

MEDICATION OPTIMIZATION FOR SUSTAINABILITY IN INPATIENT CARE

Action Items for Institutional Healthcare Providers



This checklist provides actions that institutional healthcare providers can take to optimize the medication prescribed to patients to reduce the environmental, patient and institutional consequences of polypharmacy.

- Enhance your clinical medication reviews:
 - Review deprescribing guidelines and prescribing tools
 - Download the deprescribing.org app for deprescribing algorithms
 - Become familiar with common adverse drug events to avoid prescribing cascades
 - Partner with patients and caregivers to make medication decisions
 - Consult stewardship teams and specialists when appropriate
 - Consider completing a medication review when a patient is moved to ALC status
- Implement non-pharmacological strategies for insomnia in hospital
- Provide patient handouts to promote medication discussions with primary care providers
- Communicate and document rationale for medication changes and share this information with primary care providers and patients
- Suggest medications or programs for deprescribing to community healthcare providers in discharge summaries if unable to make changes during admission

For more resources, view the Medication Optimization for Sustainability in Inpatient Care playbook:

cascadescanada.ca/resources/medication-optimization-playbook



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