

Discharge Medication Reconciliation/ Finalization and Prescriptions

CARE4 MODULE NAME: Order Management (Web Acute & Web ED)

Overview

With the implementation of Meditech Expanse, the discharge medication reconciliation process will be fully electronic. With the process becoming fully electronic, it also helps making sure the home medication list is up to date from one visit to another.

Two reports will be produced by this process:

Discharge Prescription

- May NOT be a complete list of medications at the time of discharge;
- Will only include medications for which a new prescription is provided;
- Should NOT be used as the sole source of information to provide to community pharmacies (see Home Medication List below)

Home Medication List

- Includes the patient's complete medication history at the time of discharge;
- Categorizes the patient's medications into five sections:
 - **New medications:** Newly started in hospital
 - **Continued medications:** Previously prescribed at home that are to be continued
 - **Changed Medications:** Previously prescribed at home that have been changed (ex.: Increased or decreased dosage);
 - **Held Medications:** Previously prescribed at home that are to be held either until a specified date or a specified condition is met
 - **Discontinued medications:** Previously prescribed at home that are to be discontinued;
- Patient's will receive a copy at the time of discharge to keep for their records;
- Is NOT a prescription and cannot be filled as such.
- A second copy of this report will be included in the Discharge Packet to be provided to the pharmacy in combination with the prescriptions.

IMPORTANT

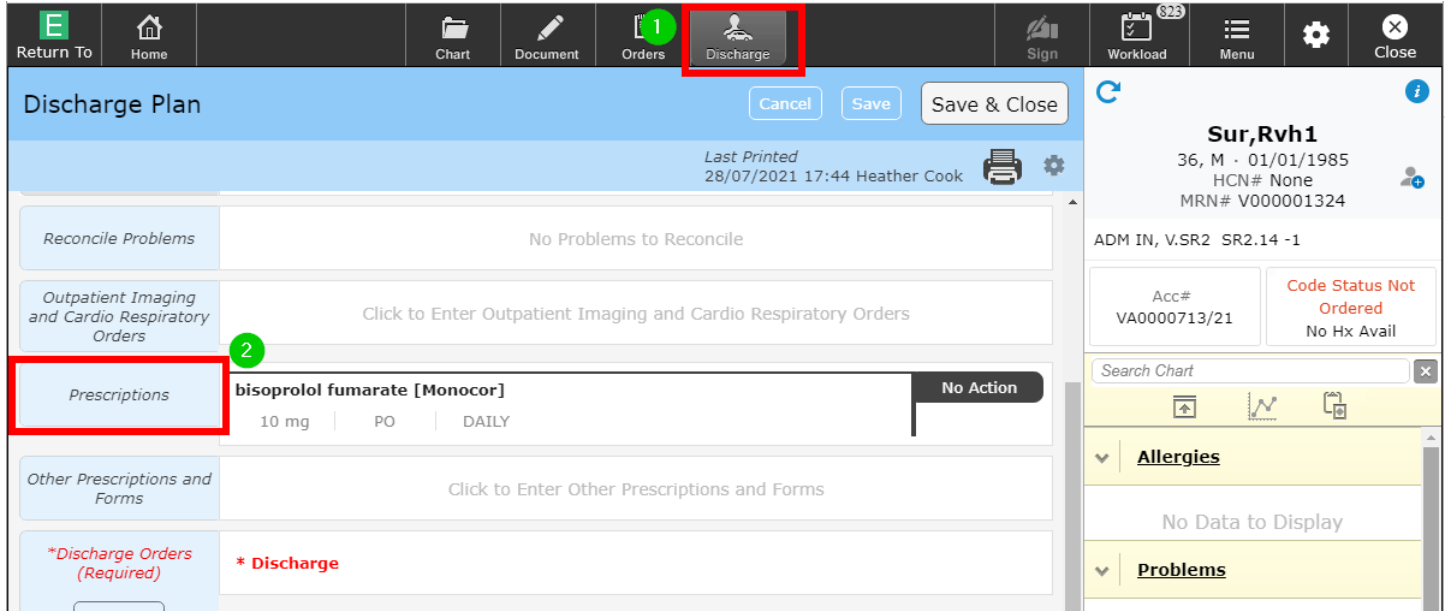
Discharge medication reconciliation for ADMITTED PATIENTS is an Accreditation Canada requirement and community pharmacies must be provided with the Home Medication List AND Discharge Prescription to ensure all relevant medication information has been shared. Failure to send the Home Medication List alongside the prescription may result in unnecessary clarification calls from pharmacy and increase the risk of medications errors on discharge due to the inability to complete an accurate discharge medication reconciliation within the community.

Note: There may be exceptions where the home medication list is not required, as in the case of an outpatient where a medication reconciliation is not relevant and only a few prescriptions are necessary.


Discharge Medication Reconciliation/ Finalization and Prescriptions

How to Initiate the Discharge Medication Reconciliation Process

- Within the patient's chart, select **Discharge** located in the header.
- Select Prescriptions to launch you into the discharge medication reconciliation routine.



Layout of the Prescriptions Routine

In the prescriptions routine the reconciliation process should be done in a *Top-to-Bottom* and *Left-to-Right* sequence. Medications will be sorted into two columns with home medications appearing on the left side of the screen and visit medications appearing on the right. Any home medications that were continued while in hospital will be linked with its corresponding visit medication as indicated by the links icon .

	Home Medications	Visit Medications
Start reconciliation of Home Medications that were held during the patient's visit	Start here!	
Then, going down, reconcile medications that were continued during the visit. Decide to continue the medication as taken at home OR as it was taken during the visit.	Decide to continue/stop home dosage	Or to continue visit dosage
Lastly, decide if the patient needs to continue any visit medications.		End Here (These would become new Home Medications and update the home med list!).

Discharge Medication Reconciliation/ Finalization and Prescriptions

The screenshot displays two columns: **Home Medications** and **Visit Medications**. The **Home Medications** column has a **Continue All** button, while the **Visit Medications** column has a **Stop All** button. Three medication entries are shown:


- bisoprolol fumarate [Monocor] 10 mg Tablet**: 10 mg PO DAILY, Last Taken: Unknown. Buttons: *Continue, *Hold, *Stop. A red box labeled "Link Icon" points to an information icon (i) next to this entry.
- furosemide 20 mg Tablet**: 20 mg PO BID, Last Taken: Unknown. Buttons: *Continue, *Hold, *Stop.
- ciprofloxacin [Cipro]**: 500 mg PO BID, Last Taken: [blank]. Buttons: *Continue, *Stop.

