# **Medication Reconciliation Checklist**

*“The process of comparing a resident’s medication orders to all of the medications that the resident is taking.” – Joint Commission*

Sources of information:

* Pharmacy fill history
* Medication profile from physician office/hospital
* Resident or Resident Representative interview

| Medication Appropriateness | | |
| --- | --- | --- |
| Questions to ask about each individual medication | | |
|  |  | Y/N |
| 1 | Is there an indication for the medication? |  |
| 2 | Is the medication effective for the condition? |  |
| 3 | Is the dosage correct? |  |
| 4 | Are the directions correct? |  |
| 5 | Are the directions practical? |  |
| 6 | Are there clinically significant drug-drug interactions? |  |
| 7 | Are there clinically significant drug-disease/condition interactions? |  |
| 8 | Is there unnecessary duplication with other medication(s)? |  |
| 9 | Is the duration of the therapy appropriate? |  |
| 10 | Is this medication the lease expensive alternative compared to others of equal utility? |  |

Comments: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_