



# Med Safety Signal

## Risks in medication safety reported by LTC Homes in Ontario

Volume 2 • Issue 3 • May 2023

### Problems with Conditional Medication Orders

**Reported Incident** (details are modified to ensure confidentiality of the home and reporter)

A resident was scheduled to undergo dialysis 3 times a week at a hospital clinic. Midodrine, a medication that increases blood pressure, was written as a conditional order, only to be given when departing the home, as part of the time-specific pre-dialysis medication regimen. To ensure the midodrine was available when needed, it was routinely packaged in the morning medication strip, with instructions in the electronic medication administration record (eMAR) to administer the medication when the resident was leaving for the dialysis clinic.

Because of uncertainty about transportation times, the timing of dialysis was variable from one session to another. As a result, midodrine was sometimes administered to the resident as part of their regular morning medications, not at the time of departure for the dialysis clinic. This error frequently led to the resident having to take a second dose of midodrine, lengthy delays once the resident was in the dialysis clinic, or incomplete dialysis sessions.

**Disclaimer: ISMP Canada staff determined the following key contributing factors and considerations for improvement. It is the responsibility of medication safety leaders in long-term care to determine what, if any, actions for improvement are needed in their medication management processes.**

#### Key Contributing Factors:

- Conditional orders are orders that depend upon another factor; for example, a person might need to take a medication only when having dental work. These types of orders can be susceptible to error.
- Packaging the midodrine in the morning medication strip served as a reminder to staff that the medication was required and was available, but it also increased the likelihood of having the medication being given erroneously during morning medication passes.
- No systematic process was in place to ensure that residents leaving for appointments had taken any required preclinic medications.

#### Considerations for Improvement:

- Ensure that staff members are aware of the risk of errors that may occur with conditional orders.
- Highlight conditional orders in MARs and eMARs using colours, symbols, or other suitable methods.
- Provide medications used for conditional orders separately from regular medications, for example, in separate medication strips or packaging.
  - Ensure the packaging is clearly labelled with instructions and conditions for use.
- Create a systematic “check-out” process or checklist for residents who are departing for appointments, both to ensure they have received any needed medications and to ensure they have pertinent information, such as a medication list or recent laboratory results, to be delivered to health care professionals during their appointment.

Report an Incident

<https://ismpcanada.ca/report/>