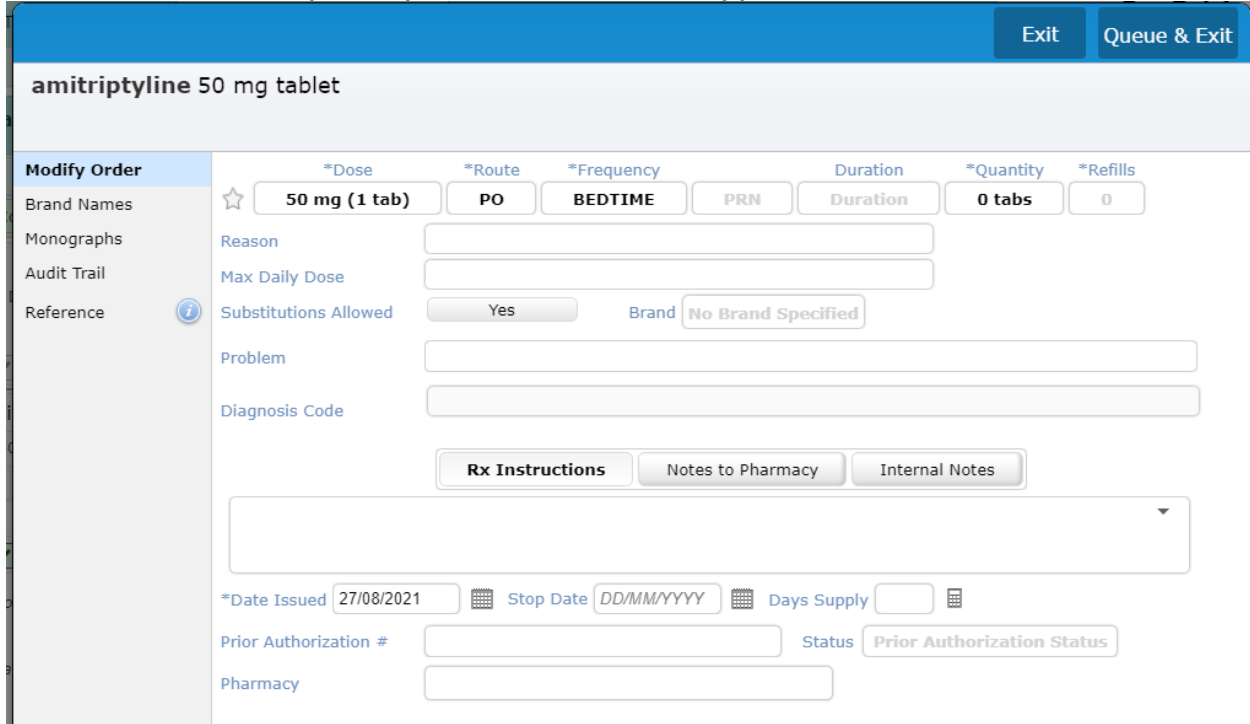
Common prescription fields such as Dose, Route, Frequency, Quantity, Day Supply, Refills and Additional Rx Instructions can be edited/completed directly from the reconcile screen.

This close-up shows the editing interface for **amitriptyline 50 mg Tablet**. The prescription details are: 50 mg, PO, BEDTIME, PRN. A red box labeled "Click to edit" points to a button next to these details. Below the prescription details are several input fields:

- Rx Instructions**: A dropdown menu.
- Notes to Pharmacy**: A text input field.
- Max Daily Dose**: A text input field.
- Protocol**: A dropdown menu.
- Taper**: A dropdown menu with a search function labeled "Search For Taper".

Discharge Medication Reconciliation/ Finalization and Prescriptions

To access additional prescription fields, select the down arrow  and a pop-up window with detailed prescription information will appear.

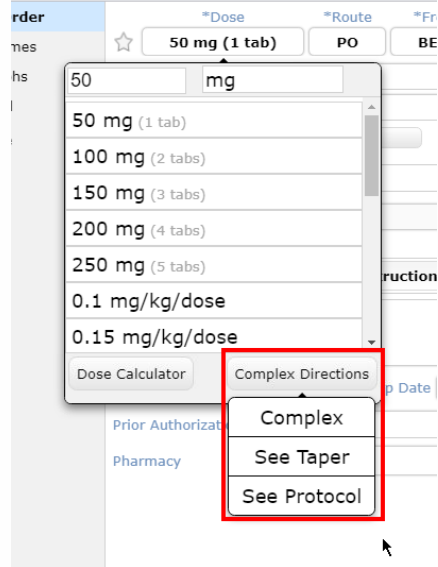


The screenshot shows a software interface for a prescription. At the top right, there are buttons for "Exit" and "Queue & Exit". The main title of the form is "amitriptyline 50 mg tablet". On the left side, there is a vertical menu with options: "Modify Order" (highlighted), "Brand Names", "Monographs", "Audit Trail", and "Reference". The main area contains several fields and controls:

