



Medication Reconciliation is a Promoting Interoperability requirement and should be completed for every ED, Office Practice, Outpatient, and Inpatient visit/encounter.








Ambulatory Reconciliation Process

➤ Navigate to the Workflow MPage.


- From the component menu, click **Home Medications**. The patient's home medications will display.
 
- Verify the **Medication History** has been reviewed and updated as noted by the green checkmark.
 
- Click the **Outpatient** hyperlink to open the **Reconciliation** window.

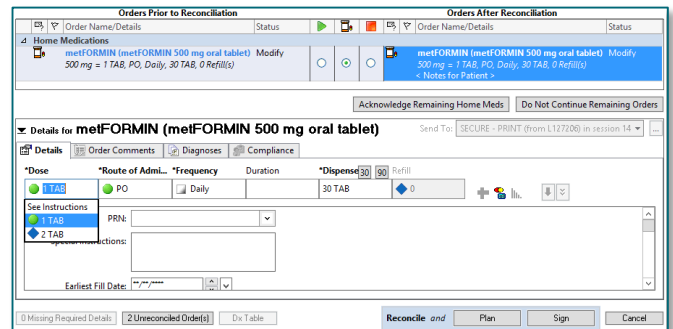
Orders Prior to Reconciliation				Orders After Reconciliation			
Order Name/Details	Status			Order Name/Details	Status		
Home Medications							
metFORMIN (metFORMIN 500 mg oral tablet) 500 mg = 1 TAB, PO, Daily, 30 TAB, 0 Refill(s)	Prescribed						
tiotropium (Spiriva 18 mcg inhalation capsule) 18 mcg = 1 CAP, INHALATION, Daily, 30 CAP, 0 Refill(s)	Prescribed						
valsartan (Diovan 40 mg oral tablet) 40 mg = 1 TAB, PO, Twice Daily, 60 TAB, 0	Documented						

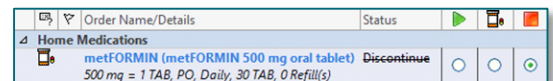
➤ The Medication Reconciliation window is split into two sections:

- Orders Prior to Reconciliation on the left.
- Orders After Reconciliation on the right.
- The **paper scroll**  icon indicates a documented home medication.
- The **pill bottle**  icon indicates an electronic prescription the patient has received from a Northern Light provider.
- The **unreconciled item**  icon indicates the medication has not been reconciled.
- The three columns between these sections contain these options:
 
 - Continue** 
 - Convert to a Prescription** 
 - Do Not Continue** 
- Medication Compliance** information will display when hovering over the medication in the **Orders Before Reconciliation** pane.

metFORMIN (metFORMIN 500 mg oral tablet)
500 mg = 1 TAB, Tab, PO, Twice Daily, # 60 TAB, 0 Refill(s)
Prescribed
This order has not yet been reconciled.
Compliance:
Still taking, not as prescribed according to Patient.
Last Dose: 06/11/2021 12:00 EDT
Comments: Pt. reports taking half doses

- Select **Continue** to continue the medication.
 - Modifications can be made by clicking the order in the **Orders after Reconciliation** section and updating the **Order Details** in the **scratch pad**.
- Select **Convert to Prescription** to convert a documented medication to a prescription.
 - Select the medication in the **Orders After Reconciliation** column to update the order details order, including the patient's preferred pharmacy.
 - Note the documented medication now appears as discontinued in the **Orders Prior to Reconciliation** pane.
- Select **Do Not Continue**  to discontinue a medication.





NOTE: It is important to use the radio buttons for the home medications you are responsible for.

- Once all applicable medications have been reconciled, acknowledge the remaining home medications by selecting the **Acknowledge Remaining Home Meds** button. This moves the remaining home medications to the **Orders After Reconciliation** column with a status of **Acknowledged**.
- Reconcile and **Sign** the **Outpatient Medication Reconciliation**.
 - To make updates or changes later, place the reconciliation in a planned state and sign later.
 - When finished updating the home medications, choose **Sign**.
- A green checkmark displays next to the **Outpatient Medication Reconciliation** status indicating Med Reconciliation is complete.

