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DUPLICATION OF MEDICINE
PRESCRIBED FOR PATIENTS WITH
MULTIPLE APPOINTMENTS FROM
DIFFERENT CLINICS, HOSPITAL
UNIVERSITY SAINS MALAYSIA (HUSM)

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ABSTRACT

Background:

HUSM serves as a community hospital to the public in which patients may be admitted for hospitalisation in subject to in-patient management or treated as outpatient in various specialist clinics such as cardiology clinic, diabetic clinic, oncology clinic, psychiatric clinic and more. Throughout the years, it was noted that patient with several co-morbidities or illnesses, may receive identical prescribed medicine following appointments at different specialist clinics.

Objective:

Thus, this study evaluated the problems of duplication in prescribing and estimated the total cost aroused from double dispensing and finally proposed measures in waste reduction. In addition, patient awareness on the consequences of duplication was also raised.

Methodology:

In this study, sampling of data was conducted randomly according to the inclusion and exclusion criteria. Patient's complete medical history was reviewed and recorded via Duplication Medicine Review form. The data was calculated, tabulated and merged by using SPSS and Microsoft Excel.

Result and discussion:

The sampling data showed that 28 patients (52%) had duplicated prescription of the identical medicine. Further analysis revealed that malay male aged from 56-65 who followed up in cardiology clinic were dominating these duplication. Meanwhile, the total cost due to duplicated prescription was found to be RM 8985.04 with Ticlopidine tablet as the most common type of duplicated drug and Alfuzosin tablet as the highest cost of

CHAPTER 1

INTRODUCTION

In the modern era of medical practice, the management of outpatient in forms of appointment or following-up sessions has diversified into a more patient-centred setting with different branches. Patients are no longer subjected to a sole general practitioner. Nevertheless, consultation of respective medical specialists is much essential in managing patient's health. Similar to other hospital settings; in HUSM, patient presents with common ailments would receive general treatment in Family Medicine. However, patient presents with several morbidities would be referred to several respective specialist clinic (Figure 1). For example, patient previously diagnosed with cardiac diseases and diabetes would attend appointment in both cardiology clinic and diabetic clinic concurrently.

Owing to the high rate of co-morbidity in Malaysian health status, interventions from different field of medicine are crucial to ensure better and sustainable health quality of patient. Multiple appointment or follow-up sessions in different specialty are necessary. However, a major problem was indentified through this routine. Duplication of identical medicine prescribed by different medical specialist has become more common. To illustrate, a hypertensive and diabetic patient may correspondingly receive prescribed antihypertensive medication from both cardiology and diabetic clinic.

Several common reasons of duplicated prescribing of identical drug are failure to trace of patient's medication history, prescriber prescribes medications which are beyond their expertise and lacking of communication between doctors. Nonetheless, duplication of identical medicine may lead so consequences. Patient might develop drug over-dosage and toxicity (taking two identical medicines), waste of the available drug stock and money and excess medicine supplied may not be discarded appropriately. Therefore, this research paper highlighted the major problems of duplication of identical medicines and proposed several measures to reduce this problem.