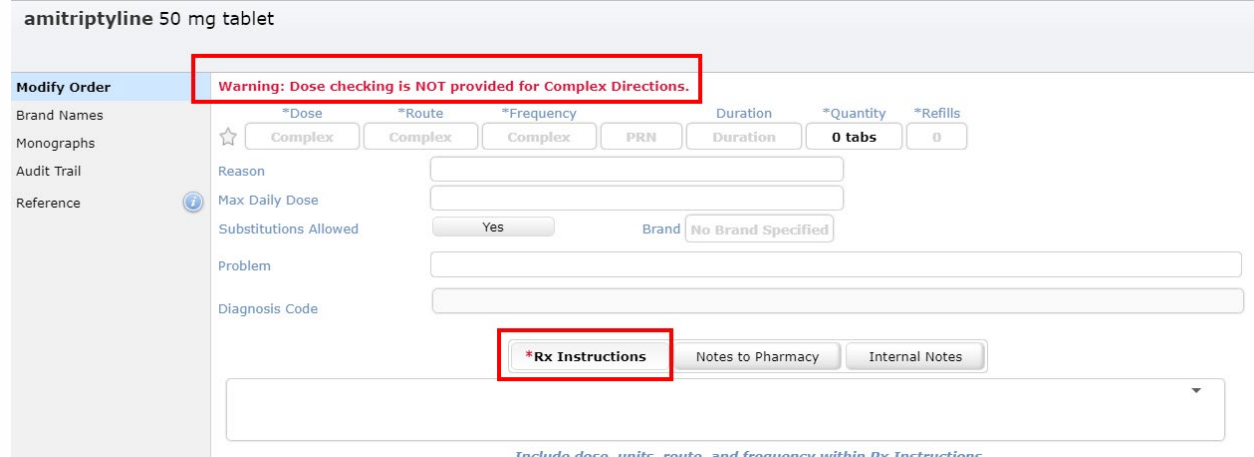
- *Dose:** 50 mg (1 tab)
- *Route:** PO
- *Frequency:** BEDTIME
- Duration:** Duration
- *Quantity:** 0 tabs
- *Refills:** 0
- Reason:** [Text input field]
- Max Daily Dose:** [Text input field]
- Substitutions Allowed:** Yes (button)
- Brand:** No Brand Specified (button)
- Problem:** [Text input field]
- Diagnosis Code:** [Text input field]
- Rx Instructions:** [Text input field]
- Notes to Pharmacy:** [Text input field]
- Internal Notes:** [Text input field]
- *Date Issued:** 27/08/2021 (calendar icon)
- Stop Date:** DD/MM/YYYY (calendar icon)
- Days Supply:** [Text input field] (calendar icon)
- Prior Authorization #:** [Text input field]
- Status:** Prior Authorization Status (button)
- Pharmacy:** [Text input field]

Discharge Medication Reconciliation/ Finalization and Prescriptions

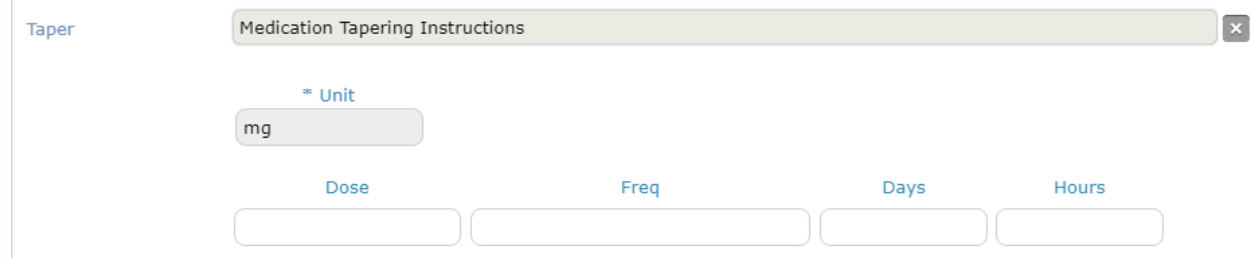
Complex prescription information can use the “Complex Directions” function.



Selecting Complex will require to put instructions in the “Rx Instructions” field.



The “See Taper” option allows to select a Taper Schedule.



Discharge Medication Reconciliation/ Finalization and Prescriptions

The "See Protocol" option allows to select a Protocol.

Protocol ✕

*Unit

*Condition *Dose/Route Instruction

Protocol Text

Placing Discharge Reconcile action of CONTINUE on a Home Medication

Select the button on the Home Medication side.

If the med was held on the admission reconciliation:

Home Medications Visit Medications

bisoprolol fumarate 10 mg Tablet Rx

10 mg PO DAILY PRN

DURATION QTY DISP UNIT 0 Ref

Rx Icon is lowlit meaning a prescription will not be issued

Quantity and Refil fields are not mandatory as no prescription is issued

If the med was continued on the admission reconciliation:

Search For Taper

amitriptyline 50 mg Tablet Rx amitriptyline [Elavil]

50 mg PO BEDTIME PRN


DURATION QTY DISP UNIT 0 Ref

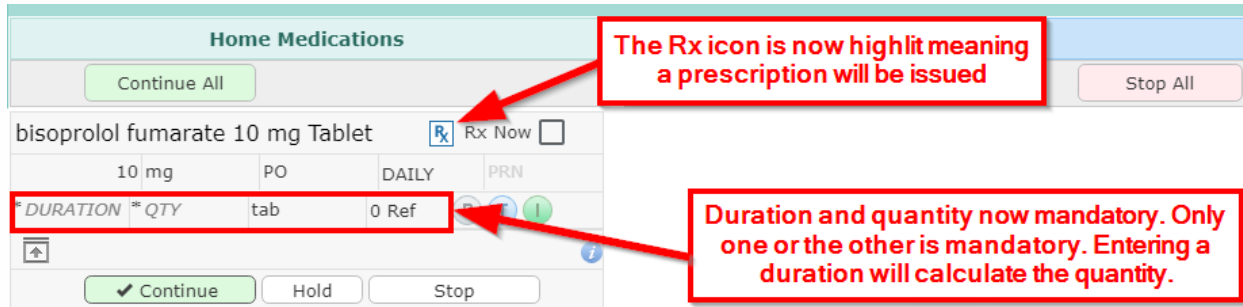
Last Taken:

Link indicating the home med was continued

Visit med stops automatically

Discharge Medication Reconciliation/ Finalization and Prescriptions

If a prescription needs to be dispensed, select the  icon on the Home Medication side



The Rx icon is now highlighted meaning a prescription will be issued

Duration and quantity now mandatory. Only one or the other is mandatory. Entering a duration will calculate the quantity.

This Will:

- NOT automatically generate a prescription
- Included it on the Home Medication List under the heading "Continue Medications"
- Keep the medication in the home meds for following visits

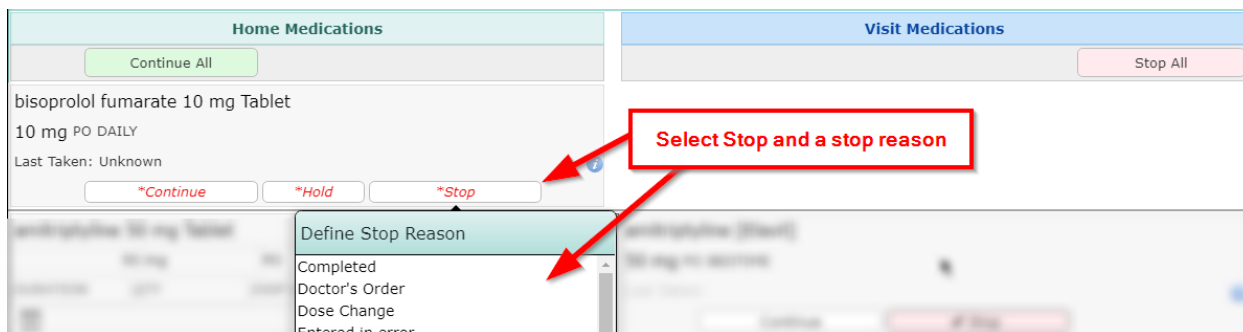
If a prescription is issued:

- **For Admitted patients:** It will automatically generate a prescription once the reconciliation is completed and finalized
- **For Outpatients and ED:** It will automatically generate a prescription once you save your orders.

