

# SHARED MEDICATION RECORD DISCREPANCIES IN ASSOCIATION WITH ELECTRONIC TRANSFER OF PRESCRIPTIONS

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## Objective

To identify discrepancies associated with the transfer of prescriptions between electronic systems.

## Background

Medication errors and transcription errors occur during transition of care.

The Shared Medication Record (SMR) - a national registry of all Danish citizens' currently prescribed medicines - is undergoing implementation in Denmark. SMR is an electronic system managing prescriptions for individual patients. Among other things SMR was developed to reduce medicines transcription errors.

Transfer of prescription from SMR to the electronic medication module (EMM) at hospitals does not occur automatically, which may lead to discrepancies associated with this transfer.

Following the manual transfer of prescriptions medication reconciliation is essential to ensure correct medication of the patient.

## Results

n = 739 prescriptions	Discrepancies
Dose	2 (0,3 %)
Method of administration	0 (0 %)
Indication	1 (0,1 %)
Omission of transfer from SMR to EMM	41 (5,5 %)
n = 79 patients	Discrepancies
Lack of medication reconciliation	14 (18 %)

## Discussion

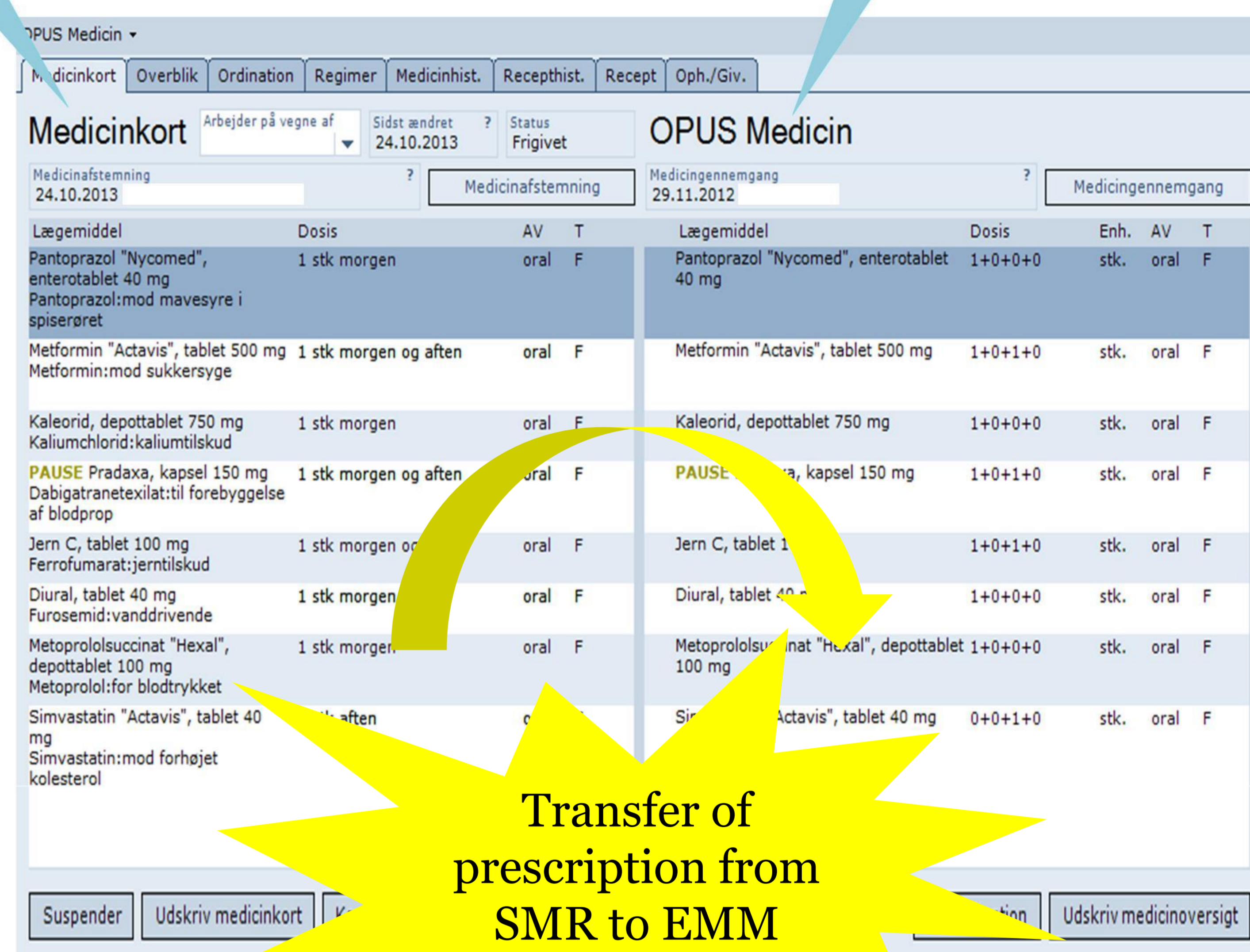
This study showed that omission errors are recurrent in transfer of prescriptions from SMR to EMM. The omission might be intentional, but the rationale for this was not documented in the medical record. The documentation is an important information to other physicians in the ongoing treatment of the patient. Attention to medication reconciliation to ensure correct medication of the patient, remains essential.

## Conclusion

This study showed only few discrepancies in association with the transfer of prescriptions from SMR to EMM. Further studies are needed to draw the conclusion that only few transcription errors are associated with the implementation of SMR. However, further focus are needed regarding medication reconciliation including the requested documentation in the EMM when an omission occurs.

SMR

EMM



## Method

The study was designed as a quantitative descriptive cross-sectional study. Data were collected during 2 weeks at the internal medication ward, Holbæk Hospital, Denmark. All recently admitted patients' prescriptions were reviewed and analyzed.

The following discrepancies were measured:

- Dose
- Method of administration
- Indication
- Omission of transfer from SMR to EMM
- Lack of medication reconciliation