



Validation of High Risk Criteria in Medication Reconciliation in Major Orthopaedic Surgery: A Delphi Study

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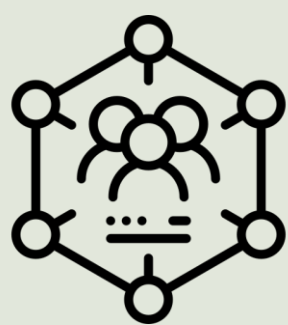
INTRODUCTION & OBJECTIVES

Medication reconciliation (MR) is relevant in transitional care, however, given the limited resources, it is necessary to identify the patients who can benefit the most. Our aim was to validate the criteria that identify patients at high risk of experience medication errors and error-related adverse events undergoing major orthopedic surgery.

METHODS



Delphi technique: questionnaire in 3 phases (April-June 2023)



10 experts from 4 Faculties of Pharmacy and Medicine.



Inclusion criteria previously defined by a multidisciplinary team, based on the probability of risk of the adverse event to happen.



Each expert rated the criteria according to a 5-point Likert scale.

- **Consensus 1st round: average of Likert scale ≥ 4 (inclusion) or < 2 (exclusion).**

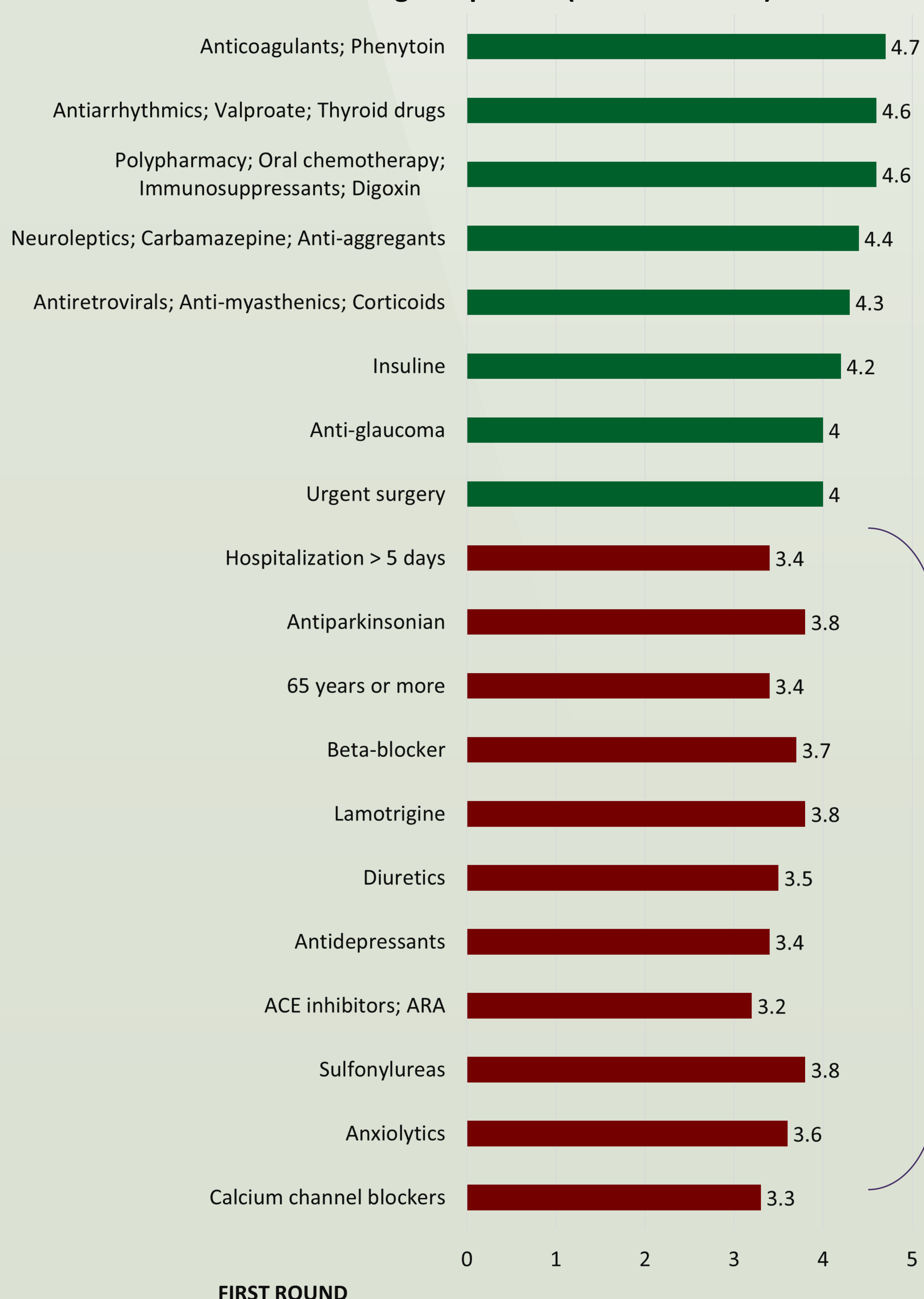
- **Consensus 2nd/3rd round: $\geq 50\%$ of the responses ≥ 4 (inclusion) or < 2 (exclusion).**

✓ It was possible to suggest the inclusion of new criteria.

