

Best Possible Medication History (BPMH)

Quick Tips

Goal → Obtain complete information on the patient's medication regimen, including:

- Name of each medication
- Formulation (e.g., extended release)
- Dosage, Route, Frequency
- Non-prescription medications (e.g., herbals, OTCs, vitamins)

Try to use at least two sources of information and explore discrepancies between the different sources.

If your starting point is a medication list:

- Review and verify each medication with the patient.
- It is best to start by having the patient tell you what he or she is taking; do not read the list aloud asking if it is correct.

Questions to elicit a complete medication list:

- For each medication, elicit the dose and time(s) of day taken.
- When appropriate, ask about formulation and route of administration.
- Start with an open-ended question: What medications do you take at home?
- Use **Probing Questions** (on the back) to minimize missed medications.

Time-saving tips:

- ✓ Start with easily accessible sources (e.g., outpatient EMR med list, recent hospital discharge orders).
- ✓ If patients use a list or pill bottles and seem completely reliable (and data are not that dissimilar from the other sources, and/or the differences can be explained), then other sources are not needed.
- ✓ If patients are not sure, relying on memory only, or cannot clearly “clean up” the other sources of medication information, then use additional sources such as community pharmacy data.
- ✓ If the medication history is **still not clear** (e.g., suspected differences between what the patient is supposed to be taking and what they actually take) then contact outpatient physician office(s) and/or have the family bring in the pill bottles from home.



Probing Questions:

- ✓ Ask about **scheduled medications**.
- ✓ Ask about **PRN medications**.
 - Which medicines do you take only sometimes?
 - What symptoms prompt you to take them?
 - How many doses per week do you take?
 - What is the most often you are allowed to take it?
 - Do you often take something for headaches? Allergies? To help you fall asleep? When you get a cold? For heartburn? For constipation?
- ✓ **Assessing the purpose of each medication** may lead to additional prompts.
 - What is each medicine for?
 - Do you take any other medications for that?
- ✓ Ask about **medications for specific conditions** that the patient has.
 - What medicines do you take for your diabetes, high blood pressure, etc.?
- ✓ Ask about **medications prescribed by subspecialists** who follow the patient.
 - Does your [arthritis doctor] prescribe any medications for you?

- ✓ Ask about **medications that are easy to forget**.
 - Do you take any inhalers, nebulizers, nasal sprays, ointments, creams, eye drops, ear drops, patches, injections or suppositories?
 - Do you take any medications in the evening or at night?
 - Do you take any medicines once a week or once a month?
- ✓ Ask about **non-prescription products**.
 - Which medicines do you take that do not require a prescription? (Over-the-counter medicines, vitamins, herbals and minerals)
- ✓ Assess **recent medication use and adherence**.
 - When did you take the last dose of each of your medicines?
 - Tell me about any problems that you have had taking these medicines as prescribed.
 - Many patients have difficulty taking their medications exactly as they should every day. In the last week, how many days have you missed a dose of your [medication]?

The MARQUIS projects were supported by grant numbers 5R18HS019598-03 and 5R18HS023757-02 from the Agency for Healthcare Research and Quality. The content is solely the responsibility of the authors and does not necessarily represent the official views of the Agency for Healthcare Research and Quality.



shms **MARQUIS²**
Multi-Center Medication Reconciliation
Quality Improvement Study

Best Possible Medication History (BPMH)

Quick Tips

