

[IMAGE]

Medication Discrepancies Found During Hospital Admissions

An accurate medication use history is a key element of the patient assessment process on admission to a hospital; however, prior studies have shown that medication discrepancies at the time of hospital admission are common and that such errors have the potential to cause harm to patients.

To study these types of discrepancies, researchers examined 151 patients (average age: 77 years) over a three-month period who were admitted to a teaching hospital. A discrepancy was defined as "any difference between the medication use history and the admission medication orders" and included omissions or additions of medications; medication substitutions within the same pharmacologic class; and changes in dose, frequency or administration as part of the criteria. Patients were included in the study if they reported using a minimum of four prescription drugs prior to admission.

Results: Researchers found that 53.6 percent of study participants had at least one unintended discrepancy, the most common being the omission of a regularly used medication (46.4 percent). It was determined that 38.6 percent of the discrepancies "had the potential to cause moderate to severe discomfort or clinical deterioration."

The Researchers noted study limitations that included "the absence of a gold standard for the identification of home medication use. We relied on the report of the patient or caregiver in conjunction with collateral information from medication vials or pharmacy contacts whenever possible. Previous research suggests that our study assessments provided the best available measure of patients' actual home medication use."

Nonetheless, they concluded, "Medication errors at the time of hospital admission are common, and some have the potential to cause harm. Better methods of ensuring an accurate medication history at the time of hospital admission are needed."

For more information on this and other health-related studies, visit www.chiropracticresearchreview.com.

Reference:

Cornish PL, Knowles SR, Marchesano R, et al. Unintended medication discrepancies at the time of hospital admission. *Archives of Internal Medicine* 2005;165:424-429.

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