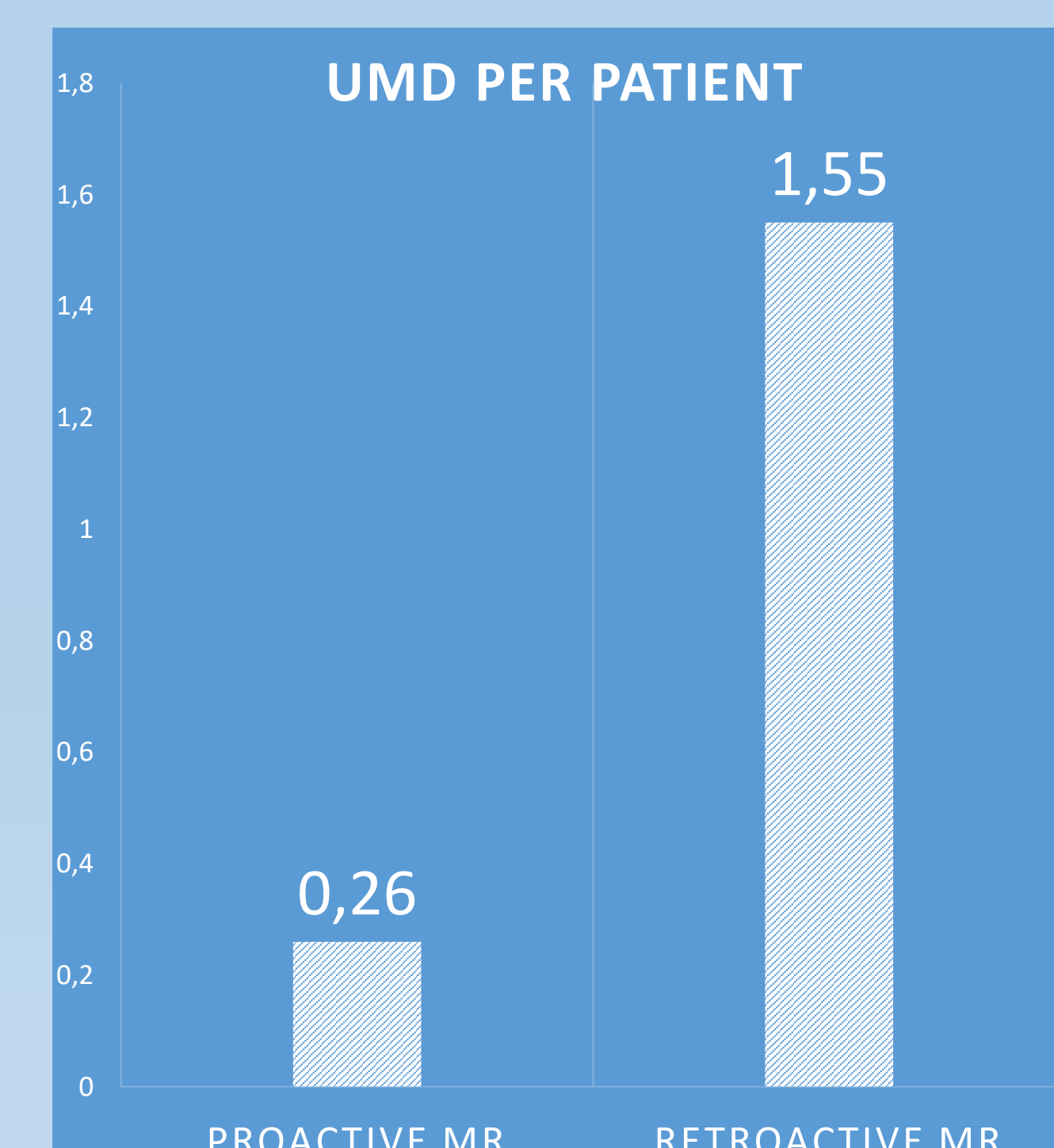


RESULTS

Over a 6 month period

- 100 patients in the "Proactive MR" group
- 100 patients in the "Retroactive MR" group

| | Retroactive MR (n=100) | Proactive MR (n=100) |
|-----------------------------------|------------------------|----------------------|
| Average age (years) | 69 | 66 |
| % men | 69 | 56 |
| Average number of home treatments | 8 (2-18) | 7,4 (1-14) |
| UMD | 150 | 26 |
| UMD/patient | 1,55 | 0,26 |



CONCLUSION AND RELEVANCE

There are more than 5.5 times fewer UMDs when MRs are carried out proactively before the patient's entry. Carrying out MRs for PACs enables the prescription to be anticipated and the anaesthetist to obtain an exhaustive list of the patient's treatments, which also avoids forgetting to stop some of them, particularly anticoagulants. The development of prescription assistance software with a pre-prescription module would be a step forward and an added value for the reduction of medication errors.