

Development of a pocket card to guide medication counseling at hospital discharge

N. Illi¹, N. Schönenberger¹, M. Perrig², C. Baumgartner², C. Meyer-Masseti^{1,3}

¹ Clinical Pharmacology and Toxicology, Department of General Internal Medicine, University Hospital of Bern - Inselspital, 3010 Bern, Switzerland

² Department of General Internal Medicine, University Hospital of Bern - Inselspital, 3010 Bern, Switzerland

³ Institute of Primary Healthcare (BIHAM), University of Bern, 3012 Bern, Switzerland

Introduction and objectives

Medication related problems:

- Frequent, especially during care transitions such as hospital discharge
 - Discharge medication counseling has the potential to reduce harm

Aims:

- Identification of **medication safety hotspots** of the discharge process in the study hospital
- Collecting **patient perspectives** on discharge medication counseling
- Obtain an overview of **useful techniques** for medication counseling
 - Based on all findings: Proposal of a **structured framework** for discharge medication counseling

Methods

This quality improvement project was conducted in the department of General Internal Medicine at the University Hospital of Bern and included the following:

- Semi-structured **face-to-face interviews** with health care professionals (physicians, nurses, care coordinators)
- Telephone interviews** about discharge counseling and medication management with patients discharged to home
- Scoping literature review** in PubMed, Embase, and CINAHL



Identification of useful techniques for discharge medication counseling

- Based on the findings: development of a **pocket card** to systematically guide discharge medication counseling



Results

Section 1: preparation

- Clarification of the necessity of participation of **relatives**
- Clarification of the need for an **interpreter**
- Medication reconciliation** of pre and post hospital medication
 - **Note differences** between pre and post hospital medication in the clinical information system under "Change prescription" → "**Comment on prescription**"
 - If possible, provide the medications that were brought along
- Create and print **documents**:
 - Dosage card, prescription (+ narcotic prescriptions for opiates), discharge report, oral anticoagulation card if new oral anticoagulation therapy.

Section 2: explaining the goal

"The goal of this counseling is to inform you about your medications and how you should be using them at home."

Section 3 (main part): medication counseling:

All medications:

- Explicitly explain and discuss **changes** and conversions
 - refer to the current discharge medication list: explain **indications** and effects in a patient-friendly way
- Explain **dosage** (incl. **as needed meds**¹), exact **time of administration** (before/with/after meals, e.g. fasting: 1 hour before or 2 hours after meals), **time to onset of action** and **duration of therapy** using the medication list
- Draw attention to the risk of **interactions**²

Special medications or needs of patients:

- What to do if you **forget to take the medication**³
- Specific, important **adverse drug reactions**⁴ (e.g., influence on fitness to drive)
- Special **instructions for use**⁵
- Information regarding **self-monitoring** (e.g. weight control with diuretics due to chronic heart failure; measuring blood pressure)

Section 4: conclusion

- Point out the necessity to procure **medications** at the pharmacy
- Advise on planning a visit with the **primary care physician**
- Emphasize importance of **adherence**⁶
- Point out potential **aids**: medication dispenser, tablet divider
- Give **contact details** for potential questions
- Ask patients about any uncertainties
- Check patient understanding with the teach-back method⁷

Back side of the card: **explanation** of specific topics

40 included articles:

- Medication counseling can have a **positive impact** on patient safety
- Clinical pharmacists** successfully integrated into the process



Discharge medication counseling by resident physicians

Greatest obstacles:

- Time resources**
- Discharges on **short notice**
- Non-standardized process**



«We are generally **satisfied** with the medication counseling»

Wishing for **more information** about:

- Dose** and dose **adjustments**
- Medication changes**
- Indications**
- The process of **medication supply**



Discussion

- Successful **development of a pocket card to systematically guide discharge medication counseling**
- Implementation of the pocket card is planned



Nadine Illi, nadine.illi@students.unibe.ch
Carla Meyer-Masseti, carla.meyer-masseti@extern.insel.ch