# **Care Transitions**

"When I left the hospital, I clearly understood the purpose for taking each of my medications."



# **During Admission Rounding**

"You might be given new medications during your stay with us. If at any point during your stay you believe someone did not clarify the purpose behind the medication they are prescribing, stop them and have them give you further explanation."



## **During Patient Rounding**

"This is [medication name]; it will help you manage your pain level. You are allowed to take one every 12 hours while you are here at the hospital and for the next two weeks after you go home. What questions do you have about [medication]?"



### **During Discharge Rounding**

"I see you will be leaving with multiple prescriptions. Let's double check that we were clear about names of each and why you need them. Can you tell me the name and purpose for each of your medications?"

"What (if any) concerns do you have about the medications or filling your prescriptions?"

### **PROCESS**

#### **Use the Whiteboard**

• Use the patient's whiteboard to explain the plan of care in a simple way and the importance/reason for medications

#### **Begin on Admission**

- Give them a folder at admission so they can keep all their health-related literature and medication information. In the front of the folder have medication information written as follows:
  - 1) This medication is [insert medication name]
  - 2) This medication was prescribed for [insert medication reason]
  - 3) The potential side effects of this medication are [insert side effects]



