1. Use supplemental sources to compile patient’s medication list before the patient’s visit
   a. Include the medications name, formulation, dose, route, and frequency

2. Remind the patient to bring all of their medications – Utilize My Med Bags

3. Use open-ended questions during the visit:
   a. What medications are you currently taking?
   b. Don’t forget to ask about the use of:
      - Topical products, patches, eye drops, nebulizers, inhalers, injectables
      - Over-the-counter medications
      - Vitamins
      - Herbs
      - Health Supplements
      - Substance use and frequency
        - Alcohol, tobacco, illicit products
      - Medications prescribed by other providers
      - Recent changes to medications
        - Starting new medications
        - Stopped medications
        - Changes to medication (dose, frequency)
      - Use of multiple pharmacies

4. For each medication ask the patient:
   a. What do you take this medication for?
   b. When do you take this medication?
   c. How much medication do you take each time?
   d. How often do you miss a dose?

5. Clarify the medication instructions
   a. Use the teach back method to confirm the patient understood

6. Address discrepancies:
   a. Duplicate therapy
   b. Duplicate or missing indication
   c. Changes in dose/route/frequency
   d. Dose or drug formulation changes
   e. Therapeutic interchanges
   f. Medications no longer taking
   g. Medications currently taking but not listed prior

7. Identify barriers to managing medication use:
   a. Side effects, access, cost, adherence problems, food/drug interactions, drug/drug interactions, etc.

8. Document the review:
   a. When it was performed
   b. Document any patient-medication problems identified

9. Update medication list
   a. Update patient record and upload to EHR
   b. Provide updated list to patient
   c. Share with other health care team members

* Remember medication reconciliation can help satisfy requirements for billable services and quality measures