NOTE: When a home medication is continued, the corresponding visit medication will be stopped automatically to prevent unintentional duplications.

Placing Discharge Reconcile action of STOP on a Home Medication

Select the  button on the Home Medication side.



Select Stop and a stop reason



This Will:

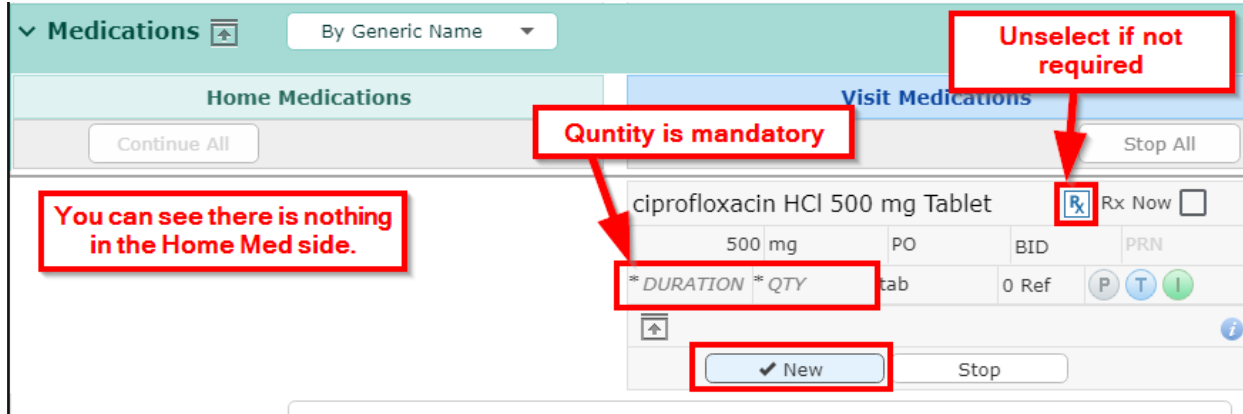
- Included it on the Home Medication List under the heading "Stop Medications"
- Remove the medication from the home meds for following visits

Discharge Medication Reconciliation/ Finalization and Prescriptions

Placing Discharge Reconcile action of CONTINUE on a Visit Medication

Select the button on the Visit Medication side.

Since this is a new medication for the patient, the  icon is highlighted automatically and quantity is mandatory. If you do not wish to dispense a prescription (ex.: patient has sufficient stock at home) the  icon can be clicked and it will become lowlit.



Unselect if not required

Quantity is mandatory

You can see there is nothing in the Home Med side.

This Will:

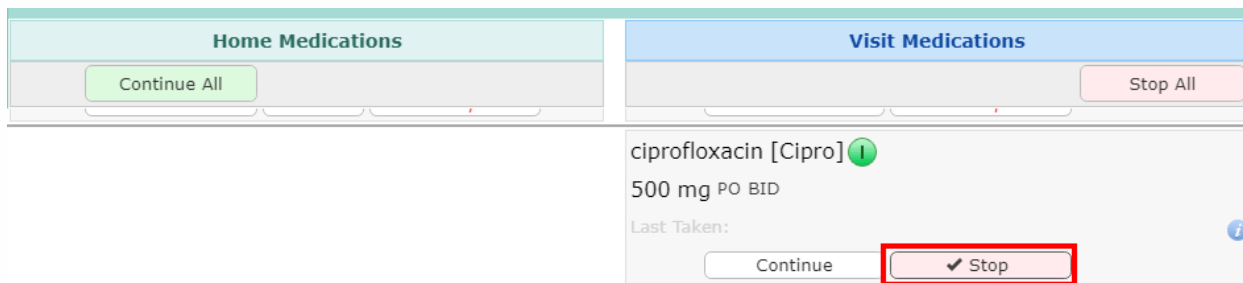
- Included it on the Home Medication List under the heading “New Medications”
- Add the medication in the home meds for following visits

If a prescription is issued:

- **For Admitted patients:** It will automatically generate a prescription once the reconciliation is completed and finalized
- **For Outpatients and ED:** It will automatically generate a prescription once you save your orders.

Placing Discharge Reconcile action of STOP on a Visit Medication

Select the button on the Visit Medication side.



Continue All

Stop All

ciprofloxacin [Cipro]

500 mg PO BID

Last Taken:

Continue

This Will:

- NOT appear in the home meds for following visits
- NOT appear on the patient’s Home Medication List
- NOT generate a prescription

Discharge Medication Reconciliation/ Finalization and Prescriptions

CHANGING a Home Medication by editing the Home Med

Select the button on the Home Medication side and edit the required parameter (ex.: Dose, Unit, Route, Frequency, PRN).

The image displays two screenshots of a medication management interface. The top screenshot shows a medication entry for bisoprolol fumarate 10 mg Tablet. The '10 mg' field is highlighted, and a red box with an arrow points to it with the text "Click on the parameter needing changes." The bottom screenshot shows the same medication entry but with the '10 mg' field changed to '5 mg' and highlighted in yellow. A red box with an arrow points to the '5 mg' field with the text "Once the new value is entered, the field that was changed will become yellow and the 'Continue' switches to 'Change'". The 'Continue' button is now 'Change'.

