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Documenting and modifying home medications

## Medication Management

Quick reference guide

1. From the menu bar click on the Orders tab.

Orders ➕ Add

2. Next click on the Document Medication by Hx located at the top of the orders page.

➕ Add | 🔖 Document Medication by Hx | Reconciliation ▾ | 🔍 Check Interactions
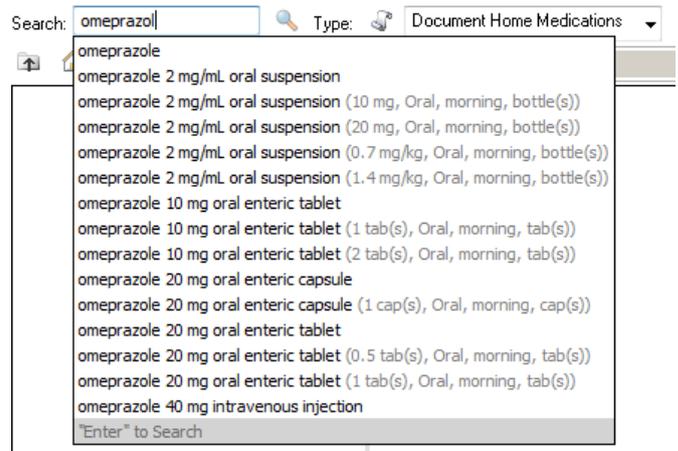
3. If the patient does not take any medications at home, you can select the No Known Home Medications tick box at the top of the screen.

Medication History
☐ No Known Home Medications ☐ Unable To Obtain Information ☐ Use Last Compliance
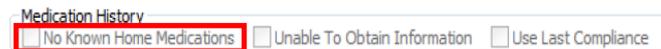
4. A new home medication can be documented by clicking the Add button located in the top left corner.

➕ Add

5. In the search field at the top of the window begin to type the medication required, and select the most suitable Order Sentence.

Search: omeprazol 🔍 Type: 🔖 Document Home Medications ▾

omeprazole
omeprazole 2 mg/mL oral suspension
omeprazole 2 mg/mL oral suspension (10 mg, Oral, morning, bottle(s))
omeprazole 2 mg/mL oral suspension (20 mg, Oral, morning, bottle(s))
omeprazole 2 mg/mL oral suspension (0.7 mg/kg, Oral, morning, bottle(s))
omeprazole 2 mg/mL oral suspension (1.4 mg/kg, Oral, morning, bottle(s))
omeprazole 10 mg oral enteric tablet
omeprazole 10 mg oral enteric tablet (1 tab(s), Oral, morning, tab(s))
omeprazole 10 mg oral enteric tablet (2 tab(s), Oral, morning, tab(s))
omeprazole 20 mg oral enteric capsule
omeprazole 20 mg oral enteric capsule (1 cap(s), Oral, morning, cap(s))
omeprazole 20 mg oral enteric tablet
omeprazole 20 mg oral enteric tablet (0.5 tab(s), Oral, morning, tab(s))
omeprazole 20 mg oral enteric tablet (1 tab(s), Oral, morning, tab(s))
omeprazole 40 mg intravenous injection
"Enter" to Search

Note: The order sentences are filtered by age. Sometimes you may need to untick the filtered order sentence box to find the order sentence required.

If no order sentence suits, select the most appropriate order sentence and manually edit the information at a later stage.

More medication search results can be seen by pressing enter when searching.

Note: If the medication you wish to document cannot be found, (e.g herbal remedies such as St John's Wort), you can add an "Unlisted medication" by searching for "unlisted".

Note: If the medication strength is unknown and further investigation is required, utilise the generic name option e.g. omeprazole.

6. After selecting the chosen medication click Done located in the bottom right hand corner.

Done

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7. A window will appear with prefilled information based on the order sentence selected. Make any required changes under the Details tab.
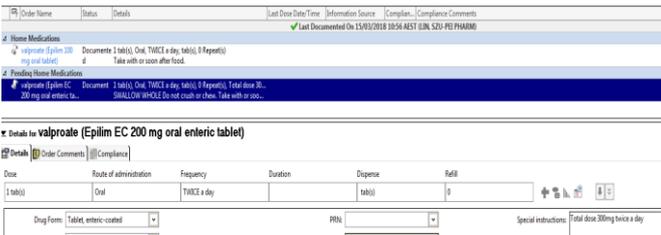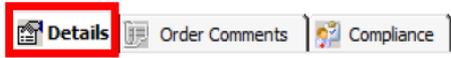
8. The Indication field is available to be completed at this point. The indication field is not mandatory. If the home medication is to be converted to an inpatient medication order, the Indication information will transfer across (if documented in home medications).

9. Additional information related to the order can be documented under Special Instructions in the Details tab. If the home medication is to be converted to an inpatient medication order, this information will form part of the order sentence under Special instructions and appear on the MAR.


Special instructions: Crush and dispese in 10mls of water

10. Comments can be entered by selecting the Order comments tab. This allows for any free text that cannot fit in the Details section (Special instructions field). If the home medication is to be converted to an inpatient medication order, this information will also appear on the MAR but will appear under the Comments section of the order.

