

# MEDICATION WITHOUT HARM

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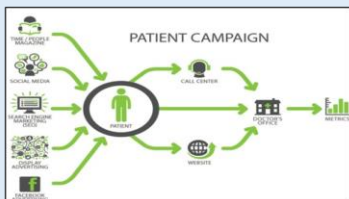
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The three key actions of the 3<sup>rd</sup> WHO Global Patient Safety Challenge are: 1. Polypharmacy 2. High-risk situations 3. Transitions of care

The strategic framework involves the following

## 1. Patients and public

### 1.1 Public awareness and medication literacy



### 1.2 Patient reporting

**MEDICINES SIDE EFFECT REPORTING FORM (FOR CONSUMERS)**  
Indian Pharmacopoeia Commission, National Coordination Centre- Pharmacovigilance Programme of India, Ministry of Health & Family Welfare, Government of India.

1. Patient Details  
 Patient's Initials: ☐ Gender: ☐ Male ☐ Female ☐ Other ☐ Age (Year or Month):

2. Health Information

### 1.3 Patient engagement



### 1.4 Involvement of Patients organization



## 2. Medicines

### 2.1 Product quality and safety



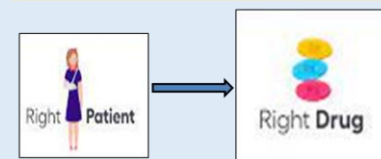
### 2.3 Naming, labelling and packaging



### 2.2 Storage and safe disposal



### 2.4 Right product at point of care



## 3. Healthcare professionals

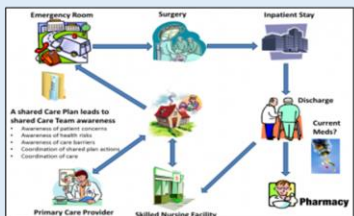
### 3.1 Education and training



### 3.3 Communication and team work



### 3.2 Capability at point of care



### 3.4 Incident reporting and learning



## 4. Systems and practices of medications

### 4.1 Leadership and Governance



### 4.3 Prescribing, preparation and dispensing



### 4.2 Administration and patient monitoring



### 4.4 Monitoring and evaluation



## The Case Study- Medication Error

A 62 years old male patient of post bilateral pulmonary embolism and was prescribed anticoagulant Coumadin (warfarin) 5mg daily. He came for weekly follow up with report of INR 8.

### Questioning

- No extra-warfarin
- No recent alcohol intake
- No new prescription medication
- No symptoms of bruising/bleeding

### Further questioning

New medication started 5 days earlier – Xarelto 2mg (Rivaroxaban)

### Enquiry

- Clinic staff had asked to discontinue Xarelto. Prescription for Xarelto had been sent to his retail pharmacy to inquire about the cost of the medication with his insurance plan.
- The retail pharmacy kept it on hold rather than discontinuation and filled and dispensed it.
- Patient was not counseled about the same and assumed that it was prescribed for neuropathy

### Action

Xarelto was discontinued and warfarin dose gradually reduced until INR was within range

### Importance

- Case shows importance of counseling patients on new medication and inquiring about potential duplicate therapies.
- Good communication is vital, including a formal comparison of medicines pre and post-care, so-called medication reconciliation. Patients can be valuable and active participants in this process by maintaining a current medicine list that is updated when any medicine changes occur.

### Medication reconciliation

- Medication reconciliation is the process of creating the most accurate list possible of all medications a patient is taking — including drug name, dosage, frequency, and route — and comparing that list against the physician's admission, transfer, and/or discharge orders, with the goal of providing correct medications.
- It ensures that a hospital patient's medication list is as up-to-date as possible.
- This reconciliation is done to avoid medication errors such as omissions, duplications, dosing errors or drug interactions.

## Medication Reconciliation

