

# National Allied Health Conference

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## **Partnered medication charting model: Clinical pharmacist and medical officer in the Emergency Short Stay and General Medicine Unit**

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### Background

A partnered medication review and charting model between a pharmacist and medical officer was developed and endorsed by the relevant hospital committees, the Emergency and Trauma Centre and the General Medicine Unit.

### Methods

Credentialed pharmacists charted pre-admission medications and venous thromboembolism prophylaxis in collaboration with the admitting medical officer for patients admitted to the Emergency Short Stay Unit (ESSU) and the General Medicine Unit (GMU). A second pharmacist reviewed all charts within 24 hours for each patient charted medication by a pharmacist, providing a double check. A prospective audit was undertaken of all patients from the initiation of the service and funding sought for further evaluation and expansion.

### Results

The model commenced in November 2012 with over 35 pharmacists credentialed since then. A prospective audit from Nov – April was undertaken. A total of 549 patients had medications charted by a pharmacist from the 14<sup>th</sup> of November 2012 to the 30<sup>th</sup> of April 2013. A total of 4765 medications were charted by pharmacists with 7 identified errors, corresponding to an error rate of 1.47 per 1000 drugs charted. VTE prophylaxis was charted for 158 patients (28.8%). Following discussion with the admitting doctor and on clinical grounds, a total of 420 drugs (9.7%) were withheld, 136 ceased (3.1%), 109 dose changes were made (2.5%), and 21 route changes were made (0.5%).

### Discussion

Partnered medication review and charting by a pharmacist in the ESSU and GMU is achievable, safe and effective. Benefits from the model extend beyond the pharmacist charting the medications, with the pharmacist adding clinical value to the admission process through early collaboration with the medical officer. Planned expansion of this model, which included completion of a randomised clinical study is underway and multi-site rollout supported by Vic DoH is also planned.

