

Medication reconciliation using an e-health tool

No registrations found.

Ethical review	Positive opinion
Status	Pending
Health condition type	-
Study type	Interventional

Summary

ID

NL-OMON26560

Source

Nationaal Trial Register

Health condition

Medication reconciliation
E-health

Medicatieverificatie

Sponsors and support

Primary sponsor: Leids Universitair Medisch Centrum

Source(s) of monetary or material Support: initiator = sponsor

Intervention

Outcome measures

Primary outcome

The mean number of medication changes compared to the LSP medication overview that is corrected through medication reconciliation in the group using the e-health medication reconciliation compared to the usual care group.

Secondary outcome

- The time investment per patient by a pharmacy technician to be able to calculate if the new method is more time efficient.
- For the patient group that was randomized to the e-health medication reconciliation (eMR) result of the MR will be compared to the result of the eMR. This is a secondary endpoint to be able to optimize the eMR.
- The following patient characteristics are collected to evaluate the differences in different patients in the effectiveness of the e-health medication reconciliation. Age, gender, medical specialty and comorbidities, and computer experience.
- Patient satisfaction about the eMR and regular MR is evaluated to assess if the eMR is easy to understand and acceptable to perform and to evaluate if patients prefer eMR above MR.

Study description

Background summary

Medication reconciliation is required in each transition point of care. In the majority of Dutch hospitals medication reconciliation in the preoperative stage is performed by pharmacy technicians. However performing medication reconciliation in every preoperative patient is a very time consuming process. E-health may support patients to perform medication reconciliation by themselves without the need for pharmacy technicians. An application developed by Zorgdoc is already implemented in current practice of the St. Maartenskliniek, Nijmegen, to perform medication reconciliation. However, no data are available about the performance of the Zorgdoc application compared to the pharmacy technician. Therefore this study will investigate if medication reconciliation by the e-health application is as good as a standardized medication reconciliation by a pharmacy technician.

Study objective

Medication reconciliation using an e-health application is as good as structured medication reconciliation by a pharmacy technician

Study design

juli 2018 - februari 2019 inclusie

Intervention

Medication reconciliation using an e-health application to confirm current medication use

Contacts

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Eligibility criteria

Inclusion criteria

- Patient has an appointment at the preoperative screening
- Patient uses one or more medications
- Patient gives informed consent to use data from the patients file anonymously
- Patient is able to use an e-health application to perform medication reconciliation (has a computer or tablet)

Exclusion criteria

Patients who are not able to communicate in Dutch are excluded for this is necessary to fill in the E-Health application.

Study design

Design

Study type:	Interventional
Intervention model:	Parallel
Allocation:	Randomized controlled trial
Masking:	Open (masking not used)
Control:	Active

Recruitment

NL	
Recruitment status:	Pending
Start date (anticipated):	23-07-2018
Enrollment:	1311
Type:	Anticipated

Ethics review

Positive opinion	
Date:	12-07-2018
Application type:	First submission

Study registrations

Followed up by the following (possibly more current) registration

No registrations found.

Other (possibly less up-to-date) registrations in this register

No registrations found.

In other registers

Register	ID
NTR-new	NL7186

Register

NTR-old

Other

ID

NTR7377

: LUMCP18.045

Study results