





**Appendix 2.** Form used for medication reconciliation at the time of transfer. ©2011 The Hospital for Sick Children. Reproduced with permission.



THE HOSPITAL FOR  
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**Transfer Medication Reconciliation  
Form**

	Last Dose Charted	Intent On Transfer			
		Continue	Discontinue	Change	Hold
<b>Current Medications:</b>					
<b>Enoxaparin INJ</b> - 19 mg Subcutaneous, Q12H. Start Time: Routine. Start: 2010-09-24 Routine.	2010-10-06 06:00				
<b>Atenolol</b> - 12.5 mg PO, Daily. Start Time: Routine. Start: 2010-09-27 Routine.	2010-10-06 09:00				
<b>PRN Medications:</b>					
<b>Acetaminophen</b> - 290 mg PO or PR, Q4H PRN Temp > 38.5 or pain Additional info: Maximum - 75 mg/kg/day Start: 2010-09-24					
<b>dimenhydrinate</b> - 20 mg PO or PR or Enteral Tube, Q4H PRN nausea or vomiting Start: 2010-09-24					
<b>Suspended Medications:</b>					
<b>ASA</b> - 81 mg PO or Enteral Tube, Daily. Start Time: Routine. Start: 2010-09-27 Routine.	2010-09-27 21:03				

**Step 1:**

Receiving MD/APN  
Prescriber Intent for  
Admission & Transfer  
Medications

\_\_\_\_\_  
Signature                      Print Name                      Date/Time

**Step 2:**

Receiving RN/Pharmacist  
Reconciliation of Admission  
& Transfer Medications  
with Transfer Orders

\_\_\_\_\_  
Signature                      Print Name                      Date/Time

**Pharmacy**

\_\_\_\_\_  
Signature                      Print Name                      Date/Time

Supplementary material for Chan C, Woo R, Seto W, Pong S, Gilhooly T, Russell J. Medication reconciliation in pediatric cardiology performed by a pharmacy technician: a prospective cohort comparison study. *Can J Hosp Pharm.* 2015;68(1):8-15.