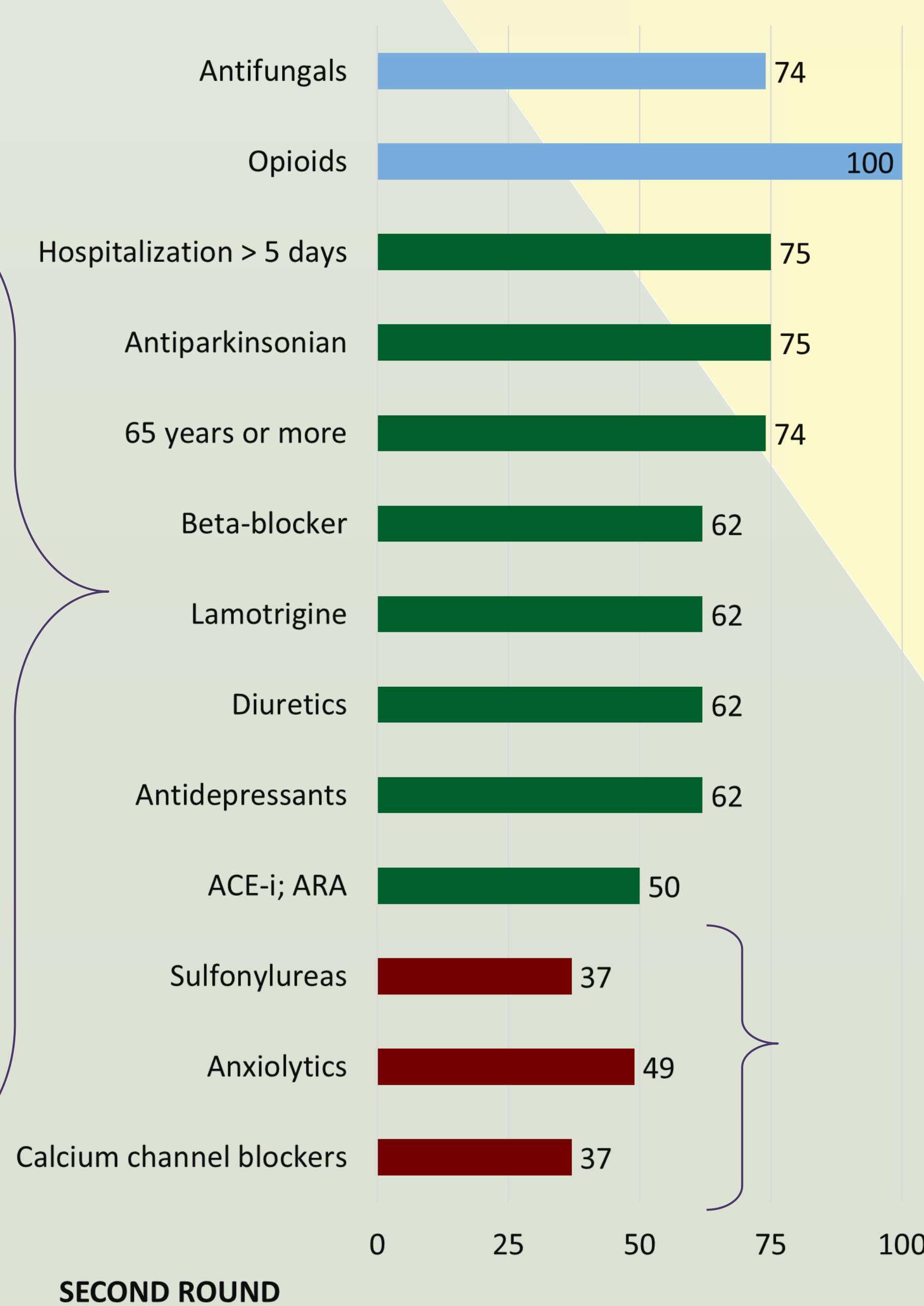
RESULTS

10 experts answered to first round, 8 to second and 6 to third (final) round:

