

LTHTR Hospital Discharge Medications

Prescribing tip for information

Below is an example of a hospital discharge medication page to explain the codes used, further information included and tips that may be useful when interpreting discharge medication lists.

Medication Codes

- (N) New medication started in hospital or on discharge
- (A) Adjusted dose of an existing medication
- (U) Unchanged from admission

Quantity Codes

(HS) Hospital Supply - dispensed whilst in hospital and sufficient supply remains for discharge (7 day minimum) (DS) Dispensary Supply - supplied on discharge (POD) Patient's Own Drugs

Discharge Prescription								
С	Medication	Dose	Quantity Supplied	Directions	Special Instructions	Date Supplied		
N	Amisulpride	50 mg tablet oral	28 HS	daily scheduled at 0800		No date recorded - Ba	Validating	Validating
N	Co-Trimoxazole (CRITICAL MED)	960 mg tablet oral	28 HS	two times per day scheduled at 0800/2200 stop at Tuesday, 24 August 2021 1200		No date recorded - Ba	\	Pharmacist
N	famOTidine	40 mg tablet oral	28 HS	two times per day scheduled at 0800/2200		No date recorded - Ba		
N	Senna	15 mg tablet oral	20 **DS**	daily scheduled at 2200		No date recorded - Ba		
U	amLODipine	10 mg tablet oral		daily scheduled at 0800	at deafways	No date recorded Ba	Spe	Special
U	Carbocisteine	375 mg capsule oral		two times per day scheduled at 0800/2200	at deafways	- Bai		Instructions
U	Ferrous Sulfate	200 mg tablet oral		daily scheduled at 0800	RESTART ONCE BOWELS OPENED	No date recorded		

Dose:

This will be quoted as the total dose rather than tablet quantity / strength. (e.g. Paracetamol 1g rather than 2 x 500mg tablets)

Directions:

This section will contain information on dosing frequency and stop dates for medication. (if relevant, e.g. see Co-Trimoxazole)

Special Instructions:

This is a 'free type' box available to the validating Pharmacist and can include further information on start / stop dates or may include information regarding supply of medication. In this example the information indicates that the pharmacy staff have confirmed that the unchanged medication is available at the patient's care home and includes a note to restart Ferrous Sulfate once the patient has opened their bowels.

Validating Pharmacist:

The final box will contain a staff member's name, if pharmacy validated, this will be the ward Pharmacist who has clinically checked that the medications are suitable for discharge and can be a useful contact for discharge medication queries or clarification. If the discharge is authorised without requiring pharmacy validation the name will be that of the discharging Doctor.

To contact the Medicines Optimisation Team please phone 01772 214302

