Medication Reconciliation is the process of creating the most current, complete, and accurate list possible of a resident’s medications and then comparing that list against medication orders at each stage of the resident’s stay in the facility and resolving any discrepancies found.

### WHEN
- Admission
- Re-admission after hospitalization
- Polypharmacy/Multiple prescribers
- New medication order as an emergency measure
- Psychiatric disorders or distressed behavior

### AREAS OF REVIEW
- Medication dose
- Medication indication
- Duration of medication therapy
- Other causes for the symptoms
- Non-pharmacological interventions
- Response to medication

### HANDLING DISCREPANCIES
- Conduct Medication Reconciliation once the resident returns from another site
- Look for changes, additions, or omissions, and check dosages of continuing medications
- Note any lab orders resulting from medication changes
- Notify practitioners of any changes or omissions from the resident’s medication regimen
- Verify if the physician wishes to re-order stopped medications

### ANTIPSYCHOTICS
The facility must ensure that:
- Residents who have not used antipsychotic drugs are not given these drugs unless antipsychotic drug therapy is necessary to treat a specific condition as diagnosed and documented in the clinical record
- Residents who use antipsychotic drugs receive gradual dose reductions, and behavioral interventions, unless clinically contraindicated, in an effort to discontinue these drugs
- Residents on antipsychotics are monitored for the side effects:
  - Blurred vision
  - Dry mouth
  - Drowsiness/sedation
  - Weight gain
  - Constipation
  - Gait abnormality/involuntary movements
  - Muscle spasms or tremors (can be severe)
  - Hypotension
  - Hyperglycemia

The project described was supported by Funding Opportunity Number CMS-1E1-12-002 from the U.S. Department of Health and Human Services, Centers for Medicare & Medicaid Services. The contents provided are solely the responsibility of the authors and do not necessarily represent the official views of HHS or any of its agencies.