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| Policy Name:<br><br><p style="text-align: center;"><b>MEDICATION REVIEW FOR RESIDENTS</b></p>  | Policy Number:<br><br><p style="text-align: center;"><b>0180</b></p>   |
| Approved By:<br><p style="text-align: center;">Executive Team</p>  | Effective Date:<br><br><p style="text-align: center;"><b>APRIL 1, 2009</b></p>   |
| Reason for Revision: <span style="float: right;"><i>Click on item below and select item from list.</i></span><br><br><p style="text-align: center;"><b>CONTENT- Enter BELOW Reason for change Ex: Combined Policy ## and ##.</b></p> <p style="text-align: center;">Removed policy portion and kept policy elements.</p> | Date Revised:<br><br><p style="text-align: center;"><b>October 12, 2021</b></p><br><br>Next Date for Review:<br><br><p style="text-align: center;"><b>October 12, 2024</b></p> |
| Section:<br><p style="text-align: center;">Section 01 - Delivery of Care to Residents and Families</p>   | Page No:<br><br><p style="text-align: center;"><b>Page 1 of 2</b></p>  |

## APPLICABILITY

Physician, Registered Nurse (RN), Pharmacist, Student Nurse under direct supervision of the RN

## POLICY ELEMENTS

1. Medication reviews will be completed at each Interdisciplinary Team (IDT) Rounds.
2. The Pharmacist will initiate an additional medication review every 3 months.
3. Medications will be reviewed by the attending physician and Registered Nurse (RN) during the following times:
  - a) On admission/readmission;
  - b) A change in symptoms;
  - c) Inability to swallow;
  - d) Patient declining to take some or all medications.

## REFERENCES

Alberta Health. (2016). Continuing Care Health Service Standards Information Guide. January 2016.

## Procedure

1. At each IDT rounds, the Medication Administration Record (MAR) or medication list printed out by the pharmacist is reviewed by either a clinical pharmacist or a physician in attendance.
2. Each resident is reviewed during IDT rounds with their medication profile reviewed for the:
  - appropriateness of the medications being dispensed;



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- potential that one or more of the medications could be contributing to the resident's symptoms;
  - number of medications being given & the burden this number of medications may be causing;
  - need to consider an alternate medication to help with symptom control.
3. This review is shared with the IDT during rounds, and if the attending physician is not present, the recommendations are communicated to them by the nursing lead or designate who attended IDT rounds, or by the physician providing advice.
  4. Once the medication list has been reviewed at IDT rounds, it is signed by the attending physician, faxed back to Marshalls, and a copy remains on the health record.
  5. The Pharmacist will initiate a medication review every three months. They will:
    - a) Print and send a copy of the medication list to Agapè Hospice;
    - b) The Attending Physician will review, make any changes necessary and sign the medication list;
    - c) The original medication list will stay on the residents health record;
    - d) A signed copy will be faxed back to pharmacy.