

Effect of a pharmacist intervention on clinically important medication errors after hospital discharge: a randomized trial.

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Kripalani S, Roumie CL, Dalal A, et al. Effect of a pharmacist intervention on clinically important medication errors after hospital discharge: a randomized trial. *Ann Intern Med.* 2012;157(1):1-10. doi:10.7326/0003-4819-157-1-201207030-00003.

<https://psnet.ahrq.gov/issue/effect-pharmacist-intervention-clinically-important-medication-errors-after-hospital>

Hospital discharge remains a particularly [vulnerable time](#) for adverse drug events, despite the use of [medication reconciliation](#) and other strategies to prevent medication errors at discharge. Previously, [pharmacist involvement](#) has also been shown to be beneficial in reducing [medication errors](#), and even led to decreased readmissions in at least [one study](#). However, in this randomized, controlled trial, approximately 50% of adult patients who received a robust pharmacist-driven intervention still experienced a clinically important medication error within one month following discharge for an episode of acute coronary syndrome or acute decompensated heart failure. The four-component intervention included pharmacist-assisted medication reconciliation, inpatient pharmacist counseling, low-literacy adherence aids, and individualized telephone follow-up after discharge. A case of a preventable readmission due to a medication error is discussed in this AHRQ WebM&M [commentary](#).