

ASHP

INTERSECTIONS

FALL 2007

CONNECTING PHARMACISTS IN HOSPITALS AND HEALTH SYSTEMS



Balancing Act

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Summit Attendees Tackle Continuity of Care Issues

Medication lists that include patients' current medications, as well as the most relevant information about their care, would be an effective tool in tackling the problems caused by a lack of continuity of care, according to participants in a recent meeting on the problem.

Hosted by ASHP and the ASHP Research and Education Foundation, the first-ever Continuity of Care in Medication Use Summit, held in Bethesda, Md., gathered 30 professionals from numerous healthcare disciplines, national quality organizations, and social marketing experts to talk about the challenges of ensuring smooth patient transitions among healthcare settings.

Patient-Centered, Patient-Owned

Participants discussed the importance of patient-centered, patient-owned medication lists to help prevent drug interactions, duplicate therapies, and medication errors. While many organizations have developed such lists—including ASHP—there is no national standard regarding the data that they should contain.

"In emergency medicine, we're affected by the unreliable and inconsistent nature of medication information for our patients," said Rollin J. Fairbanks, M.D., an assistant professor of emergency medicine at the University of Rochester, N.Y. "Technology exists to provide patients with personal medication records, but a standard must be created to define its contents. The ASHP summit did just that."

In general, conference participants favored medication lists that:

- + Are frequently updated and simple,
- + Include current prescription and non-prescription medications and herbal and dietary supplements, and
- + Detail patients' personal information, such as emergency contacts, and allergies and other medicine-related problems.

Summit-goers agreed that evidence-based research should be conducted on the most effective formats for the lists, their value to patients, and success in smoothing transitions among care settings.

Reaching Consensus on Data Elements

"ASHP pulled together a very dynamic group of committed professionals with diverse backgrounds for the summit," said Denise King, RN, MSN, CEN, president-elect of the Emergency Nurses Association. "I think we all were surprised at how much discussion it took to ensure we were on the same page in defining each of the data elements."

In the end, King said she was impressed that the group reached a strong consensus on the minimum data elements that should be included in medication lists.

Kenneth R. Epstein, M.D., director of medical affairs and clinical research at IPC—The Hospitalist Co., North Hollywood, Calif., said the multidisciplinary nature of the meeting was very helpful. "I've discussed continuity of care with my physician colleagues, but to be in a room and learn about the issues from the point of view of pharmacists, nurses, consumer advocates, social workers, and other healthcare professionals was truly enlightening," he said.

ASHP has contracted with a health literacy specialist to ensure that the language used in the list is clearly understood by patients. Conference participants also recommended the use of a social marketing campaign to educate patients on the value of medication lists.

A proceedings summary of the summit is available at www.ashpfoundation.org, and a detailed report outlining the minimum data elements for medication lists will be published in the *American Journal of Health-System Pharmacy*. ♦

Consensus-based Medication List Minimum Data Elements

Personal Information

Name _____
 Date of Birth _____
 Preferred Method of Contact _____
 Emergency Contact _____
 Emergency Contact _____
 Preferred Method of Contact _____

Medication Reactions

Allergies _____
 Other Medication-Related Problems _____

Current Medication Information

Brand Name and Generic Name _____
 Description _____
 Number Used _____
 Schedule _____
 Use Instructions _____
 Start Date _____
 Stop Date _____
 Indication _____
 Prescribed/Recommended By _____

Medication List Information

Date Last Updated

Last Updated by Whom

Date Last Reviewed with
Healthcare Provider