

PREADMISSION MEDICATION LIST VERIFICATION AND ORDER FORM (Medication Reconciliation)

Allergies: _____

*LIST BELOW ALL OF THE PATIENT'S MEDICATIONS PRIOR TO ADMISSION INCLUDING OTC AND HERBAL MEDS
NEW MEDICATIONS OR MEDICATION CHANGES SHOULD BE WRITTEN ON ADMISSION ORDERS*

Source of Medication list: (check all used)

- ☐ Patient medication list
☐ Patient/Family recall
☐ Pharmacy _____
☐ Primary care physician list / PCHIS
☐ Previous discharge paperwork
☐ Medication Administration Record from facility
☐ Other: _____

☐ **CHECK HERE IF THIS IS AN ADDENDUM TO OR
REVISION OF PREVIOUSLY COMPLETED
MEDICATION LIST**

***CIRCLE C to continue OR
DC to discontinue***

MEDICATION HISTORY RECORDED/VERIFIED BY: _____

DATE RECORDED: _____

					PHYSICIAN ORDER	PHYSICIAN ORDER	COMPLETE On Discharge
MEDIATION NAME (WRITE LEGIBLY)					Continue on Admission	Continue on Transfer	
DOSE (mg, mcg,)	ROUTE (PO, GT, SC, IV)	FREQUENCY	LAST DOSE DATE/TIME				
1.					C DC		C DC
2.					C DC		C DC
3.					C DC		C DC
4.					C DC		C DC
5.					C DC		C DC
6.					C DC		C DC
7.					C DC		C DC
8.					C DC		C DC
9.					C DC		C DC
10.					C DC		C DC
11.					C DC		C DC
12.					C DC		C DC
13.					C DC		C DC
14.					C DC		C DC
15.					C DC		C DC

Do not scan or take off orders without MD/NP/PA signature

M.D. Signature: _____ Print Name: _____

Pager: _____

Date/Time: _____

Reviewed and Transcribed

Nurse Signature: _____

Date/Time: _____

Scan to Pharmacy. File under Orders with the History and Physical.

This form/process has been introduced to facilitate providers getting patients on the most accurate list of medications at admission, transfer, and discharge—the times when medication errors are most likely to occur. Careful attention to this process has been shown to result in fewer errors and reduction in harm to patients.

Instructions for proper use:

Admission:





1. A nurse, mid-level provider, or physician should take as thorough a medication history as possible. Consultation with the primary care physician, pharmacy, and family members may be necessary to generate the most accurate medication list.
2. Upon admission, the physician/nurse practitioner/physician's assistant responsible for the patient should carefully consider whether to continue (C) or Discontinue (DC) each medication and circle the appropriate letters..
 - a. For medications that require dosage changes, the medication should be discontinued on this form, and the new dosage should be written on the admission order sheet.
 - b. For medications for which there exists a hospital therapeutic substitution, the medication should be discontinued and the new medication to be substituted should be ordered on the admission order form.
3. Upon completion, the provider should sign and date on the M.D. signature line. This is now treated as a physician's order. The form is scanned to pharmacy and filed in the Orders section of the chart.
4. The nurse confirms the history with the patient and confirms proper transcription to the written Medication Administration record (Kardex) and signs on the Nurse signature line.
5. Admission orders should indicate, "See reconciliation form." All new medications to be started on admission should appear on the admission order form. The History and Physical may indicate "See reconciliation form" in the Medications area.
6. If additional medication history is made available after the form has already been scanned to pharmacy, the medication history may be updated by completing a second reconciliation form noting the addition or changes, and checking the Addendum/Revision box.

Discharge:

7. At discharge, this form should be reviewed together with the Medication Administration Record (Kardex). The provider should carefully consider whether each medication should be continued, resumed, or discontinued after the patient leaves the hospital. The provider should circle the letters in the "Discharge" column. All medications and instructions should also be recorded on the discharge paperwork.

Pharmacy	Phone number	Pharmacy	Phone number
Memorial campus pharmacy	334-6356	CVS-Marlboro	508-485-6119
University campus pharmacy	856-2277	CVS-Millbury	508-865-8805
Beacon Pharmacy	508-754-4075	CVS-Park Avenue	508-752-0925
Brooks- Dudley	508-949-0512	CVS-Shrewsbury Spags	508-752-7721
Brooks-Chandler St.	508-754-5348	CVS-Spencer	508-885-3838
Brooks-Grafton	508-839-6133	CVS-Webster	508-949-0641
Brooks-Greenwood Fair	508-752-1911	CVS-Webster Square	508-753-3297
Brooks-Holden Main St.	508-829-6504	CVS-West Boylston	508-852-2406
Brooks-Millbury	508-865-0544	CVS –Grafton	508-839-2240
Brooks-Oxford	508-987-5386	CVS – Oxford	508 987-1327
Brooks-Shrewsbury	508-842-8400	CVS – Westborough	508-898-9396
Brooks-Sturbridge	508-347-7874	Fallon	508-852-2866
CVS- Southwest Cutoff	508-793-1903	Great Brook Valley	508-595-1128
CVS-Auburn	508-832-6257	Monahan Medical Services	508-756-8300
CVS-Chandler	508-798-0221	Stop & Shop Grafton St	508-791-0070
CVS-Front St.	508-757-8118	Stop and Shop West	508 898 0427
CVS-Gold Star Blvd	508-852-0238	Walgreens Lincoln St	508-852-2370
CVS-Grafton St.	508-793-0851	Walgreens Mill St	508-791-2111
CVS-Holden	508-829-7631	Walgreens Park Ave	508-767-1732
CVS-Leominster	978-534-5114	WalMart- Hudson	978-568-3377
CVS-Lincoln Plaza	508-856-0211	WalMart- Oxford	508-987-1111
CVS-Lincoln St.	508-791-2579	WalMart Northboro	508-393-1745
		WalMart-Whitinsville	508-234-9196
		West Side Pharmacy	508-754-4155

PROHIBITED ABBREVIATIONS AT UMASS MEMORIAL

<u>UNSAFE AND UNACCEPTABLE</u>	<u>SAFE AND ACCEPTABLE</u>	<u>RATIONALE</u>
 .5mg	0.5mg	<i>Always</i> put a ZERO before a decimal point to avoid misreading as a whole number.
 5.0 mg	5 mg	Avoid unnecessary 0's after the decimal point to avoid misreading the intended number.
 U or u	UNITS	This dangerous abbreviation can look like a 0.
 ug	MCG or Micrograms	This abbreviation can be read as mgs.