This Will:

- Included it on the Home Medication List under the heading "Changed Medications"
- Update the home meds updating the new dosage for following visits

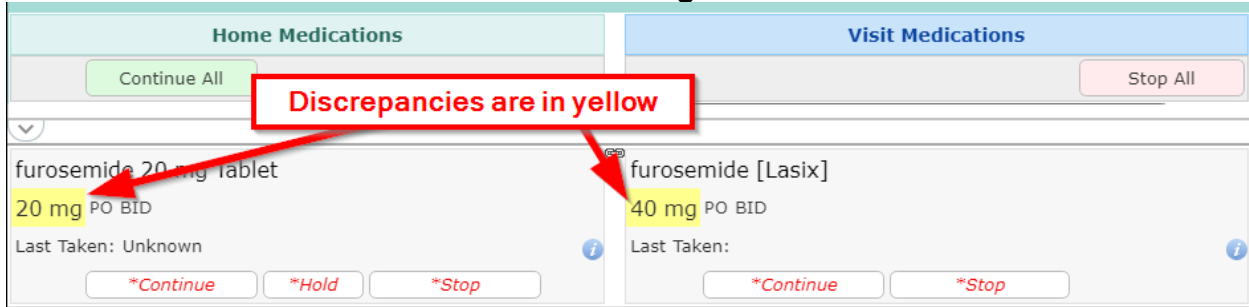
If a prescription is issued:

- **For Admitted patients:** It will automatically generate a prescription once the reconciliation is completed and finalized
- **For Outpatients and ED:** It will automatically generate a prescription once you save your orders.

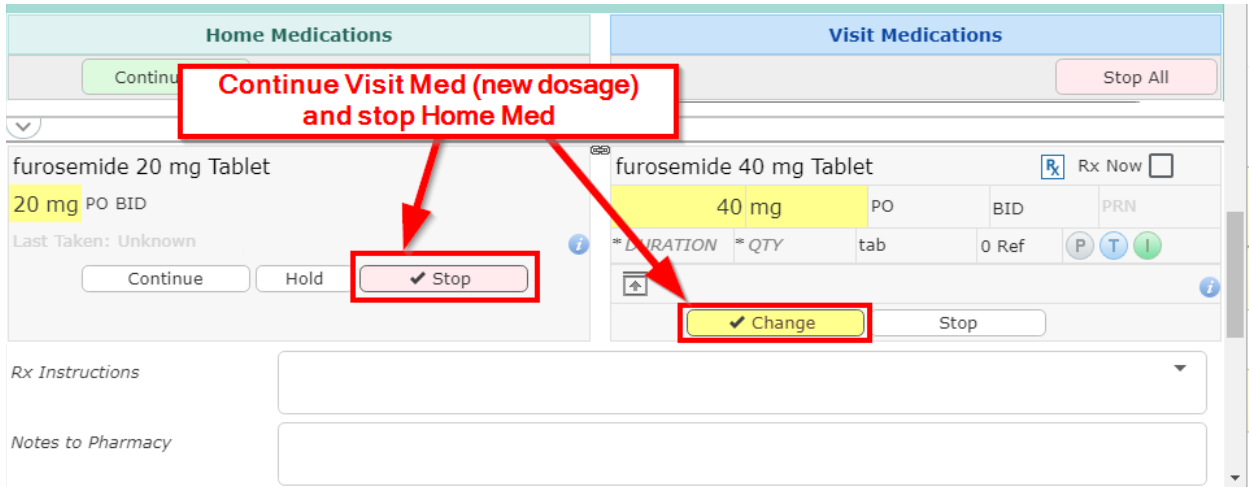
Discharge Medication Reconciliation/ Finalization and Prescriptions

CHANGING a Home Medication by continuing a visit med that is different

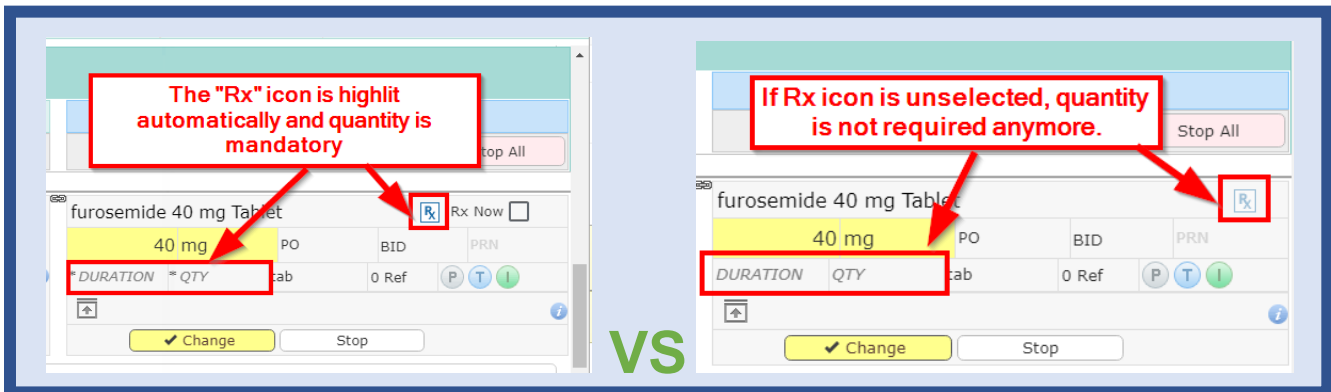
*** NOTE:** You would be able to tell that the visit med has been edited to a dose different of the home med because the changes would be in Yellow



Select the Continue button on the Visit Medication side **AND** Stop button on the Home Medication side.



Since this is technically a new medication for the patient, the Rx icon is highlight automatically and quantity is mandatory. If you do not wish to dispense a prescription (ex.: patient has sufficient stock at home) the Rx icon can be clicked and it will become lowlit.



Discharge Medication Reconciliation/ Finalization and Prescriptions

This Will:

- The old medication will be under the “Discontinued” section of the Home Medication List, and the visit medication will be under the “New” section
- Update the home meds updating the new dosage for following visits

If a prescription is issued:

- **For Admitted patients:** It will automatically generate a prescription once the reconciliation is completed and finalized
- **For Outpatients and ED:** It will automatically generate a prescription once you save your orders.

HOLDING a Home Medication

Select the button on the Home Medication side. A window will appear. Specify either a resume date, hold instructions, or both.

This Will:

- Included it on the Home Medication List under the heading “Held Medications”
- Keep the medication on the home meds for following visits
- Display the Hold Instructions on any following visit
- NOT generate a prescription

Discharge Medication Reconciliation/ Finalization and Prescriptions

Prescribing a **NEW** medication

To prescribe new medications that were not otherwise addressed in the home or visit medication sections, select the “Add New” tab.

