**Medication Discrepancy Tool (MDT)**

To be completed by Home Health Clinicians at SOC/ROC

Information should be based on your assessment of the patient and the problems **AND** the patients perception of the discrepancies

<table>
<thead>
<tr>
<th>Medication</th>
<th>Causes and Contributing Factors</th>
<th>Resolution</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>List all that apply from list below</td>
<td>List all that apply from list below</td>
</tr>
<tr>
<td></td>
<td>(By Number)</td>
<td>(By Number)</td>
</tr>
</tbody>
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1. 
2. 
3. 
4. 
5. 

### Causes and Contributing Factors:

#### Discrepancies (Patient Level)
1. Adverse drug reaction or side effect
2. Intolerance
3. Did not fill prescription
4. Patient feels they do not need prescription
5. Money/financial barriers
6. Intentional non-adherence ("I was told to take this but I chose not to")
7. Non-intentional non-adherence (Knowledge deficit – "I don’t understand how to take this medication")
8. Performance deficit ("Maybe someone showed me, but I can’t demonstrate to you that I can")

#### Discrepancies (System Level)
9. Prescribed with known allergy/intolerance
10. Discharge instructions incomplete/ inaccurate/ illegible (includes use of "resume all meds" order)
11. Duplication (Taking multiple drugs with the same action without any rationale)
12. Incorrect label
13. Incorrect dosage
14. Incorrect quantity
15. Cognitive impairment not recognized
16. No caregiver/need for assistance not recognized
17. Sight/dexterity limitations not recognized

### Resolution:
1. Clinician contacted primary provider and clarified medication regimen
2. Discussed potential benefits and harm that may result from non-adherence
3. Provided resources and information to facilitate adherence
4. Addressed performance/knowledge deficit
5. Encouraged patient to call their doctor
6. Primary provider will address problem at next visit
7. Encouraged patient to schedule an appointment with primary provider or to discuss problem at next provider visit
8. Other (please explain) ______________________________________________________________

#### Other Questions:

Did the patient have a problem obtaining their medications when they went home?  □ YES □ NO

Have all new prescriptions been filled?  □ YES □ NO

How long was it before the patient was able to obtain new prescriptions?  ____ (Hours/Days)

Patient Name: ___________________________  SOC/ROC Date: __________

Name of facility where patient was discharged from: ___________________________  Date: __________

Name of Clinician completing MDT: ___________________________  Date: __________

Adapted from Medication Discrepancy Tool at [www.caretransitions.org](http://www.caretransitions.org). Revised May 7, 2008
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Rationale and Directions for Use of the Medication Discrepancy Tool

Rationale:

- The Medication Discrepancy Tool (MDT) is designed to facilitate reconciliation of medications across settings and prescribers.
- Medication discrepancies can occur when a patient is transitioning from one health care setting to the next, such as when they are discharged from an inpatient facility to home or when referred from the community to your home health agency.
- Your agency is using the MDT as part of a pilot study to identify problems that may occur during patient transitions.
- The Quality Improvement Team will be reviewing these tools and sharing them with their cross-setting team, that includes staff from your partnering hospital.
- The goal is to fill the information gap between healthcare settings and better understand what the patient (and the home health clinician) go through when they get home and reduce the risk of adverse drug events and improve the patients well being.
- Remember, your feedback is important during this process. If you identify that there are problems that aren’t listed on the tool, please bring them to the attention of your Quality Improvement Team for considerations when modifications that may be conducted in the future.

Directions:

- At the start of care/resumption of care (SOC/ROC) visit, during the assessment of medications, review the Discharge Summary, any other referral information and the medications that are present in the home, including non-prescription, over the counter medications (old and new).
- Any medication identified as a “discrepancy” should be listed in the first column entitled Medication.
- The most common Causes and Contributing Factors with patient medications are listed. Find the reason for the discrepancy that best describes the cause and put the corresponding number(s) in the second column entitled Causes and Contributing Factors.
- List all Causes and Contributing Factors that apply.
- The most common Resolutions are listed. Find the applicable Resolution taken and put the corresponding number(s) in the third column entitled Resolution.
- List all of the Resolutions that apply.
- Use additional MDT forms if necessary.

THANK YOU for doing your part to improve patient care transitions!

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