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ELECTRONIC ALERT SYSTEM FOR PRIMARY CARE DOCTORS FROM A MEDICINES RECONCILIATION APPLICATION

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Campo de Gibraltar Healthcare Area is implementing Medication Reconciliation supported by The European Union Network for Patient Safety and Quality of Care (PaSQ).

Purpose:

To describe the development of a MedRec application which generates electronic alerts for general practitioners(GP) when patients are discharged from the Hospital, and its impact in Primary Care after 3 months of implementation.

Materials and Method:

We have developed an application that can be integrated into the patient's electronic medical records of the Public Healthcare System. The Application records the discrepancies (intentional/unintentional) of every MedRec Form made at admission/discharge and, at pharmacist demand, generates an electronic alert for the GP when discrepancies are found between the specialist discharge letter and patient electronic prescriptions at that time (which is considered a reconciliation error(RE)).



In this Retrospective observational study we measured RE at discharge, the severity of the RE, and the percentage of MedRec done by the GP after the alert is sent (considered correct if done before 5 days post-discharge).



Results:

46 reconciliation errors were found in a total of 63 patients (0.73 per-patient) evaluated at discharge. Eight (17.4%) RE were considered highly relevant. All RE were found in 34 patients (54%), being the other 29 properly reconciled. From the 34 alerts generated for the corresponding GP, only 15 (44%) were attended and the patient's medication reconciled in less than 5 days. Five (62.5%) of the highly relevant RE were amended in less than 5 days post-discharge.



Conclusion:

Less than a half of the alerts sent by the MedRec application were attended on a reasonable time, what means, although it can help in decreasing medication errors in Primary Care, more time/training is needed for the GPs become more familiar with the tool.