The screenshot shows the 'Discharge Orders' interface. At the top, there are buttons for 'FINALIZE' and 'SUBMIT' with a '0' next to it. Below this, there are tabs for 'PRESCRIPTIONS' and 'DISCHARGE ORDER'. Under 'PRESCRIPTIONS', there are sub-tabs for 'Reconcile', 'Add New', and 'Preview'. A red box highlights the 'Add New' tab, with an arrow pointing to it from a text box that says 'Select "Add New" and start typing medication name'. Below the tabs, there is a search bar with 'Dival' entered. A dropdown menu shows search results: 'Search "Dival" in Medications' and 'divalproex sodium in Medications'. A red box highlights the search bar and the dropdown menu.

Select the required dosage/strength

The screenshot shows the medication selection interface for 'divalproex sodium 250 mg tablet'. The search bar contains 'divalproex sodium' and the dropdown is set to 'Preferred'. The results list includes: 'divalproex sodium 125 mg tablet', 'divalproex sodium 250 mg tablet' (expanded), 'divalproex sodium 500 mg tablet', 'Epival 125 mg tablet (divalproex sodium)', 'Epival 250 mg tablet (divalproex sodium)', and 'Epival 500 mg tablet (divalproex sodium)'. The expanded 'divalproex sodium 250 mg tablet' section shows a table with columns for Dose, Route, Frequency, Duration, Quantity, and Refills. The row '250 mg (1 tab) PO TID #0 ORF ☆' is highlighted with a red box, and a mouse cursor is pointing at the 'TID' frequency.

Dose	Route	Frequency	Duration	Quantity	Refills
250 mg (1 tab)	PO	BID	Duration	#0	ORF ☆
250 mg (1 tab)	PO	TID	Duration	#0	ORF ☆
250 mg (1 tab)	PO	TID	Duration	#0	ORF ☆

Enter details, then “Queue” to return to lookup or “Queue & Exit” to sign and save.

The screenshot shows the medication order details interface for 'divalproex sodium 250 mg tablet'. The interface includes buttons for 'Exit', 'Queue', and 'Queue & Exit'. The 'Modify Order' section shows the following details: Dose: 250 mg (1 tab), Route: PO, Frequency: TID, PRN: (empty), Duration: Duration, Quantity: 30 tabs, Refills: 0. Below this, there are fields for Reason, Max Daily Dose, Substitutions Allowed (Yes/No), Brand (No Brand Specified), Problem, and Diagnosis Code. There are also buttons for 'Rx Instructions', 'Notes to Pharmacy', and 'Internal Notes'. At the bottom, there are fields for Issue (Rx Only), Date Issued (30/08/2021), Stop Date (DD/MM/YYYY), Days Supply (10), Prior Authorization #, Status (Prior Authorization Status), and Pharmacy.

Discharge Medication Reconciliation/ Finalization and Prescriptions

This Will:


- Included it on the Home Medication List under the heading “New Medications”
- Add the medication in the home meds for following visits

If a prescription is issued:

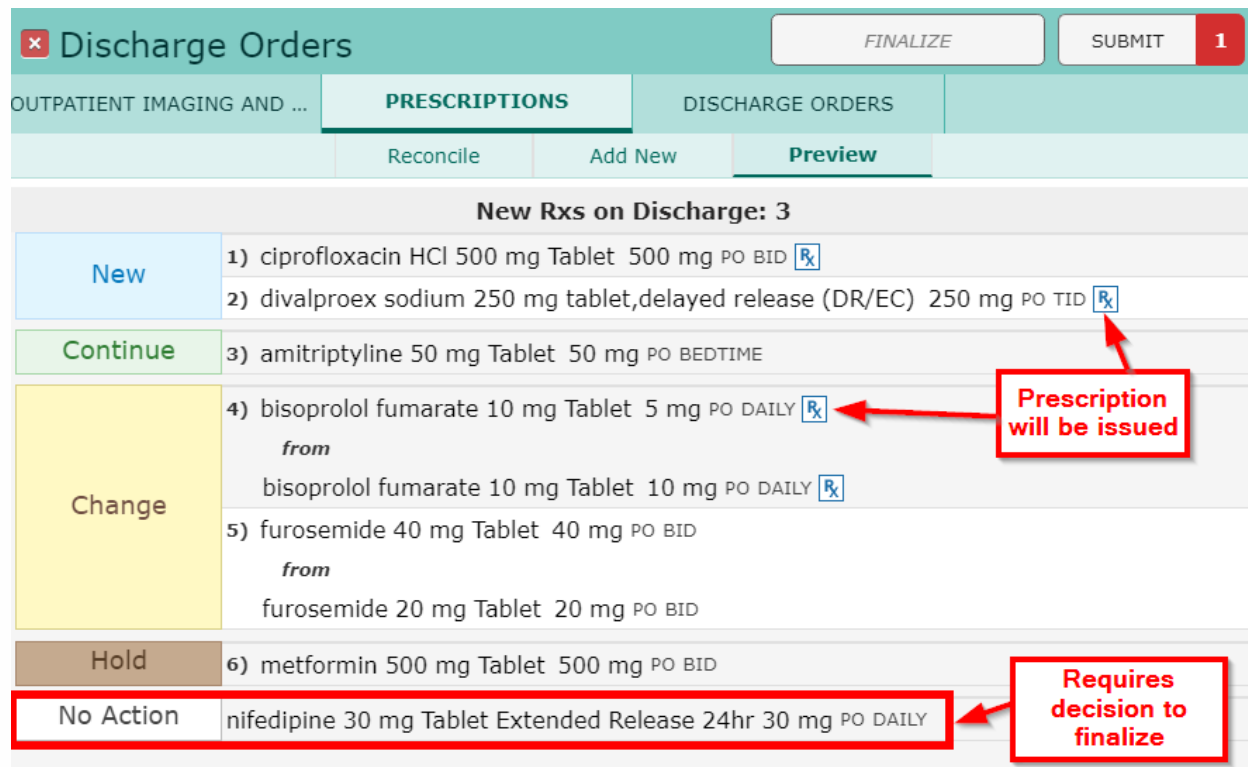
- **For Admitted patients:** It will automatically generate a prescription once the reconciliation is completed and finalized
- **For Outpatients and ED:** It will automatically generate a prescription once you save your orders.

Medication Reconciliation Preview

To assist in the reconciliation process, the preview tab provides a quick overview of each medication decision. Medications are categorized based on the reconciliation decisions.

The  symbol indicates medications for which a prescription will be provided on discharge. Providers can review their medication reconciliation using the preview tab at any time.

NOTE: For Admitted inpatients, all medications must be addressed prior to submitting/finalizing the discharge medication reconciliation. Medications decisions that remain outstanding will appear under the No Action heading.







