MEDICATION RECONCILIATION

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HISTORY

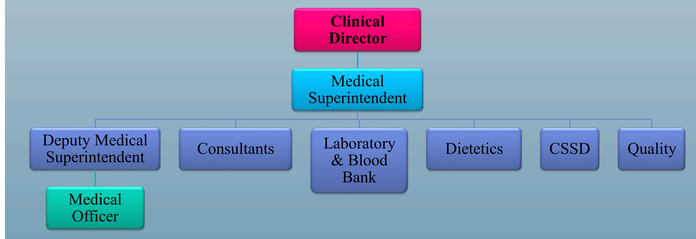
Dr. Devi Shetty founded Narayana Hrudalaya (NH) in the year 2000 with a 280-bed heart hospital in Bangalore. In 2012 NH, Jaipur received it's JCI accreditation. 2016 onwards, NH increased the presence by opening premium multi specialty hospitals in New Delhi, Gurugram and Mumbai, in order to boost margins.

Our Vision

The vision of Narayana hospital is to provide high quality healthcare with care and compassion at a reasonable cost at an outsized scale.

Our Mission

We at Narayana Health have a dream of creating quality healthcare available to the masses worldwide.



DESCRIPTION

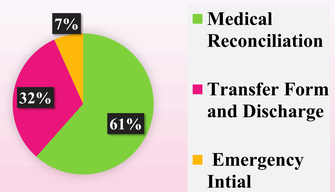
NH Jaipur is a 330 bedded multispecialty tertiary care hospital, located at Pratap Nagar in Jaipur. This hospital commissioned in 2011, is a full stage NABH accredited organization and is defined by its multi-disciplinary approach to supply comprehensive healthcare to its patients. It is also a licensed center for performing heart & kidney transplants. It offers comprehensive care across 37 specialties which include its six Centers of Excellence -

- Critical Care Medicine.
- Medical & Surgical Oncology
- Renal Science & Kidney Transplant
- Orthopedics & Joint Replacement
- Medical & Surgical Gastroenterology
- Cardiology & Cardio-vascular surgery

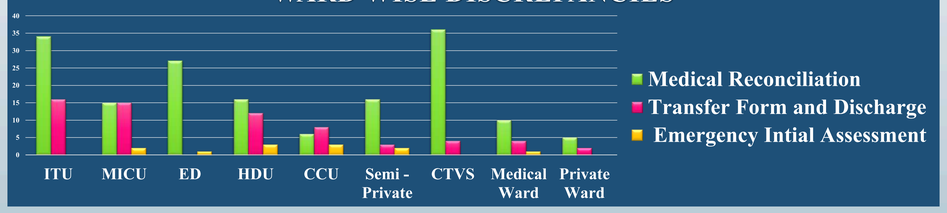
LEARNINGS & VALUE ADDITON

During my internship in Narayana Health I gained knowledge about medication reconciliation which is the process of listing the medicines of a patient in a precise manner, reconciling them and documenting any changes to avoid discrepancies. To achieve the goal of avoiding medication errors reconciliation of patients medicines is done during transition, admission and discharge.

DISCREPANCIES



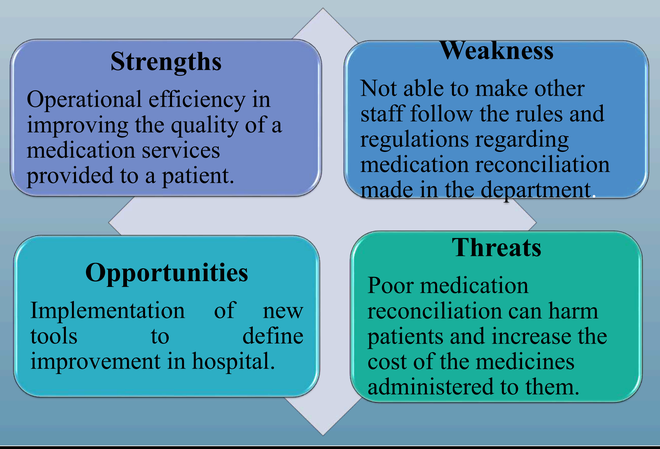
WARD WISE DISCREPANCIES



THEORETICAL WORK	PRATICAL EXPOSURE
Theoretical knowledge help us to learn about the tools to perform a task.	Practical exposure help us to to attain those tools which we learned to do our job.
In theory we learned about the various departments in a hospital and their services.	We gained the deep understanding of concepts which are followed in a hospital.

CHALLENGES

- Some staff members are non - cooperative.
- Many nurses don't answer my queries.
- Found difficulties in collecting the data in wards.
- Delay in transition and discharge of patients.



MEDICATION RECONCILIATION FORM

Date	**Consultant Name**
Patient's Name	**Transition/Admission/Discharge**
Date of Birth	**Medical History**
Gender	**Allergies**
Height and Weight	**Lifestyle Habits**

MEDICATION LIST

Medicine	Formulation	Dose	Route	Frequency	Indications	Status on Order	Remarks
						○ Continued ○ Modified ○ Suspended	

USEFULNESS

- Learning about patient safety goals and about the hospital.
- Gain the first hand exposure of working in the firm.
- Enhancing skills and gaining practical knowledge.

SUGGESSTIONS

- To provide framework for implementing medicine reconciliation in every ward during patient transition, admission, and discharge.
- Continuous monitoring should be done of patients whether their medicines are reconciled or not after 3 days of admission in the hospital.
- Miscommunication should be avoid among healthcare providers and patient's attenders to avoid delay discharge.