

Medication Safety Today



Issue 61

The Northern Ireland Medicines Governance Team Newsletter

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Check the date



NIECR has become an invaluable source of information, giving access to information about prescriptions issued by the patient's GP. However the information must be verified with another source. The patient may be taking medicines differently to the prescription issued and NIECR will not contain over the counter medicines or medicines prescribed by someone other than the GP.

NIECR will provide acute and repeat prescriptions for the last 6 months. There are a number of important dates to note when reviewing the NIECR record:

Date NIECR last received - NIECR will send a new update each time the GP record is updated. Check this date to ensure records are current.

ECR GP Medications form (Drugs & Allergies last received **22-Jan-2018**)

Patient Name	HCN	DOB	Sex
James BLACK	123654789	31-Dec-1957	M

GP Name	GP Practice Code	GP Practice	GP Phone
GETWELL DO	123	White Practice	(028)12345678

GP Allergies (This must be recorded – Please confirm with patient)		
Allergy Description	Date recorded	Comments
Penicillin	01-Jun-2001	Rash
OR		
No Known Drug Allergies: Confirmed / Not confirmed (Please delete as appropriate)		
Signature / Designation:		Date:

Please ensure ECR information is verified with a second source: patient / carer / PODS / other

Verified With	Drug	Formulation	Total to Dispense	Dosage Instructions	Medication Start Date	Prescription Date	cont.	hold	stop
	Atorvastatin	Tablets 40mg	28 tablets	TAKE ONE DAILY Dispense weekly	27-Jul-2012	22-Jan-2018			
	Priadel	Tablets 200mg	28 tablets	TAKE ONE DAILY Dispense weekly	14-Jun-2012	22-Jan-2018			

Medication start date – date the medicine was first prescribed.



Prescription date – date a prescription was last issued. Check this to help identify which medicines are being taken currently.

Please use alternative route

Alternate Route →

Patients who are unable to take oral medications are often at greater risk of missed doses. Patients can be 'Nil by mouth' (or NBM) for a number of reasons, such as being prepared for surgery or an investigative procedure, or they may have swallowing difficulties and are unable to take their medications orally.

The following should be observed in the event of the oral route of administration being unavailable or no longer suitable:

- Refer the patient to the speech and language therapist (SALT)
- Consult with the pharmacist or doctor to find an alternative route or formulation for the same medication, or an alternative medication



Drug Interaction



A clinically significant interaction between carbapenems (meropenem and ertapenem) and valproic acid/sodium valproate results in reduced valproate plasma concentrations with potential for inadequate seizure control. Advice for healthcare professionals:

- Concomitant use of carbapenems in patients taking valproic acid/sodium valproate is not recommended and prescribers should consider alternative antibacterial therapy

Click [Link](#) to access full article.

If you have any comments on this newsletter, please contact Sharon O'Donnell, Medicines Governance pharmacist on 02890638129 at BHSCT or by e-mail at sharon.odonnell@belfasttrust.hscni.net. Further copies of this newsletter can be viewed at www.medicinesgovernanceteam.hscni.net or on your Trust intranet.



Return to sender

When patients are discharged from hospital, they may not be returning to the location that they were admitted from. This is important for determining what arrangements need to be made for the supply of medicines.

Medication incidents have been reported where patients have been discharged to a new placement or to stay with relatives and only new or changed medicines have been dispensed on discharge. There have then been insufficient medicines to administer following discharge.



If a patient is being discharged to a different location from where they were admitted, highlight this to pharmacy staff when requesting a discharge prescription so that supplies of all medication are dispensed on discharge.

What's new?

New medicines in established therapeutic groups are being licensed all the time. It may take a while before they are recognisable as for example the latest NOAC/DOAC. Do you know the therapeutic class of the newly licensed medicines below?

Abasaglar®	Apixaban
Dabigatran	Edoxaban
Fiasp®	Prasugrel
Rivaroxaban	Ticagrelor
Toujeo®	Tresiba®
Xultophy®	

Answers below:

Answers

Abasaglar®	Insulin glargine
Apixaban	NOAC/DOAC
Edoxaban	NOAC/DOAC
Fiasp®	Insulin aspart
Prasugrel	Antiplatelet
Rivaroxaban	NOAC/DOAC
Ticagrelor	Antiplatelet
Toujeo®	Insulin glargine
Tresiba®	Insulin degludec
Xultophy®	Insulin degludec with liraglutide

Transcription prescription

Manual transcription of medication information is accepted as a process prone to human error and has led to patient harm as a result of incorrect prescription transcription.



Many hospital patients will require their Kardex to be rewritten at some point during their admission.

Medication errors have occurred where a medication which was being withheld has been re-started in error when transcribing to a new Kardex.

Safety tips:

When transcribing to a new Kardex always:

- ✔ Check not only the prescription details of each medication but also the administration section of the Kardex to confirm if doses are currently being held.
- ✔ Check the patient's clinical notes for any information that may relate to the current management of their medications.
- ✔ Avoid interruptions as these can lead to skill-based slips/lapses in the task itself.
- ✔ Know the patient and their condition. Ask yourself if the medications are appropriate for the patient.

Remember transcription is every bit as important as the initial prescription. The transcribed Kardex should reflect the instructions on the previous Kardex.



Look out



Dimeticone 4% (Hedrin) lotion and spray is used for head lice eradication. If prescribing, administering or dispensing this medicine, remind patients/carers that they must keep treated hair away from sources of ignition such as naked flames, candles and burning cigarettes. Serious harm to patients has occurred in Northern Ireland and elsewhere where treated hair has caught fire.

