**Adverse Drug Event (ADE) Best-Practice Reference Tool**

<table>
<thead>
<tr>
<th>Best Practice</th>
<th>Description</th>
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<tbody>
<tr>
<td>Pharmacist-led medication reconciliation and medication therapy review</td>
<td>Compares active medication orders to all of the current medications that the patient has been taking, identifies and addresses medication related problems (i.e., duplication of therapy, unnecessary medications, inappropriate dosing, drug-drug interactions) 3, 5, 7, 8, 9, 10, 14, 16, 18, 19, 21, 24, 26, 27, 29, 30, 31, 33, 35, 36, 38, 39</td>
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<tr>
<td>Bedside delivery of medications prior to discharge</td>
<td>Prevents delay or interruption in medication therapy following discharge, verifies insurance coverage, manages prior authorizations or drug substitutions (i.e., therapeutic equivalent substitutions based on cost, availability, formulary, insurance) 5, 10, 20</td>
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<td>Pharmacist-led discharge medication counseling</td>
<td>Provides information on proper medication administration, side effects, disease state education 5, 7, 8, 9, 10, 14, 16, 21, 24, 26, 30, 31, 35, 36, 38, 39</td>
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<td>Post-discharge follow up</td>
<td>Reinforces the discharge plan, assesses patient retention of information, addresses patient questions and concerns, assesses medication therapy adherence 3, 5, 6, 7, 8, 9, 10, 14, 16, 18, 19, 21, 24, 26, 31, 34, 35, 36, 38, 39</td>
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<tr>
<td>Medication Therapy Management (MTM)</td>
<td>Improves medication use, enhances healthcare professionals’ collaboration, enhances communication between patients and their healthcare team, encourages patient involvement 2, 28</td>
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<tr>
<td>Comprehensive medication history</td>
<td>Assists with obtaining high quality, complete, and accurate medication history 2, 8, 11, 12, 13, 15, 17, 22, 23, 25, 32, 37</td>
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**Best Practice References:**


