

# Procedure To Create a Medicine List



## Introduction

The strategy to **Create a Safe Medicine List Together** engages patients and families to actively participate with you in developing a complete and accurate medicine list.

- **Patients** – bring in all the medicines they take, both prescribed and over-the-counter. This includes non-oral medicines such as injections, inhalers, ointments, and drops, as well as medicines they only take occasionally.
- **Practice staff** – work with patients and their families to develop a complete and accurate medicine list.
- **Clinicians** – conduct reconciliation based on the complete and accurate medicine list.

## Step 1. Before the Appointment (Staff)

1. Remind patients to bring all their medicines to their next appointment. You can use a telephone, email, or text reminder, as well as the Patient Information Card provided with this strategy.
2. If you use the Patient Information Card, you can mail the card to patients before their appointment as a reminder. The Patient Information Card also includes an appointment reminder (date/time) on the back. Alternatively, you can give the Patient Information Card to patients as they leave their current appointment, to remind them of their next appointment and to bring their medicines with them next time.
3. Consider providing a bag to patients to encourage and facilitate bringing in medicines. If patients are reluctant to bring in their medicines, offer them the option of bringing in photographs of their medicine labels.
4. For medicines that need to be refrigerated, suggest that the patient bring the medicine in a thermal tote or bring a photograph of the medicine label.

## Step 2. At Patient Rooming (Staff With Patient)

If the patient brought in medicines, follow the procedure below.

If the patient did NOT bring in medicines, follow procedure beginning on page 3.

## If the patient brought in medicines

1. Thank the patient for bringing in the medicines.
2. Go through the prescription medicines one by one.
  - a. Compare the medicine name, prescribed dose, and prescribed frequency to what is documented in the electronic health record (EHR).
  - b. Discuss the medicine with the patient. Hand the medicine to the patient and ask the patient how he or she takes it (when and how much). You can let the patient know it is okay to look at the container. It may be helpful to ask the patient to show you how he or she takes the medicine.
  - c. If the patient is not taking the medicine as prescribed, try to find out why.
  - d. If the medicine is expired, inform the patient of appropriate ways to dispose of expired medicines. The Food and Drug Administration has advice for appropriately disposing of medicine (<https://www.fda.gov/drugs/resourcesforyou/consumers/buyingusingmedicinesafely/ensuringsafeuseofmedicine/safedisposalofmedicines/ucm186187.htm>).
3. Go through the over-the-counter medicines, vitamins, and herbal medicines one by one.
  - a. Compare the medicine to what is documented in the EHR.
  - b. Discuss the medicine with the patient. Ask the patient how he or she takes it (when and how much). It may be helpful to ask the patient to show you how he or she takes the medicine.
4. If there are any medicines listed in the EHR that the patient did not bring in, discuss those medicines one by one with the patient.
  - a. Ask the patient if he or she is still taking the medicine. Ask the patient how he or she takes it (when and how much).
  - b. If the patient is not taking the medicine as listed in the EHR, try to find out why.
5. Ask the patient whether he or she has remembered all the medicines. Encourage the patient to disclose everything, including medicines from other doctors and medicines he or she only takes occasionally, such as pain relievers.
  - a. Acknowledge that many patients see a variety of providers and ask if the patient sees any other healers and, if so, whether those providers have suggested taking anything else.
  - b. If there are additional medicines, ask the patient how he or she takes them (when and how much).

6. Update the EHR as necessary.
7. Using both the medicine labels and the EHR, check whether any refills are needed.
8. Inform the clinician, verbally or through the EHR, of any medicines that are not being taken as directed or as listed in the EHR.

### If the patient did NOT bring in medicines

1. Discuss the medicines listed in the EHR one by one with the patient.
  - a. Ask the patient if he or she is still taking the medicine. Ask the patient how he or she takes it (when and how much).
  - b. If the patient is not taking the medicine as listed in the EHR, try to find out why.
2. Ask if the patient is taking any other medicines, including prescriptions, over-the-counter medicines, vitamins, and herbal medicines. Encourage the patient to disclose everything, including medicines from other doctors and medicines he or she only takes occasionally.
  - a. Acknowledge that many patients see a variety of providers and ask if the patient sees any other healers and, if so, whether those providers have suggested taking anything else.
  - b. If there are additional medicines, ask the patient how he or she takes them (when and how much).
3. Update the EHR as necessary.
4. Using the EHR, check whether any refills are needed.
5. Inform the clinician, verbally or through the EHR, of any medicines that are not being taken as listed in the EHR.

## Step 3. During the Exam (Clinician)

1. Conduct a reconciliation by reviewing the medicine list with the patient and family members during the office visit. Consider such issues as:
  - Challenges in how the patient is taking the medicine.
  - Possible interactions with other prescriptions or over-the-counter medicines, vitamins, or supplements.
  - Overdoses due to, for example, higher than needed dosing or multiple drugs for the same purpose (e.g., generic plus nongeneric).

- Continued appropriateness of the medicine.
  - Avoidable regimen complexity.
  - Avoidable side effects.
2. Ensure that the patient understands how to take each medicine. You can use the teach-back method to confirm patient understanding. (Guidance on implementing teach-back is available at <http://www.ahrq.gov/professionals/quality-patient-safety/patient-family-engagement/pfeprimarycare/interventions/teach-back.html>.)
  3. Update the EHR to reflect any changes.

There is a job aid provided with this strategy to help you discuss and resolve common barriers to adhering to prescribed medicines.