Pharmacy – Pharmacist Generated Discharge Prescription

Digital Health
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Digital Health
Quick Reference Guide

This Quick Reference Guide will explain how to:

Reconcile and plan discharge prescriptions and complete associated documentation.

For Credentialled Pharmacists only

- This QRG is to be utilised by Pharmacists credentialled in Discharge Prescription Planning only
- Pharmacist must be notified that patient is suitable for discharge

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Discharge Reconciliation

1. Navigate to Orders and Referrals

2. Click Reconciliation ▾ and Discharge

3. The reconciliation window will appear

Orders Prior to Reconciliation								Orders After Reconciliation
Order Name/Details	Status	▶	📦	🟥			Order Name/Details	
Continued Home Medications								
aspirin (aspirin 100 mg oral tablet) — 1 tab(s), Oral, daily (with or after food), 112 tab(s), 0 Refill(s)	Documented	○	○	○			**Documented** = Home medication	
aspirin (aspirin 100 mg oral tablet) — 100 mg given as 1 tab(s), Oral, daily (with or after food)	Ordered	○	○	○				
atorvastatin (atorvastatin 40 mg oral tablet) — 1 tab(s), Oral, daily, 30 tab(s), 0 Refill(s)	Documented	○	○	○				
atorvastatin — 40 mg given as 1 tab(s), Oral, night	Ordered	○	○	○			**Ordered** = Inpatient medication	
Medications								
metformin (metformin 500 mg oral tablet) — 500 mg given as 1 tab(s), Oral, BD (with or after food)	Ordered	○	○	○				

Symbol Legend:

▶	**Continue medication after discharge**	This will not be included on the discharge script but it will appear on the discharge summary. **Only use when a patient is transferred to a non-Western Health hospital.**
📦	**Create new prescription**	Adds medication to discharge script and discharge summary. **Always use for ongoing medications including home meds regardless of whether or not patient needs supply, as per WH policy.**
🟥	**Do not continue medication on discharge**	The medication will cease and will not be printed on the discharge script or discharge summary.

4. Make a selection for the first medication

5. The Ordering Physician window will appear

6. Enter Medical Offficer's name and select **Protocol w/ Co-sign**

Ordering Physician window showing:
- *Physician name
- *Order Date/Time: 15/01/2024 0950 AEDT
- *Communication type: Fax / Phone / Verbal / Written w/ No Co-sign / Protocol w/ No Co-sign / **Protocol w/ Co-sign** (highlighted)
- OK / Cancel

7. Continue selection for remaining medications:

   • If there are duplicated medications (e.g. a documented home medication converted to an active inpatient medication will have two entries), the following scenarios may apply:

There is no change in patient's own medication:	There is a change in patient's own medication (i.e. intentional dose change:)
Continue the documented medication 📋 Discontinue the ordered medication ⚕️	Continue the ordered medication ⚕️ Discontinue the documented medication 📋 **OR** Continue the documented medication 📋 and modify Discontinue the ordered medication ⚕️

Tip: Continue the medications you wish to prescribe then click [Do Not Continue Remaining Orders]

8. Inpatient infusion orders cannot be reconciled upon discharge.

   a. If intravenous or subcutaneous medications are required on discharge (e.g. for HITH), add them as ampoules or vials
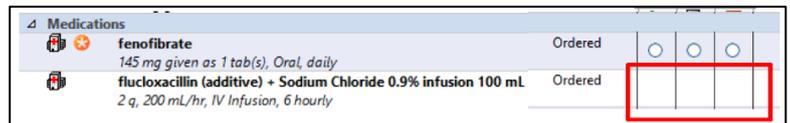
9. Make modifications to medications order details if required

10. Add any additional discharge medications by clicking ➕ Add

11. Complete mandatory fields and select appropriate PBS code if applicable. For non-PBS items where the quantity is unknown, enter "1 box(es)" into the Dispense field.

PBS Phone Authority

If PBS phone authority is required, write '*pending approval*' in the **PBS approval number field.**

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12. Review the printer location to ensure the correct printer is selected. If unsure where the script will be printed, select 'Do Not Send: other reason (Rx)' | Send To: Do Not Send: other reason (Rx) ▼ | ... |

13. Click Reconcile *and* **Plan**

14. Notify Medical Officer that Discharge Reconciliation has been planned

Documentation

> 💡 **Discharge Script Planning Documentation**
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> The discharge plan must be documented for each patient - this includes documenting information on which medications require specialised approval e.g. phone authority or permit, any medication changes and information for doctor to review etc.

1. Navigate to 'Pharmacist View' in the Table of Contents

2. On the Discharge Tab under Create Note click on Select Other Note

3. The New Note Window will appear

4. Select Note Template: 'Free Text Note', select Type: 'Pharmacy Discharge Note' and click OK

5. Type **.pgdp** (this is case-sensitive) and press ENTER to load the autotext template

6. Complete the applicable fields and click Sign/Submit

7. Modify note title to 'Pharmacist Generated Discharge Prescription'