



PHARMACEUTICAL CARE NETWORK EUROPE

Working Conference 2013 – Abstract

Collaborative pharmaceutical care in research and practice

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The above mentioned participant in the PCNE WC 2013 wishes to submit following abstract for a poster or oral communication. If accepted and presented, the abstract will be published in the International Journal of Clinical Pharmacy. Please make sure the abstract is no longer than 350 words, excl. author-details.

Title Project SAFEMED: Pharmaceutical care for patients during admission and post-discharge.		
Author(s): Lawrence M. Brown, PharmD, PhD; Jim Bailey, MD, MPH; and Jill Nault, MS, MSSW		
Type of abstract <input type="checkbox"/> Research <input type="checkbox"/> Practice development <input checked="" type="checkbox"/> Practice implementation		
Abstract: <p>In the current hospital environment, it is difficult for staff nurses and pharmacists to dedicate the needed time and effort to obtain an accurate medication list upon admission, a detailed medication review, or counsel the patients about the medications they will be taking after discharge. The SAFEMED medication process improves on the current hospital based medication process in several ways, by having a Community Health Pharmacist and Community Health Pharmacy Technicians that are specifically hired for the purpose of improving the medication processes during the hospital admission and for nine months after the patient is discharged.</p> <p>Project SAFEMED ensures that an accurate home medication list is obtained from the patient and then verified by contacting the patient's pharmacy(ies) to get a list of medications that were filled in the last three months. Secondly, the Community Health Pharmacist will conduct an assessment of the patient's medications to determine if all of the patient's medications are needed, effective, and safe, as well as assess any medication adherence issues. Thirdly, the SAFEMED medication process ensures that a medication review of the proposed discharge medications is completed for the purposed of identifying and resolving any issues before the patient goes home, and that the patient receives medication counseling prior to discharge.</p> <p>However, the biggest improvement occurs after the patient is discharged from the hospital. Each patient will receive a home visit and a monthly phone call from a Community Health Pharmacy Technician, who will check for changes in medications, as well as any medication adverse</p>		

effects and changes in adherence. Whenever a medication related problem is suspected, the Community Health Pharmacist will be notified and will work to resolve the problems in consultation with the patient's Primary Care Provider (PCP).

This SAFEMED process will allow for earlier identification and resolution of preventable medication related problems and worsening health conditions. SAFEMED should lead to a decrease in preventable emergency room visits and preventable hospital re-admissions, in addition to improved disease management and quality of life for the patients. The patient's PCP will benefit from receiving a monthly update on the patient's conditions and medication adherence.

+++ NB: PhD students still pay the early bird fee for their abstract if their abstract is accepted ++++