**Project Title:** Day Surgery Anticoagulant Antiplatelet Medication Reconciliation

**Members:** Janet Piatek, RN and Sandra Torrisi, BS, RN, Maureen MacDonald RN, Cynthia Engel, RN and Jeanne Lanchester, Med, RN.

**Background Information**
- There was an informal method in place to remind physicians to reorder preoperative patient anticoagulant medications
- No formal form in chart signed by physicians indicating timeline to restart medication
- No formal discharge form signed by physicians for patient to take home
- Limited anticoagulant medications were being reviewed

**Objectives**
- To develop a system that would remind physicians to reorder preoperative anticoagulation and antiplatelet medications to conform with National Patient Safety Goals
- To provide patients with a clear understanding of when and how to resume all preoperative anticoagulation medications

**Implementation**
- Multi-disciplinary team was created including nurses, physicians, and pharmacists
- A clear and concise anticoagulant medication template was developed
- Medications are reviewed the day of surgery, template is placed in orders by admitting nurse, sticker is placed in orders alerting physician to fill out template
- Post operative day surgery nurse reviews physicians orders with patient

**Successful Practice Identified**
- Anticoagulation medication reconciliation is now physician driven
- All anticoagulant and antiplatelet medications are included

**Positive outcome achieved**
- Multidisciplinary team collaborated to achieve medication reconciliation in post operative dsu patients
- Patients are discharged safely with specific instructions about when to resume preoperative anti coag medications
- Physicians are informed of the need to reorder preoperative anticoagulant therapy prior to discharge

**Implications for the Perianesthesia Nurses**
- Improving patient safety through continuous and constant communication in the day surgery arena by establishing a systematic approach to reconciling discharge medications