Medication Reconciliation (MedRec)





Frequently Asked Questions

Who should be involved in medication reconciliation and what are their roles?

The medication reconciliation process is the shared responsibility of healthcare providers in collaboration with patients/clients and families. It requires an inter-professional team approach that includes pharmacists, physicians, nurses and other healthcare providers. Roles and responsibilities for each team member are based on the team's defined medication reconciliation practice model and available staffing resources. Effective models may differ from team to team and from one organization to another.

The pharmacist's role is to coordinate the medication reconciliation process. The pharmacist, wherever possible, should take primary responsibility for ensuring proper communication of medication information to patients/clients, families and other healthcare providers on admission, transfer, and discharge. The pharmacist should ensure that medications are selected and ordered appropriately based on the patient's clinical condition and other factors.

- Medication Reconciliation What's in it for Me? Benefits for Pharmacists AHS
- Medication Reconciliation: Statement on the Role of the Pharmacist
- The Pharmacist's Role in Medication Reconciliation Statement

The **physician's role** is to ensure that the patient/client's medication orders on admission, transfer and discharge are accurate and complete. The rationale for any changes to medications should be documented in the health record and any discrepancies resolved as soon as possible.

- Medication Reconciliation What's in it for Me? Benefits for Physicians AHS
- The Physician's role in MedRec. Issues, strategies and safety principles American Medical Association

The **patient and/or their primary caregiver** are at the centre of every transition in care and play an integral role in the medication reconciliation process. They should be encouraged to:

- ask questions about their medications; For more information see "5 Questions to Ask"
- maintain an accurate and up-to-date record of all of the medications the patient is taking (including prescription and non-prescription medications, vitamins, and natural products);
- share this medication record with all members of their healthcare team

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The **nurse's role** (NP, RN, RPN) is integral to the medication reconciliation process. They are often the first point of contact between a patient/client, family and the healthcare team. Nurses may be involved in the collection and verification of the Best Possible Medication History (BPMH). They provide education to patients/clients and families about their medications, advocate for their needs and support them to play an active role as co-managers of their care. They provide an important communication link between the patient, family and members of the healthcare team. **Nurse practitioners** also ensure that the patient/client's medication orders on admission, transfer and discharge are accurate and complete. The rationale for any changes to medications should be documented in the health record and any discrepancies resolved as soon as possible.

- Medication Reconciliation What's in it for Me? Benefits for Nurses
- The Nurses Role in Medication Reconciliation Role

The role of **other healthcare providers** (e.g. Pharmacy Technicians) in the medication reconciliation process has been documented in the literature for over a decade. Pharmacy technicians can obtain the BPMH and identify discrepancies when provided with adequate training. Some organizations may require a pharmacist's oversight for medication reconciliation activities completed by pharmacy technicians. It is important for pharmacy technicians to know when to consult a pharmacist for complex patients.

TechTalk CE lesson: Medication Reconciliation Pharmacy Techs: Simply Indispensible!

Involving **students** (e.g. pharmacy or nursing students) in the medication reconciliation process can provide an excellent opportunity for professional growth, direct patient care experience and development of patient/client interviewing skills. They can play an important role provided they receive adequate training and have access to appropriate resources.

- <u>Facilitating MedRec in the ER department: A tale of two cities (Pharmacy student and Pharmacy technician models)</u>
- Making a PDiF-ference Results of the Pharmacy Discharge Facilitator Initiative for high-risk medical inpatients.