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The role of the pharmacist in decreasing discharge medication discrepancies: A prospective study

Taghrid Shehleh Abu Hassan, Sumaya Al Yafei, Radwa M Hussein, Sahar Nasser, Ahmed Basha, Hafedh Ghazouani and Shereen Elazzazy
National Center for Cancer Care & Research, Qatar

Medication Reconciliation (Med.Rec) is a major intervention which reduces medication discrepancies and subsequent patient harm at different patients' care transitions. Data on the incidence of the unintended medications discrepancies ranges from 40-50% upon admission to acute care hospitals and 40% at hospitals discharges. Outpatient pharmacist play a lead role in detecting medication related problems; this urges the need to translate their qualitative values into quantitative measures. Primary objective of this study is to investigate the impact of outpatient pharmacists' interventions during discharge reconciliation in reducing medication errors and discrepancies. Secondary objective to detect the most common medication related problems. A prospective observational study, conducted at a 62-bed tertiary care (National Centre for Cancer Care and Research) in Qatar. All discharged patients were included in the study over duration of 10 months. Patients who were discharged from the chemotherapy infusion unit were excluded. A standardized intervention form was generated to document interventions. Collected data were categorized into medication error or medication discrepancy. A statistical analysis included exploratory analysis and descriptive statistics using STATISTICA 11.0 Version. Total of 591 discharge prescriptions included, 278 (47%) required pharmacist interventions with 190 medication discrepancies and 122 medication errors. The most common medication related problems were incomplete orders (34%) and prescribing restricted medication without privilege (29%). Outpatient pharmacists have a significant role towards detecting and reducing medication errors and discrepancies upon patient discharge. However, despite their effective interventions, most of these medications related problems are preventable. An improved quality process and awareness can create an efficient medication safety environment.

Biography

Taghrid Shehleh Abu Hassan has completed her Bachelor's degree of Pharmaceutical Science at Philadelphia University, Jordan and completed her Master's degree of Clinical Pharmacy at Queen's University, UK. She has an experience in hematology/oncology hospital pharmacy, pharmacy management, aseptic pharmaceutical preparation, inpatient and ambulatory setting. Currently, she provides care as the Senior Pharmacist for Unit Dose/Inpatient Pharmacy Unit at National Center for Cancer Care and Research, Qatar. She is a Preceptor for Qatar University students and has experience in peer-reviewed publications and poster presentations.

t_abuhassan@yahoo.com

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