

February 18, 2014

Potential inaccuracy of electronically transmitted medication history information used for medication reconciliation



Many hospitals use medication history or prescription data as part of their medication reconciliation process. These data are available by subscription and delivered via various hospital computer system vendors. The information is based on records derived from prescription drug claims (from pharmacy benefit managers) and prescriptions dispensed by pharmacies.

Surescripts, a major provider of medication history services, has determined that a single data source for some of its *Medication History Acute* and *Medication History Ambulatory* records contains information that may be inaccurate. The inaccurate data could jeopardize patient safety. Although Surescripts has no reason to believe there are additional data sources in question, the company is in the process of conducting analysis to further validate and isolate the problem. Please note, however, that this potentially inaccurate data does not affect any electronic prescriptions routed through the Surescripts network.

The cause of the potential inaccu-

racy of the data relates to the strength of a drug as reported in the medication history drug description field, and it results from missing special characters such as a decimal point, forward slash, or percentage in some records (“.”, “/”, “%”). For instance, the strength of a drug previously dispensed may be reported as “ramipril 25 mg capsules,” when it should have been reported as “ramipril 2.5 mg capsules.”

Special characters are found in approximately 20 percent of the data source’s records that are added to records from other sources to create Surescripts’ *Medication History Acute* and *Medication History Ambulatory* services. Thus, in the interest of patient safety, it is recommended that healthcare professionals question and confirm any medication dosages reported in electronic medication history information that appears inappropriate given the patient’s unique characteristics and current health status.

Further, in an abundance of caution, Surescripts has disconnected the data source in question from its *Medication History Acute* and *Medication History Ambulatory* services.

Surescripts will not reconnect this data source to these services until the problem has been corrected and extensive testing and analysis has confirmed the integrity of the data. Meanwhile, medication history data may be inaccurate as noted above.

Surescripts has communicated this potential risk to all electronic health record (EHR) vendors connected to its network and is working with ISMP to communicate with the healthcare provider community immediately. As some inaccurate data could exist in offline locations, Surescripts will provide subsequent notification of specific actions for EHR vendors and their healthcare end users to take to recover all accurate data.

All healthcare providers who utilize *Medication History Acute* or *Medication History Ambulatory* services are encouraged to contact their EHR vendor to determine if this issue affects their systems. If any healthcare provider has questions about this alert, please contact the Surescripts Electronic Prescribing Resource Center at 1-866-RxReady (1-866-797-3239) or via: support@surescripts.com. 

The National Alert Network (NAN) is a coalition of members of the National Coordinating Council for Medication Error Reporting and Prevention (NCC MERP). The network, in cooperation with the Institute for Safe Medication Practices (ISMP) and the American Society of Health-System Pharmacists (ASHP), distributes NAN alerts to warn healthcare providers of the risk for medication errors that have caused or may cause serious harm or death. NCC MERP, ISMP, and ASHP encourage the sharing and reporting of medication errors both nationally and locally, so that lessons learned can be used to increase the safety of the medication use system.