NATIONAL FORUM
FOR THE ENHANCEMENT OF TEACHING
AND LEARNING IN HIGHER EDUCATION

UCC
University College Cork, Ireland
Coláiste na hOllscoile Corcaigh

Medication Safety:

How to create an interprofessional teaching & learning session for medical, pharmacy and nursing students.

The teaching and learning session developed by General Practice at University College Cork can be easily replicated at your institution. We employed the use of simulation facilities in UCC, however, this advanced technology is not necessary to replicate what we developed.

We devised a scenario for medical, pharmacy and nursing students to work together in groups of 3. This involved the students adopting the roles of a doctor, nurse and pharmacist to generate, review and dispense a prescription for a patient at time of hospital discharge as they would in real life.

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The Stages Involved:

1. **The doctor was given a hospital drug Kardex and asked to write a discharge prescription for a patient.**
This involved correctly transcribing the medications, adhering to the requirements of prescription writing and making a decision as to whether or not they needed to continue the PRN (or as needed) medications which included a laxative and night sedation. Of note, there was evidence on the drug Kardex that the dose of the patient's statin (lipid lowering medication) had been increased while the patient was an inpatient. In addition, they were unaware at this point that an ACE inhibitor (antihypertensive medication) had been omitted accidentally at time of hospital admission.

2. **The nurse was given the opportunity to review the patient's medical records from their admission while the doctor was writing the prescription.**
The records included a GP letter, inpatient notes, blood results and observation chart.

3. **Following generation of the prescription, the doctor was then given the opportunity to review the patient's medical records in detail.**

4. **The pharmacist was given the opportunity to review the pharmacy patient medication record while the doctor was writing the prescription and the nurse was reviewing the patient's medical records.**
The pharmacy record listed the patient's regular medications as prescribed pre-hospital admission.

5. **The prescription written by the doctor was given to the pharmacist to dispense.**
The pharmacist's medication record showed that an ACE inhibitor had been omitted and that the dose of the statin was higher than pre-admission. The pharmacist was also expected to screen the prescription for errors pertaining to formulation quantity etc. In addition, they were expected to query inappropriate continuation of the laxative and night sedation.

6. **The pharmacist phoned the nurse on the ward to discuss the issues and errors they had identified.**
It was clear from the records that the omission of the ACE inhibitor was accidental. It was listed on the GP referral letter as a regular medication and there was evidence of the patient's blood pressure readings increasing while an inpatient. It was also clear that the increase in the dose of the statin was intentional as there was evidence of a raised cholesterol in the patient's blood results.

7. **The nurse subsequently contacted the doctor to discuss the issues and to convey that the doctor was to phone the pharmacist back.**
It was expected that the doctor would recommend dispensing of the ACE inhibitor and the increased dose of the statin and to discontinue the laxative or night sedation if same had been prescribed as a regular medication.

Assessment

We assessed the students on competencies pertaining to prescribing and dispensing and communication. Communication competencies were based on the ISBAR tool and included students identifying themselves, the location, the patient in question or the recipient of the phone call, communicating the issue at hand or an assessment of the situation and implementing or requesting a recommendation.

This simple scenario provided the medical, pharmacy and nursing students with the opportunity to engage with one another and work together as they would in real life. It afforded valuable learning opportunities in relation to prescribing, dispensing and communication.

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