



Preventing harm:

Linking the right patient with the right record and prescription

Pharmacies need to be able to accurately link patient records and prescription profiles to prevent potentially fatal, wrong-patient errors:

As anyone who works in a pharmacy can tell you, there are many opportunities for mistakes to happen. Despite elaborate systems, processes and protocols designed to prevent errors, the patient can still receive the wrong prescription. Any number of reasons can be the cause:

- The physician refers to the wrong patient record when calling in the prescription.
- One patient is confused with another in the pharmacy database because they have similar names and birthdates.
- Data can't be shared and records linked between providers and pharmacies because of lack of interoperability.
- A patient's information is spread across multiple patient profiles, such as one for Robert Smith and another for Rob Smith, both belonging to the same person.

As patients move and industry consolidation continues, the magnitude of community pharmacy's responsibility regarding patient profile accuracy and completeness can't be overstated: mismatched health records can result in life-altering, even fatal consequences for patients.

The shocking frequency of patient ID mix-ups

A study conducted by the Institute for Safe Medication Practices (ISMP) found that wrong-patient errors happen about once for every 1,000 prescriptions filled. With close to 4 billion prescriptions filled each year, an average of 7 errors happen each month at every pharmacy across the U.S. with potentially life-altering, even fatal consequences.¹

Patients can be harmed in numerous ways when pharmacy errors result in them receiving the wrong medication:

- The medication could be dangerous given the patient's health condition, allergies or other medications they're currently taking.
- The patient is not taking the correct medicine prescribed, leaving their health condition untreated.
- The patient, recognizing the error, might choose to misuse the wrong medicine for recreational purposes or to harm themselves.
- Confidential information is shared with the person who receives another patient's medicine, including their full name, address and drug name.



Mismatches and duplicate records jeopardize patient safety and raise healthcare costs. They can lead to incorrect diagnosis and treatment—including prescriptions—redundant tests and services and productivity loss.

Who's making mistakes?

Incorrect identification can occur anywhere on a patient's healthcare journey in any setting, from hospitals and nursing homes to physician offices and pharmacies. Every scan, lab test, doctor or clinic appointment and filled prescription becomes an additional point where mistakes can be introduced into the medical records.

Clerical errors like misspellings increase the odds of mix-ups. So does a lack of data standardization, such as whether to include a middle name versus middle initial and how to handle hyphenated names.

If a pharmacist or technician can't locate a patient's record already in their system, they create a new record. A duplicate record spreads a patient's health data over multiple profiles, so the record pulled up at any one time may be missing important details such as a patient's allergies and complete medication history.

Data incompatibility poses a challenge

Interoperability presents another obstacle to linking health data and correctly identifying patients. Electronic medical records from disparate sources are often non-compatible, making data exchanges across different health systems, including pharmacies—prescriber to pharmacy and pharmacy to pharmacy—complicated. When records can't be linked, healthcare providers of all types don't have access to all the information they need to make treatment decisions.

Accurately linked records across pharmacies are a necessity for detecting and preventing medication misuse, such as a patient who attempts to fill multiple prescriptions for opioids at different pharmacies within a short time period.

One proven solution is the use of a unique patient identifier. That identifier can help providers and pharmacies increase interoperability, improve patient record linking between disparate data sources and prevent prescription errors.

Disparate data must be cleansed and linked

Most healthcare organizations, including pharmacies, lack the technology and resources to aggregate medical records data and patient medication profiles across care delivery systems. They can, however, turn to a third-party data management company for assistance. A data company can cleanse the records of errors and duplications. It can assign a unique identifier to each patient. Using sophisticated linking technology, they can analyze records from multiple sources and connect records common to a single individual.

Deep public records data assets that form a referential database can be used to augment patient medical and prescription data. Each additional piece of information improves the chances of matching patients correctly and provides a more detailed identity picture, which can then follow patients on their healthcare journey.

Patient safety is at stake

Incorporating electronic medical records into standard clinical practice and the ability to exchange medical data, including prescription profiles, have greatly advanced care coordination and delivery. But difficulties in patient data matching—ensuring the right patient is associated with the right record—mean the benefits have yet to be fully realized.

As technology advances and the quantity of health data continues to grow, healthcare organizations, including pharmacies, need to work toward having clean, duplicate-free data and achieving nationwide interoperability. Nothing less than the viability of their business and the safety of their patients are at stake.

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¹ <http://www.pharmacytimes.com/publications/issue/2016/june2016/open-the-bag-to-catch-errors-at-the-point-of-sale>