



**Mobile Integrated Healthcare
MEDICATION RECONCILIATION**

POLICY

This policy outlines the minimal procedures during a Mobile Integrated Health (MIH) encounter for a patient who requires medication reconciliation.

PURPOSE

Provide baseline guidance for the MIH provider on management of patients requiring medication reconciliation.

BASIC MEDICAL CARE

Reference and apply all applicable OEM standards of care. Identify, treat, and attempt to stabilize any patient who is identified as acutely ill. Activate the municipal transport service if indicated. The most relevant standards of care are as follows:

- Universal Care
- Medication List

SOCIAL DETERMINENTS OF HEALTH (SDOH)

Reference and apply all applicable patient assessment screens in addition to OEM MIH Standards of Care. An emphasis should be placed on the following SDOH:

- Access to healthcare
- Understanding condition and care plan
- Education
- Housing, basic amenities and the environment

STANDARD OF CARE

1. Apply General MIH Operational Guidelines.
2. Review/perform history and conduct an appropriate physical examination with specific consideration of the following:
 - a. History of not taking medication as prescribed, missing medication, taking too much of a medication, difficulties obtaining access to medications, recent medication changes, multiple medication prescribing physicians, difficulties understanding dosing instructions, or language barriers
 - b. Ability to read and see instructions, ability to grasp pills in hand or open pill bottles, ability to swallow or administer medications
3. Consider working with a pharmacist if they are available.
4. Review the following: reason for each medication, administration route of medication, and how the patient plans to organize their medication with the patient and social support system.
5. Review medical provider orders including diet and any additional instructions for each medication.
6. Clarify medication dosing schedule, amount, and logs of administration with patient to confirm adherence.
 - a. Ensure written plan is available to patient; if none available, utilize the example in supporting documents.
 - b. Update patient's File of Life or equivalent documentation if available.
7. Note and record patient's concerns about medications and any potential risk factors for adherence to medication regimen.
8. Provide correction plan for patient if indicated.



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REFERRALS:

- Milwaukee County Resources: OEM MIH Resource Contact List
- Department Specific Resources: Department Specific Operational Guidelines

EMS AGENCY ADDITIONAL POLICIES

Individual EMS Agencies within Milwaukee County are afforded the flexibility to add additional aspects to each MIH guideline. These additional aspects shall be approved by the OEM Medical Direction Team.

SUPPORTING DOCUMENTS

Examples of Medication Written Plan on following page



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Medicine Chart

Name: _____
Date: _____

NAME OF MEDICINE	COLOR	WHAT'S IT FOR?	DOSE	HOW OFTEN & WHAT TIME	PRESCRIBING DOCTOR	PHARMACY PHONE NO.	SPECIAL INSTRUCTIONS	REFILL DATE

Initiated: 01/01/2024
Reviewed/Revised:
Revision

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Approved: Dan Pojar, BSEMS, FP-C, NRP EMS Division Director
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