## TSC Category
**Patient Care**

## TSC
**Medication Reconciliation in Pharmacy Support**

## TSC Description
Create the most accurate list possible of all medications consumed by a patient to ensure accurate and complete medication information transfer during transitions of care

## TSC Proficiency Description

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### Knowledge
- Medication reconciliation workflow
- Impact of Personal Data Protection Act on medication records access
- Proper disposal of pharmaceutical waste
- Institutional packing standards
- Physical appearance of drugs
- Organisational documentation systems
- Legal requirements and institutional standards for drug labelling
- Storage conditions for drugs
- Health record systems
- Interpretation methods of health records
- Drug interactions
- Pharmacology principles
- Sources of medication information
- Clinical conditions that may affect suitability of drug use
- Drug information
- Patient interview skills
- Organisational procedures relating to the creation, retrieval and sharing of patient medication list
- Medication management processes
- Therapeutic and clinical concepts on use of medication

### Abilities
- Inspect patients' medicine containers to ensure that the drugs in the containers are not defective, have not expired and match the labels
- Report to supervisors on abnormal conditions of drugs
- Repackage drugs
- Count physical numbers of each medication
- Document the name, strength, and quantity of medications
- Determine drug identity, accuracy of labelling instructions, expiry date, storage condition and suitability of use of patients' medications
- Perform proper relabelling of drugs with
- Obtain best possible medication history (bpmh)
- Review medicine lists
- Retrieve patients' medical records
- Recognise initial sources of information
- Highlight to pharmacists on drug duplications and omissions
- Recognise situations where other sources of information including general practitioners (GPs), nursing homes, dialysis centres are needed and contact them
- Recognise situations where verification with patients or caregivers is necessary and contact them to clarify
- Verify patients' physical medication supply
- Compare medication history obtained with medicines ordered
- Identify changes in medication regimens
- Identify discrepancies during interviews and refer to pharmacists for further review
- Recognise potential medication errors that may occur if discrepancies are unintentional and the urgency to rectify such discrepancies

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| updated administration instructions | • Document medication reconciliation performed in a structured format using terminology that is consistent and comprehensible by other staff  
• Conduct patient interviews independently  
• Adapt to patients’ needs during medication reconciliation  
• Propose solutions or recommendations for the medications that required reconciliation  
• Review discrepancies and detected errors to ascertain if they are actionable by pharmacists |  |  |