11. Document relevant compliance information under the Compliance tab.

Note: If the patient takes multiple strengths of a medication, ensure each strength is documented and specify in the Special Instructions the Total Dose. (This is different to inpatient prescribing where only one order should be placed.)

If the dose of the medication varies pending drug levels, the dose should be entered as "variable dose" and the last recommended dose, date, and drug level recorded is documented under Special Instructions.
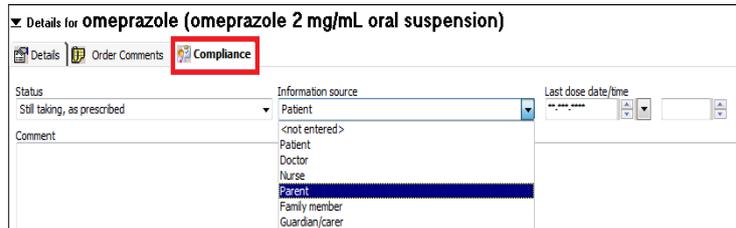
12. There is a tick box option at the bottom right of the screen entitled Leave Medication History Incomplete – Finish Later. Medical Officers must leave this box ticked. Pharmacists will untick to complete this after verifying the patient's medication history.

13. To save the home medication list, click Document History button located at the bottom right of the window.

Note: If the "Leave Medication History Incomplete – Finish Later" tick box is accidentally un-ticked (eg. By a medical officer), the reconciliation status can be reset.

14. To reset the Reconciliation Status, right click on the hyperlink and select Reset.


Modifying home medications

1. Any existing home medications or previous prescriptions will be displayed in the Document Medication by Hx Window.
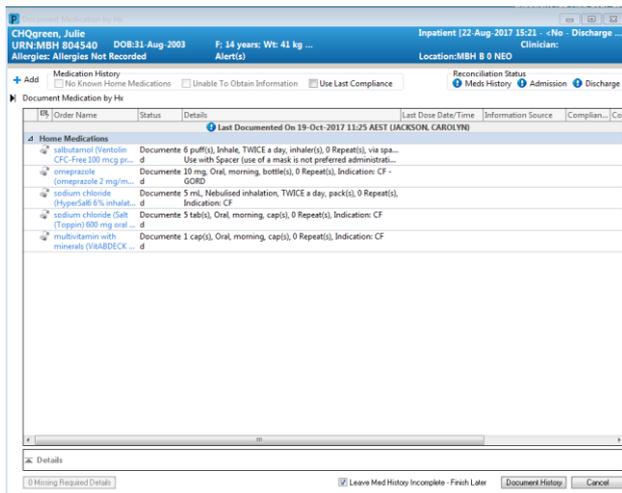
Note: Home medications can be identified by the scroll icon and prescriptions by the pill bottle icon .

It is very important not to modify prescriptions as this will change the medical records copy of the original prescription.

2. If the medication dose that the patient is taking is different to the written prescription, you should right click on the order and select Complete. A new home medication should be added to reflect the patient's current dose.

3. To remove a home medication that has been ceased prior to hospital admission, right-click on the order and select Cancel/Discontinue.

4. If the medication was a course of treatment (i.e. Antibitoics) you should right click on the order and select Complete, indicating the course was completed prior to admission.

5. If a Medication was withheld **prior** to admission you would right click and Select Susepend.

6. To modify an existing home medication, right click on the order and select Modify.
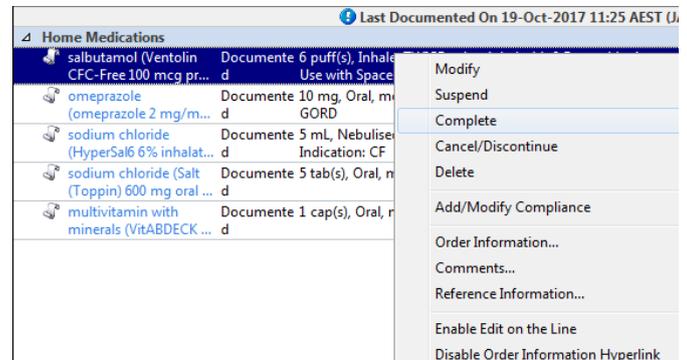
7. Update the relevant details in the order entry field.
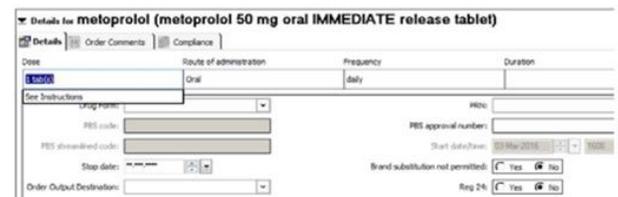
8. The Delete function should only be used for incorrect entry (i.e. wrong patient, wrong medication).

9. For patients who may have been transferred from another hospital, the medication history should be entered as per their medications **prior** to admission to the first hospital (so that on discharge, the correct information about which home medications to stop taking, etc is communicated to the patient).

10. In order to communicate information about medications changes at the original hospital, use the Compliance tab and select Not taking or Still taking not as prescribed with an explanation stating the changes at the last hospital.