Discharge Orders [FINALIZE] [SUBMIT 1]

OUTPATIENT IMAGING AND ... [PRESCRIPTIONS] [DISCHARGE ORDERS]

[Reconcile] [Add New] [Preview]


New Rxs on Discharge: 3

Category	Medication Decision
New	1) ciprofloxacin HCl 500 mg Tablet 500 mg PO BID 
	2) divalproex sodium 250 mg tablet, delayed release (DR/EC) 250 mg PO TID 
Continue	3) amitriptyline 50 mg Tablet 50 mg PO BEDTIME
Change	4) bisoprolol fumarate 10 mg Tablet 5 mg PO DAILY  Prescription will be issued
	from bisoprolol fumarate 10 mg Tablet 10 mg PO DAILY 
	5) furosemide 40 mg Tablet 40 mg PO BID from furosemide 20 mg Tablet 20 mg PO BID
Hold	6) metformin 500 mg Tablet 500 mg PO BID
No Action	nifedipine 30 mg Tablet Extended Release 24hr 30 mg PO DAILY Requires decision to finalize


















Discharge Medication Reconciliation/ Finalization and Prescriptions

Submitting the orders

When ready to submit orders, select the **Save** button and enter PIN.

The home icon  indicates where a medication has been added or removed from the patient's home medications.

NOTE: Two orders will appear for previously prescribed home medications. Orders include both the home medication and corresponding visit medication (*ie. home medication continued and visit medication stopped*).

Order Summary				SAVE	10
OUTPATIENT IMAGING AND CARDIO RESPIRAT...	PRESCRIPTIONS	DISCHARGE ORDERS	Enter PIN		
 Not Included in Conflicts					
ORDERS	DATE	STATUS	ALL		
acetylsalicylic acid [Aspirin (acetylsalicylic acid)] 81 mg Tablet,Delayed Release (Dr/Ec) 81 mg PO DAILY	30/08/2021	Stop at Discharge			
acetylsalicylic acid [Aspirin (acetylsalicylic acid)] 81 mg Tablet,Delayed Release (Dr/Ec) 81 mg PO DAILY	16/08/2021	Continue 			
bethanechol chloride [Duvold] 10 mg Tablet 10 mg PO TID PRN	30/08/2021	New 			
bethanechol chloride [Duvold] 10 mg tablet 10 mg PO TID PRN NS 	18/06/2021 13:24 30/08/2021 11:59	Stop 			
bisoprolol fumarate 5 mg Tablet 5 mg PO DAILY	30/08/2021	Stop at Discharge			
dextran 40 10 % in 5% dextrose 10 % parenteral solution 500 ml IV DAILY	16/08/2021	Continue 			
 Dextrose 40% Gel [Insta-Glucose] 123 mg aero powdr breath act w/sensor 1 g BUCCAL ONCE PRN NS	16/08/2021	Hold 			
diphenhydramine-DM-acetamin [Tylenol Cold,Cough,Fever Nite] 6.25-5-160 mg/5 mL suspension 30 ml PO DAILY PRN	25/06/2021 13:54 30/08/2021 11:58	Stop 			

Order submission will return the provider to the **Discharge Plan** view. A summary of all prescription decisions will be displayed for the provider to review.

Prescriptions					
ciprofloxacin HCl	500 mg	PO	BID		New
divalproex sodium	250 mg	PO	TID		
furosemide	40 mg	PO	BID		Continued
amitriptyline	50 mg	PO	BEDTIME		Changed
bisoprolol fumarate	5 mg	PO	DAILY		Held
metformin	500 mg	PO	BID		Discontinued
Hold Instructions: Resume on 03/09/2021. Resume this medication once your blood sugar is above 9.					
bisoprolol fumarate [Monacor]	10 mg	PO	DAILY		
furosemide	20 mg	PO	BID		
nifedipine	30 mg	PO	DAILY		

Discharge Medication Reconciliation/ Finalization and Prescriptions

Finalizing the Discharge Medication Reconciliation

At the conclusion of the reconciliation process, the provider must finalize their discharge medication decisions (required in inpatient settings only). This action confirms that all medications have been addressed and/or prescribed. Admitted patients cannot be discharged until the discharge medication reconciliation is completed.

The screenshot shows the 'Discharge Plan' interface. It includes a navigation bar with 'Return To' and 'Home' buttons, and a toolbar with 'Chart', 'Document', 'Orders', and 'Discharge' icons. The main content area displays patient information: Reason For Visit (DKA), Admit Date/Time (07/07/2021 11:42), and Admit Provider (Audet,Rico). Below this, there are three sections: 'Reconcile Problems' with the text 'No Problems to Reconcile', 'Outpatient Imaging and Cardio Respiratory Orders' with a link 'Click to Enter Outpatient Imaging and Cardio Respiratory', and '*Prescriptions (Required)' with a link 'Click to Enter Prescriptions'.

Once there is a Continue/ Stop decision on each medication, the **Finalize** button is available from within the discharge prescription routine.

The screenshot shows the 'Discharge Orders' interface. The top navigation bar includes 'Return To', 'Home', 'Chart', 'Document', 'Orders', 'Discharge', and 'Sign' buttons. The main header shows 'Discharge Orders' with a 'FINALIZE' button highlighted in a red box and a 'SUBMIT' button with a '0' indicator. Below the header, there are tabs for 'Reconcile', 'Add New', and 'Preview'. The 'Medications' section is expanded, showing a search filter 'By Generic Name' and two columns: 'Home Medications' and 'Visit Medications'. Under 'Home Medications', there is a 'Continue All' button and a medication entry for 'bisoprolol fumarate 10 mg Tablet' with a '5 mg' strength, 'PO' route, and 'DAILY' frequency. There are also 'Rx Now' and 'PRN' checkboxes.

OR from the discharge plan.

The screenshot shows the 'Discharge Plan' interface, similar to the first screenshot. It displays patient information: Reason For Visit (DKA), Admit Date/Time (07/07/2021 11:42), and Admit Provider (Audet,Rico). Below this, there are three sections: 'Reconcile Problems', 'Outpatient Imaging and Cardio Respiratory Orders', and 'Prescriptions'. The 'Prescriptions' section shows a medication entry for 'Hydromorphone' with a '3 mg' strength and 'PO' route. A red arrow points to a red 'Finalize' button located below the medication entry.

