



**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: Patients' "self-reconciliation" of the medication list compared with medication verification with pharmacist

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Type of abstract

Research Practice development Practice implementation

Aim of project/study: To investigate the effect of patients receiving the Medication List (ML) in the Electronic Medical Record (EMR) before a scheduled visit to the physician with a call to control the ML and bring it to the visit, compared to medication verification with a trained pharmacy student immediately before the visit.

Method: Patients, with ≥ 5 prescribed medications in the ML, scheduled to visit a physician at 4 Health Care Centres in the Kalmar County, were invited to participate and were assigned to 1) self-reconciliation (SR) - to check the ML for accuracy and discrepancies at home and bring the ML to the visit with the physician; or 2) a medication verification (MV) with a pharmacy student immediately before the visit. All patients were interviewed immediately after the visit to the physician.

Results: 172 patients (104 women) with in total 1740 prescriptions in the ML (including missing prescriptions in the ML) were included - 106 SC-patients (1125 prescriptions) and 66 MV-patients (615 prescriptions). There were no differences between the groups before the visit; 80 % of patients in both groups had at least 1 discrepancy in the ML, in total 221/1125 discrepancies (19.6 %) in the ML in the SR-group compared with 144/615 (23.2 %) discrepancies in the MV-group. After the visit, 57/106 (54 %) patients in the SR-group had a ML without discrepancies compared with 42/66 (64 %) patients without discrepancies in the MV-group ($p=0.203$; not significant). Total numbers of discrepancies after visiting the physician were 93/1043 (8.9 %) in the SR-group compared with 48/560 (8.3 %) in the MV-group ($p=0.5273$; not significant).