

## Avoid Common Pitfalls With Med Lists

You play a key role in **getting the best possible medication list when updating patient profiles, taking med histories for MTM, etc.**

Gathering a patient's complete med info can help prevent mishaps...such as interactions, dosing errors, and duplicate therapy.

Use these tips to obtain full and accurate details.

**Be thorough.** Ask patients for ALL Rx meds, OTCs, vitamins, and supplements they're taking...plus the dose, route, frequency, etc.

Prompt the patient with cues...to uncover commonly forgotten meds. Ask about drug samples...mail-order Rx...meds injected at the prescriber's office...eye drops...patches...inhalers...creams...etc.

Inquire about meds the patient has STOPPED taking...and make a note about these for your pharmacist. A patient may have discontinued a med on their own due to cost, side effects, or other problems.

**Use effective communication.** Ask open-ended questions to avoid "yes" or "no" answers...and get a more complete picture.

For example, ask "How many times a day do you take your atenolol?" rather than "Do you take your atenolol twice daily?" to find out how the patient is ACTUALLY taking the med...versus what's on the Rx label.

Avoid medical jargon while talking with the patient and writing med lists. Using "as needed" instead of "PRN"...and "three times daily" instead of "TID"...can help prevent misunderstandings and errors.

**Keep lists current.** Give patients their med lists...and encourage them to show it at every office and pharmacy visit. That way you can help update it when a med is added, changed, or discontinued.

Get our technician tutorial, *Mastering Medication Lists and Histories*, to help pull patients' med info together into one place.

### Key References:

-P T 2018;43(11):676-84

-J Am Geriatr Soc 2014;62(2):244-52

-Br J Clin Pharmacol 2009;67(6):671-5

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