

Improving medication safety with accurate preadmission medication lists and postdischarge education.

November 8, 2012

Gardella JE, Cardwell TB, Nnadi M. Improving medication safety with accurate preadmission medication lists and postdischarge education. *Jt Comm J Qual Patient Saf.* 2012;38(10):452-458.

<https://psnet.ahrq.gov/issue/improving-medication-safety-accurate-preadmission-medication-lists-and-postdischarge>

In this study, preadmission [medication reconciliation](#) accuracy was dramatically improved from a baseline of 16% up to 89% by the use of pharmacy technicians in the emergency department (ED). This likely was the major contributor to the reduction of observed inpatient [medication errors](#) from 13.2% down to 1.5% postintervention. The authors also describe a separate pharmacist-driven postdischarge educational effort for complex patients. Implementation of the Safe Med program significantly decreased 30- and 60-day readmissions and ED visits. These findings contribute to prior literature that suggest [pharmacist-led](#) interventions have the [most promise](#) for improving medication reconciliation and decreasing adverse drug events (although at least one [study](#) failed to show benefit). An AHRQ WebM&M [commentary](#) discusses a case of medication error leading to a preventable readmission.