Best Possible Medication Discharge Plan (BPMDP)
Patient Interview Guide

Ensure these topics are addressed when conducting education to patients regarding discharge.

Identify medications:

1. **Changed** while the patient has been in hospital *(e.g., formulary adjustments, auto-substitutions, dose/frequency changes, etc.)*
2. **No longer required** on discharge. *(Including medications started in hospital and those the patient was taking prior to admission).*
3. **To be continued** on discharge. *(Including medications started in hospital and those the patient was taking prior to admission).*
4. **New** medications the patient is to take on discharge.

Confirm patient's understanding of:

1. **Purpose** for each medication *(e.g., Can you explain to me the reason why you are taking each of your medications?).*
2. **Possible side effects and when it is necessary to seek medical attention** for each medication *(e.g., Can you explain to me the possible side effects of each of your medications (or just new medications) and what to do if these occur?).*
3. **Intended duration of therapy** for each new medication *(e.g., How long will you be on each medication?).*

Provide patient with:

1. **Medication calendar**, summarizing name of medication, purpose, dose, frequency, when best to take medications, duration of therapy and any additional comments which may be necessary.
2. **Follow up information** regarding appointments/laboratory tests that may be necessary concerning their medications.

Ask the patient / caregiver to:

1. **Summarize** their discharge medication instructions *(to assess their understanding of information presented to them).*

Encourage patient / caregiver to:

1. **Bring this medication list** with them to every healthcare appointment, physician / specialist, ER visit, clinic appointment and to their community pharmacy.
2. **Keep their medication list up to date**.
3. **Carry their medication list** with them at all times.
4. **Use one community pharmacy** to process all prescriptions.