**Appendix 3.** Descriptions of unintentional discrepancies (part 1 of 2)

Patient No.	Patients' Medications before Admission*	Unintentional Discrepancies	
		Description	Classification†
<b>Baseline phase (medication reconciliation by nurse or pharmacist)</b>			
1	<ul style="list-style-type: none"> <li>• Atorvastatin</li> <li>• Ezetimibe</li> <li>• Clopidogrel</li> <li>• Acetylsalicylic acid</li> <li>• Ferrous sulfate</li> <li>• Flintstones multivitamin</li> </ul>	<ul style="list-style-type: none"> <li>• Ferrous fumarate 30 mg (elemental iron) PO daily to be continued as per BPMH but ordered as bid. Patient took ferrous sulfate 60 mg (elemental iron) PO daily at home.</li> <li>• Clopidogrel 15.6 mg PO daily ordered as per BPMH. Patient took 15.5 mg PO daily at home.</li> </ul>	<ul style="list-style-type: none"> <li>Class I</li> <li>Class I</li> </ul>
2	<ul style="list-style-type: none"> <li>• Furosemide</li> <li>• Omeprazole</li> <li>• Budesonide nebulas</li> <li>• Budesonide oral liquid</li> <li>• Sildenafil</li> <li>• Spironolactone</li> <li>• Enalapril</li> <li>• Dornase alfa</li> <li>• Calcium carbonate</li> <li>• Cholecalciferol</li> </ul>	<ul style="list-style-type: none"> <li>• Spironolactone 25 mg PO bid was ordered as per BPMH but upon clarification, it was identified that patient took once daily at home.</li> <li>• Calcium carbonate 250 mg (elemental calcium) PO TID was ordered as per BPMH, but upon clarification, patient took 600 mg (elemental calcium) PO daily at home (2 discrepancies: wrong dose and wrong frequency).</li> <li>• Cholecalciferol 400 IU PO daily was ordered as per BPMH, but upon clarification, patient took 1000 IU PO daily at home.</li> </ul>	<ul style="list-style-type: none"> <li>Class II</li> <li>Class I</li> <li>Class I</li> </ul>
3	<ul style="list-style-type: none"> <li>• Captopril</li> <li>• Furosemide</li> <li>• Saline nasal drops</li> </ul>	<ul style="list-style-type: none"> <li>• Saline nasal drops, 1 drop in each nostril tid prn omitted on BPMH.</li> </ul>	<ul style="list-style-type: none"> <li>Class I</li> </ul>
4	<ul style="list-style-type: none"> <li>• Adenosine</li> <li>• Glycerin infant suppository</li> <li>• Cholecalciferol</li> </ul>	<ul style="list-style-type: none"> <li>• Adenosine 0.4 mg IV × 3 doses omitted on BPMH. Patient received 3 doses at peripheral hospital.</li> <li>• Glycerin infant supp PR × 1 omitted on BPMH.</li> </ul>	<ul style="list-style-type: none"> <li>Class I</li> <li>Class I</li> </ul>
5	<ul style="list-style-type: none"> <li>• Haliborange multivitamin liquid</li> </ul>	<ul style="list-style-type: none"> <li>• Haliborange multivitamin 2.5–5 mL PO once daily omitted on BPMH.</li> </ul>	<ul style="list-style-type: none"> <li>Class I</li> </ul>
6	<ul style="list-style-type: none"> <li>• Flintstones multivitamin</li> <li>• Gummy multivitamin</li> </ul>	<ul style="list-style-type: none"> <li>• Patient took Flintstones multivitamin 1 tablet PO daily alternating with gummy multivitamin on different days at home. Flintstones multivitamin omitted on BPMH.</li> </ul>	<ul style="list-style-type: none"> <li>Class I</li> </ul>
7	<ul style="list-style-type: none"> <li>• Furosemide</li> <li>• Cholecalciferol</li> </ul>	<ul style="list-style-type: none"> <li>• Cholecalciferol 400 IU PO daily omitted on BPMH.</li> </ul>	<ul style="list-style-type: none"> <li>Class I</li> </ul>
8	<ul style="list-style-type: none"> <li>• Tacrolimus</li> <li>• Mycophenolate mofetil</li> <li>• Lorazepam</li> <li>• Ferrous sulfate</li> <li>• Citrate</li> <li>• Hydrocortisone 1% cream</li> <li>• Zinc oxide 16% paste</li> </ul>	<ul style="list-style-type: none"> <li>• Zinc oxide 16% topical paste prn for diaper rash (variable frequency as per parents) omitted on BPMH.</li> <li>• Ferrous sulfate 39 mg (elemental iron) PO bid omitted on BPMH.</li> </ul>	<ul style="list-style-type: none"> <li>Class I</li> <li>Class I</li> </ul>

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**Appendix 3.** Descriptions of unintentional discrepancies (part 2 of 2)

Patient No.	Patients' Medications before Admission*	Unintentional Discrepancies	
		Description	Classification†
<b>Pilot phase ( medication reconciliation by pharmacy technician)</b>			
1	<ul style="list-style-type: none"> <li>• Levothyroxine</li> <li>• Calcium (salt unknown)</li> <li>• Ferrous gluconate</li> <li>• Cholecalciferol</li> <li>• Vitamin B<sub>12</sub></li> <li>• Omega 3</li> </ul>	Vitamin B <sub>12</sub> 1 tablet PO daily omitted on BPMH (dose unknown after attempts to determine).	Class I
2	<ul style="list-style-type: none"> <li>• Atomoxetine</li> <li>• Fluvoxamine</li> <li>• Melatonin</li> <li>• Multivitamin</li> <li>• Polyethylene glycol 3350</li> </ul>	Melatonin 1.5 mg PO qhs to continue as per BPMH but was not ordered.	Class I
3	<ul style="list-style-type: none"> <li>• Flecainide</li> <li>• Sotalol</li> <li>• Lansoprazole</li> <li>• Hydrochlorothiazide</li> <li>• Nitrofurantoin</li> <li>• Sucralfate</li> </ul>	Nitrofurantoin 6 mg PO daily recorded on BPMH and ordered to start the following day. Patient took nitrofurantoin 12 mg PO daily at home.	Class I

BPMH = best possible medication history.

\*As listed in BPMH.

†Class I: unlikely to cause patient discomfort or clinical deterioration; class II, having potential to cause moderate discomfort or clinical deterioration; class III, having potential to cause severe discomfort or clinical deterioration.