



# Create a Safe Medicine List Together

## Role Play Scenario 1

### Facilitator Instructions

1. Create props (index cards or post-it notes) to represent the medicine labels.
  - Hydrochlorothiazide 50 mg – 1 tablet PO QD
  - Atorvastatin 20 mg – 1 tablet PO QD (evening)
  - Adult aspirin 81 mg
2. As facilitator, play the role of the patient.
3. Request a volunteer to play the role of the staff member. The staff member will create a safe medicine list together with the patient.
4. Tell the volunteer that the goal is to create a complete and accurate medicine list. The volunteer should write down the medicine name, dose, and frequency for all medicines the patient is currently taking.
5. Provide the volunteer and the training group with information about the scenario. Page 2 contains the basic patient information.
6. Read silently the additional patient information (page 3) to be able to respond to the volunteer during the role play.
7. Role play the scenario with the volunteer.
8. Using the discussion prompts (page 3), engage the training group in a learning discussion on what went well and what could be improved.

## For All

### Purpose

The staff member will create a safe medicine list together with the patient.

### Basic Patient Information

A 78-year-old male patient with uncontrolled hypertension, Mr. Thomas, has come in for a scheduled visit with his primary care clinician for knee pain. Mr. Thomas used to be a very active man and rode his bike everyday until about 2 months ago. He did have a few falls from his bike and has started using a stationary bike instead. He lifts weights and walks often. Having knee pain when riding or walking is a big concern.

The EHR lists the following medicines for Mr. Thomas:

- Hydrochlorothiazide 50 mg – 1 tablet PO QD
- Atorvastatin 20 mg – 1 tablet PO QD
- Low-dose adult aspirin 81 mg – 1 tablet PO QD

## For Facilitator Only

### Additional Patient Information

- Mr. Thomas received a call last night requesting that he bring all of his medicines, including over-the-counter medicines, supplements, and vitamins, to his appointment.
- He has brought in all of his medicines – hydrochlorothiazide 50 mg/tablet, atorvastatin 20 mg/tablet, and low-dose adult aspirin 81 mg/tablet.
- He does not take any over-the-counter medicines, supplements, or vitamins.
- The hydrochlorothiazide (blood pressure medicine) makes Mr. Thomas “pee a lot.” When he takes it everyday, he can’t walk around the block without having to pee, and he gets up at least 4 times a night to pee – this is very frustrating. Mr. Thomas has found that if he only takes this medicine 3 to 4 times a week, he doesn’t need to pee as frequently, so he is only taking it 3 to 4 times a week.
- Mr. Thomas does not readily offer that he only takes his blood pressure medicine 3 to 4 times a week, but he will answer questions truthfully. If he is asked whether he takes his blood pressure medicine, he answers, “for the most part.”
- His blood pressure this morning was 152/91.

### Discussion Prompts

- What do you think was done well?
- What could have been done better?
- Was anything missing?

### Things To Look For

- Did the staff member ask whether Mr. Thomas brought in his medicines?
- Did the staff member thank Mr. Thomas for bringing in all of his medicines?
- Did the staff member use the word *medicine* (not *medication*)?
- Did the staff member ask how Mr. Thomas was taking his medicines, both when and how much?
- Did the staff member allow Mr. Thomas to look at the medicines and read the labels as he answered the questions?
- Did the staff member confirm that Mr. Thomas isn’t taking anything else – other prescriptions, over-the-counter medicines, vitamins, supplements?

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- Did the staff member get all three medicines in the actual dose and frequency?
    - Hydrochlorothiazide 50 mg – 1 tablet PO 3 to 4 times a week (not as prescribed)
    - Atorvastatin 20 mg – 1 tablet PO QD (in the evening)
    - Low-dose adult aspirin 81 mg – 1 tablet PO QD
  - Did the staff member probe why Mr. Thomas isn't taking the hydrochlorothiazide as prescribed?



# Create a Safe Medicine List Together

## Role Play Scenario 2

### Facilitator Instructions

1. As facilitator, play the role of the patient.
2. Request a volunteer to play the role of the staff member. The staff member will create a safe medicine list together with the patient.
3. Tell the volunteer that the goal is to create a complete and accurate medicine list. The volunteer should write down the medicine name, dose, and frequency for all medicines the patient is currently taking.
4. Provide the volunteer and the training group with information about the scenario. Page 2 contains the basic patient information.
5. Read silently the additional patient information (page 3) to be able to respond to the volunteer during the role play.
6. Role play the scenario with the volunteer.
7. Using the discussion prompts (page 3), engage the training group in a learning discussion on what went well and what could be improved.

## For All

### Purpose

The staff member will create a safe medicine list together with the patient.

### Basic Patient Information

A 63-year-old female patient, Mrs. Martin, is here to see her primary care clinician for a followup visit. Mrs. Martin has been struggling with depression since the loss of her father and then the unexpected loss of her sister. To make matters worse, Mrs. Martin is recovering from reconstructive surgery after fracturing her skull when she fell at work this past year.