Discharge Medication Reconciliation/ Finalization and Prescriptions

Printing and Reprinting the Discharge Prescription

For Inpatient settings, once the Finalization has occurred, you will be presented with a window to print your prescriptions.

In Outpatient/ED settings, you will be presented with the printing window every time you enter a new prescription.

Transmit/Print
Sur,Rvh1 36 M 01/01/1985 Allergy/Adv: Not Recorded

Transmit Print Preview All Print Home Med List Select Pharmacy **Print Destinations**

Rx	Rx/Order	Details	Pt. Mono.	Sample Label	Medications	Category	Pharmacy
<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	30/08/2021 > bisoprolol fumarate 10 mg tablet 5 mg (1/2 x 10 mg) PO DAILY 10 tabs ORF	Rx	
<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	30/08/2021 > ciprofloxacin 500 mg tablet 500 mg PO BID 10 tabs ORF	Rx	
<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	30/08/2021 > divalproex sodium 250 mg tablet 250 mg PO TID 30 tabs ORF	Rx	

Printing will default to patient's location, but printing destination can be reviewed/edited here.

The discharge prescription must be signed before the patient can bring the prescription to their pharmacy of choice upon discharge. Any additional sections of the discharge packet will be printed by nursing and/or unit staff prior to the patient's departure as required.

IMPORTANT: If edits were made or prescriptions were added, the prescription report might need to be re printed, resigned, and the old one get discarded.

To reprint the prescriptions, select the printer icon from the discharge plan, select print section, and then choose the prescription report.

Cancel Save Save & Close

Last Printed
28/07/2021 17:44 Heather Cook

Print Packet
 Print Section
 Transmit/Print

Discharge Reports Cancel Print

Reports Last Printed Date/Time

Instructions

Stand Alone Forms

Visit Report 28/07/2021 17:44

Customer Designed Reports

Discharge Bloodbank Transfusion Letter

Home Medications Report

Prescriptions

Discharge Medication Reconciliation/ Finalization and Prescriptions

Example of the Prescription Report that the patient needs to bring to pharmacy

Discharge Prescriptions Page: 1 of 1
Date: 30/08/2021 14:13

Discharge Prescriptions

This is a list of your prescriptions to bring to your pharmacy.

Royal Victoria Regional Health 201 Georgian Dr
Barrie
ON L4M 6M2

Preferred Pharmacy

Phone **Address**

Fax

Sur, Rvh1 **DOB:** 01/01/1985

HCN: **Med Record #:** V000001324 **Acct #:** VA0000713/21

Patient Address: 123 Main St, Barrie, L4M 6M2, ON **Total Number of prescriptions.**

Allergies: No Known Allergies

Prescribed Medications (3)

This is not a complete medication list. Please refer to the "Home Medication List" for a complete list.

- 1. ciprofloxacin HCl 500 mg Tablet**
500 mg oral twice daily
Dispense # 10 tab
No Refills
- 2. divalproex sodium 250 mg Tablet, Delayed Release (Dr/Ec)**
250 mg Oral three times daily
Dispense # 30 tab
No Refills
- 3. bisoprolol fumarate 10 mg Tablet**
5 mg oral daily
Dispense # 10 tab
No Refills

This is the end of this prescription report **The name and CPSO number of the person PRINTING the report will appear here**

Prescriber Signature:

Prescriber Name: _____ **Date:** 30/08/2021

College ID Number: _____

(Each prescription page must be individually signed)

- 2. Humalog U-100 Insulin (insulin lispro) 100 unit/mL Cartridge**
0 unit three times daily
Dispense # 1 cartridge
No Refills
This medication cannot be substituted **If "No Substitution" is selected**

Protocol: Protocol For Medication Instructions

Condition	Dose/Route	Instruction
If Blood glucose higher than 5	4 units	Call your Dr. If lower than 4
If Blood glucose is between 4 and 10	8 units	

Protocol Text: Here is an example of text added to a protocol to give additional instructions.

The information included in the various fields will appear both on the prescription and the Home Medications List. **Example of output if a protocol is used**

- 3. prednisone 5 mg Tablet**
See Tapering Schedule for Dosing Instructions
Dispense # 30 tab
No Refills **Information added to the Notes to Pharmacy and Rx Instructions**

Notes to Pharmacy: *And the information entered in the 'Notes to Pharmacy' field would appear here.*


Prescription Instructions: *Information entered in the 'Rx Instructions' field will appear here.*

Tapering Schedule:

5 mg daily for 3 Days	Display of Taper Schedule is used
2.5 mg daily for 5 Days	
1.25 mg daily for 10 Days	

Discharge Medication Reconciliation/ Finalization and Prescriptions

Example of the Home Medication Report provided to the patient on discharge

*** NOT A PRESCRIPTION ***		Page: 1 of 2 Date: 30/08/2021 14:11
Home Medication List		
Royal Victoria Regional Health		201 Georgian Dr Barrie ON L4M 6M2
<p>Please review the sections of this list carefully, and if you have any questions regarding your medications or medical equipment/supplies, contact your primary care physician.</p>		
Patient: Sur,Rvh1 Patient Address: 123 Main St, Barrie, L4M 6M2, ON Allergies: <u>No Known Allergies</u>		DOB: 01/01/1985
New Medications (3) These are new medications to start taking at home.		
1. furosemide 40 mg Tablet		
40 mg oral twice daily Dispense # 0 tab No Refills		
2. ciprofloxacin HCl 500 mg Tablet		
500 mg oral twice daily Dispense # 10 tab No Refills		R_x
3. divalproex sodium 250 mg Tablet,Delayed Release (Dr/Ec)		
250 mg Oral three times daily Dispense # 30 tab No Refills		R_x
Continue Medications (1) These are your current medications to keep taking at home.		
4. amitriptyline 50 mg Tablet		
50 mg oral at bedtime Dispense at bedtime for Days No Refills		
Hold Medications (1) Hold the following medications and resume only as directed below.		
6. metformin 500 mg Tablet		
500 mg oral twice daily Dispense twice daily for Days No Refills		
<p>Hold Reason Resume on 03/09/2021.Resume this medication once your blood sugar is above 9. Resume on 03/09/2021.Resume this medication once your blood sugar is above 9.</p>		
Discontinued Medications (3) These are medications to stop taking at home.		
** furosemide 20 mg Tablet		
20 mg oral twice daily Dispense twice daily for Days No Refills		
Discontinue reason DC DC		

Dose Change

Last updated: September 28, 2021 18

