**Medicines reconciliation checklist**

|  |  |
| --- | --- |
| Patient NHI/Name | Date |

**Collect**

Clinical Checks

**1a Is there evidence the prescription reconciled with a minimum of 2 valid sources?**

Yes □ No □

**1b Is there evidence that the adverse drug reaction status was checked?**

Yes □ No □

**1c Is there evidence that the allergy status was checked?**

Yes □ No □

**Compare**

**2 If there were any unexplained discrepancies, is there evidence they have been clarified with the prescriber?**

Yes □ No □ NA □

Patient Education

**Communicate**

**3a Is there evidence the patient was educated about any changes or that there have been no changes?**

Yes □ No □

**3b Is there evidence the patient was given the opportunity to ask questions?**

Yes □ No □

**3c Is there evidence the patient was offered an up-to-date list of their current medicines?**

Yes □ No □

Outcome measures – if next GP script presented

**4a Is there evidence that the next GP script has been checked with the up-to-date medicines list in the pharmacy?**

Yes □ No □ NA □

**4b If there are any discrepancies, have you clarified and documented these?**

Yes □ No □ NA □