Average responses (Likert scale 1-5)



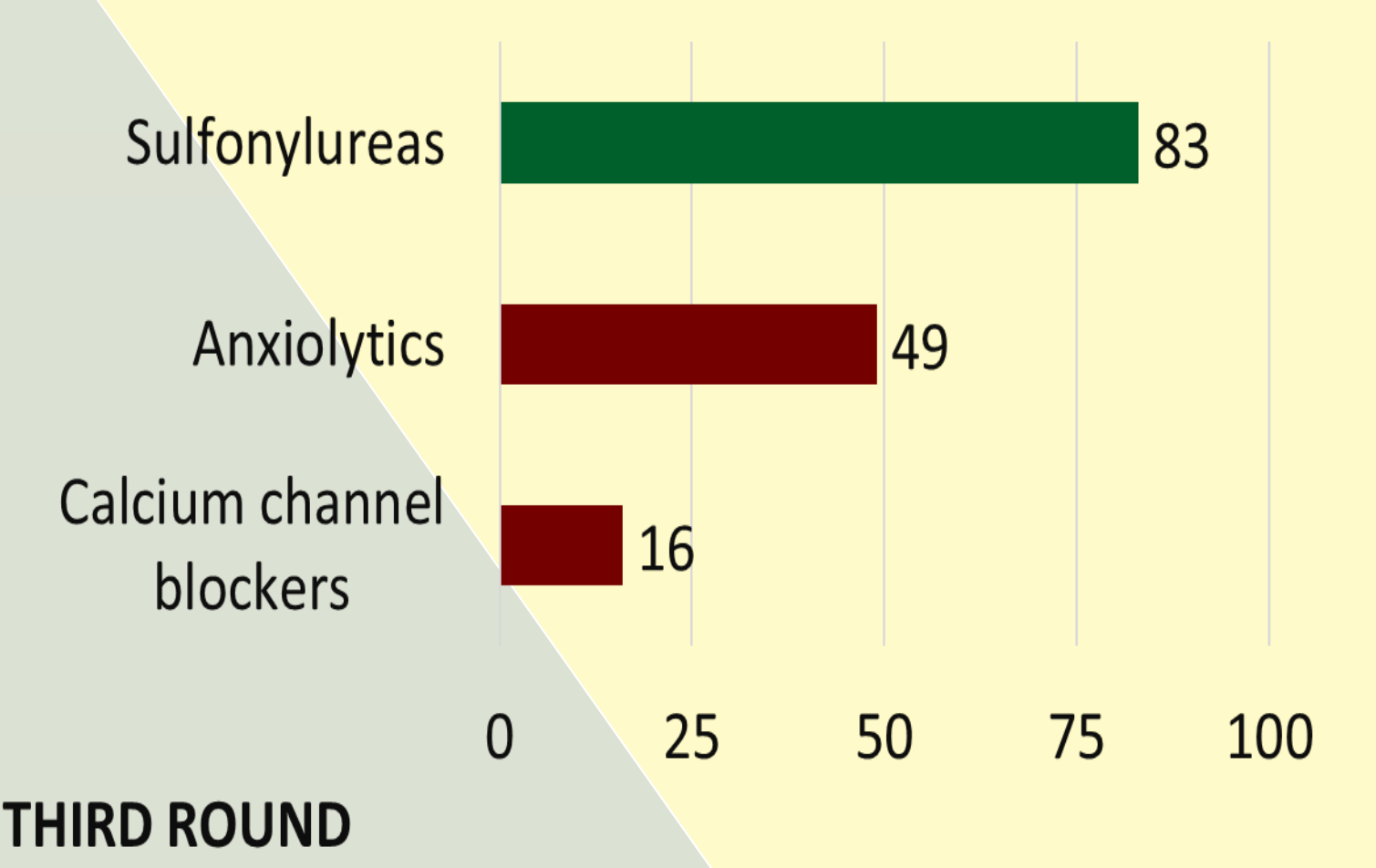
Rate (%) of responses ≥ 4



■ Included
■ Not included
■ New criteria (included)



Rate (%) of responses ≥ 4



CONCLUSIONS

We developed and validated a list of 29 criteria to identify patients at high risk of experience medication-related adverse events undergoing major orthopedic surgery. These criteria may help improve human resource management for clinical pharmacy activities by prioritizing those who would benefit the most. This methodology could be replicated in other clinical areas.

ACKNOWLEDGMENTS / REFERENCES / CONTACT

We would like to thank all the Delphi expert panel for the contribution to the study.
Hasson F, Keeney S, McKenna H. Research guidelines for the Delphi survey technique. J Adv Nurs. 2000;32:4

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