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Title: *Assessment of medication use among underserved patients experiencing a care transition*

Purpose: Clear communication between the care team and patient is critical to mitigate the risk of adverse drug events during a care transition. The purpose of this study is to determine if medication changes were communicated with patients during discharge and to assess patient-reported adherence during a transition from acute care to the ambulatory setting.

Methods: This was a four-week 20-item telephone survey-based study of underserved patients administered within two weeks of a scheduled transitional care management (TCM) visit or hospital, emergency department, or urgent care discharge. Survey questions were used to record receipt of counseling at discharge, receipt of medications after discharge, adherence to the medication care plan, receipt of medication review, and perceived benefit of pharmacist involvement with medication reconciliation.

Results: Response rate was 38% (N=30). Most respondents reported transitioning from hospital to primary care (73.4%), 53.2% white, 39.2% African American, 62% female, mean age 49 years, 20.3% had Medicare coverage, and 53.2% had Medicaid. All but one respondent reported receiving discharge counseling on their medications and took their medications as instructed. TCM visits with a primary care provider were completed by 83% (N=25) of respondents. Half of the patients felt that having a pharmacist available to help with medication reconciliation would be beneficial.

Conclusion: High rates of discharge counseling, good medication adherence, and completion of medication reconciliation during the TCM visit were reported. Longer-term studies that include validated approaches to medication use assessment are needed in this population.