The EHR lists the following medicines for Mrs. Martin:

- Citalopram 20 mg PO QD
- Vitamin D 1,000 mg PO QD

## For Facilitator Only

### Additional Patient Information

- Mrs. Martin didn't know that she needed to bring her medicines into the office. She didn't receive a postcard or a reminder telephone call.
- Mrs. Martin is very sharp and knows each medicine's name, dose, and frequency.
- The antidepressant medicine has been changed and adjusted several times during the last 6 months. She is currently taking citalopram 40 mg, 1 pill, once a day before breakfast.
- Mrs. Martin suffers from seasonal allergies and started taking Claritin once a day 1 month ago, which seems to work well in controlling her symptoms.
- Mrs. Martin takes 1 vitamin D pill in the morning. Each pill is 1,000 mg.

### Discussion Prompts

- What do you think was done well?
- What could have been done better?
- Was anything missing?

### Things To Look For

- Did the staff member ask whether Mrs. Martin brought in her medicines?
- Did the staff member probe why she didn't bring in her medicines?
- Did the staff member explain why she was asked to bring in her medicines?
- Did the staff member use the word *medicine* (instead of *medication*)?
- Did the staff member get all three medicines in the actual dose and frequency?
  - Citalopram 40 mg PO QD
  - Vitamin D 1,000 mg PO QD
  - Claritin PO QD
- Did the staff member confirm that Mrs. Martin isn't taking anything else – other prescriptions, over-the-counter medicines, vitamins, supplements?
- Did the staff member ask how Mrs. Martin was taking her medicines, both when and how much?
- Did the staff member probe why Mrs. Martin was taking 40 mg of citalopram (since the EHR says 20 mg)?



# Create a Safe Medicine List Together

## Role Play Scenario 3

### Facilitator Instructions

1. Create props (index cards or post-it notes) to represent the medicine labels.
  - Ticagrelor 90 mg – 1 tablet PO BID
  - Metoprolol 25 mg – 3 tablets PO QD (morning)
  - Lisinopril 10 mg – 1 tablet PO QD (morning)
  - Adult aspirin 81 mg – 1 tablet PO QD (morning)
  - Atorvastatin 80 mg – 1 tablet PO QD (evening)
  - Vitamin D 1,000 mg – 1 tablet PO QD
2. As facilitator, play the role of the patient.
3. Request a volunteer to play the role of the staff member. The staff member will create a safe medicine list together with the patient.
4. Tell the volunteer that the goal is to create a complete and accurate medicine list. The volunteer should write down the medicine name, dose, and frequency for all medicines the patient is currently taking.
5. Provide the volunteer and the training group with information about the scenario. Page 2 contains the basic patient information.
6. Read silently the additional patient information (page 3) to be able to respond to the volunteer during the role play.
7. Role play the scenario with the volunteer.
8. Using the discussion prompts (page 3), engage the training group in a learning discussion on what went well and what could be improved.



## For All

### Purpose

The staff member will create a safe medicine list together with the patient.

### Basic Patient Information

A 46-year-old female patient, Ms. Santiago, is here for a scheduled followup visit. Ms. Santiago was discharged from the hospital 4 days ago after a myocardial infarction and the placement of a drug-eluting stent in the right coronary artery through angioplasty. Before the MI, Ms. Santiago had an unremarkable medical history and was taking vitamin D 1,000 mg QD. She is married with three children ages 9, 12, and 15 and works full time as an elementary school teacher.

The EHR lists the following medicines for Ms. Santiago:

- Vitamin D 1,000 mg – 1 tablet PO QD

## For Facilitator Only

### Additional Patient Information

- Ms. Santiago has brought in all her medicines.
- Ms. Santiago's current medicines include:
  - Ticagrelor 90 mg – 1 tablet PO BID
  - Metoprolol 25 mg – 3 tablets PO QD (morning)
  - Lisinopril 10 mg – 1 tablet PO QD (morning)
  - Adult aspirin 81 mg – 1 tablet PO QD (morning)
  - Atorvastatin 80 mg – 1 tablet PO QD (evening)
  - Vitamin D 1,000 mg – 1 tablet PO QD
- Ms. Santiago is feeling overwhelmed. She can't pronounce any of the medicines and doesn't know what they do. She can't keep anything straight and has already missed a few doses. She is sure that she has taken some of them twice because she forgot she had taken them already.

### Discussion Prompts

- What do you think was done well?
- What could have been done better?
- Was anything missing?

### Things To Look For

- Did the staff member ask whether Ms. Santiago brought in her medicines?
- Did the staff member thank Ms. Santiago for bringing in all of her medicines?
- Did the staff member use the word *medicine* (not *medication*)?
- Did the staff member ask how Ms. Santiago was taking her medicines, both when and how much?
- Did the staff member allow Ms. Santiago to look at the medicines and read the labels as she answered the questions?
- Did the staff member confirm that Ms. Santiago isn't taking anything else – other prescriptions, over-the-counter medicines, vitamins, supplements?

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- Did the staff member get all the medicines in the actual dose and frequency?
    - Ticagrelor 90 mg – 1 tablet PO BID
    - Metoprolol 25 mg – 3 tablets PO QD (morning)
    - Lisinopril 10 mg – 1 tablet PO QD (morning)
    - Adult aspirin 81 mg – 1 tablet PO QD (morning)
    - Atorvastatin 80 mg – 1 tablet PO QD (evening)
    - Vitamin D 1,000 mg – 1 tablet PO QD