

# Reconciling Medication Information

## Hospital Accreditation Program

### NPSG.03.06.01

1 Maintain and communicate accurate patient medication information.

#### Elements of Performance for NPSG.03.06.01

- 2 1. Obtain information on the medications the patient is currently taking when he or she is admitted to the hospital or is seen in an outpatient  
3 setting. This information is documented in a list or other format that is useful to those who manage medications.  
4 Note 1: Current medications include those taken at scheduled times and those taken on an as-needed basis. See the Glossary for a definition  
5 of medications.  
6 Note 2: It is often difficult to obtain complete information on current medications from a patient. A good faith effort to obtain this information  
7 from the patient and/or other sources will be considered as meeting the intent of the EP.
- 8 2. Define the types of medication information to be collected in non–24-hour settings and different patient circumstances.  
9 Note 1: Examples of non–24-hour settings include the emergency department, primary care, outpatient radiology, ambulatory surgery, and  
10 diagnostic settings.  
11 Note 2: Examples of medication information that may be collected include name, dose, route, frequency, and purpose.
- 12 3. Compare the medication information the patient brought to the hospital with the medications ordered for the patient by the hospital in order to  
13 identify and resolve discrepancies.  
14 Note: Discrepancies include omissions, duplications, contraindications, unclear information, and changes. A qualified individual, identified by  
15 the hospital, does the comparison. (See also HR.01.06.01, EP 1)
- 16 4. Provide the patient (or family as needed) with written information on the medications the patient should be taking when he or she is  
17 discharged from the hospital or at the end of an outpatient encounter (for example, name, dose, route, frequency, purpose).  
18 Note: When the only additional medications prescribed are for a short duration, the medication information the hospital provides may include  
19 only those medications. For more information about communications to other providers of care when the patient is discharged or transferred,  
20 refer to Standard PC.04.02.01.
- 21 5. Explain the importance of managing medication information to the patient when he or she is discharged from the hospital or at the end of an  
22 outpatient encounter.  
23 Note: Examples include instructing the patient to give a list to his or her primary care physician; to update the information when medications  
24 are discontinued, doses are changed, or new medications (including over-the-counter products) are added; and to carry medication  
25 information at all times in the event of emergency situations. (For information on patient education on medications, refer to Standards  
26 MM.06.01.03, PC.02.03.01, and PC.04.01.05.)