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Effective communication: How do I record MI enquiries in clinical records?

Clinical (or medical) records are legal documents which include a variety of information about each patient. They document contributions made by the health care team involved in caring for the patient during their admission or care. Making entries in clinical records is endorsed by many national and international pharmacy organisations including the SHPA, and although pharmacists believe that writing in clinical records is important, for many reasons, many do not (James, 2013). Deciding what to document and how to do this appropriately can be challenging (refer to [Further Reading](#) material for more information about writing in clinical records).

As for other clinical pharmacists, Medicines Information (MI) pharmacists guide safe, effective and efficient use of medicines by providing tailored clinical advice about the care of individual patients. Whilst some MI services respond directly to patients, many MI pharmacists may be a step back from frontline care i.e. providing this information in response to an enquiry about a specific patient from another health professional. Responses are provided verbally or in writing to the enquirer (see [SHPA EMIT Foundation Module: Communication](#) for further details). Responses are also documented internally by the MI service in a systematic manner for future reference and reporting.

WHICH ENQUIRIES?

Answers to enquiries raised by the medical team are a good example of what can be recorded in clinical records. This supports the continuity of care of patients, improving quality of care. However, it is not feasible or necessary to document every enquiry. It can be particularly useful for complex patients or

presentations, depending on disease states, complicated dosing strategies, or when multiple medical teams are involved. Entries should not replace usual modes of communication – they may be used to formalise or reinforce discussions.

Some teams may request that enquiries are documented this way. Where the enquiry has been complex, consider confirming that the enquirer or team is aware of your intention prior to documenting.

HOW TO RECORD MI RESPONSES IN CLINICAL RECORDS?

- **Decide where to record your response.** Most hospitals have transferred from paper to electronic clinical records or systems for clinical applications. You may need to undertake appropriate training, gain access to particular systems and approval to do so.
- **Decide which format you will use.** Many use the [IS\(O\)BAR](#) or SOAP template (or modifications of these) as a guide.

ISOBAR: Introduction/Identify Situation (Observations) Background Assessment/Agreed plan Recommendations/Read back

SOAP: Subjective Objective Assessment Plan

- **Add entry in a timely manner.**
- **Construct your entry.** You are responsible for the content and should be aware of all relevant patient background information. Make your entry as concise as possible. Assess the need to include detailed technical content and references.

This information should be used in conjunction with local policy for mandatory documentation standards and internal processes. Advice for how to document MI responses in clinical records is provided below:

Key points for MI entries in clinical records

- Confirm patient's details are correct
- Locate specific episode of care in record (*it may be inpatient or outpatient*)
- Indicate note is from Pharmacy/Medicines Information
- Include your full name and contact details (*and date and time if necessary*)
- Include full name of health professional with whom the issue has been discussed
- Be objective, concise and accurate
- Use generic medicine names
- Use only accepted abbreviations (*refer to [ACSQHC Recommendations for terminology, abbreviations and symbols used in medicines documentation](#) and local policy*)
- Write professionally (*no spelling/grammatical errors*) and non-judgementally
- Refer the reader to your MI service for further details or references if required

Further reading:

- [Adam, et al. Documentation in the Patient's Medical Record by Clinical Pharmacists in a Canadian University Teaching Hospital. Can J Hosp Pharm. 2019;72\(3\):194-201.](#)
- [ASHP Guidelines on documenting pharmaceutical care in patient medical records. Am J Health-Sys Pharm 2003;60:705-7](#)
- [James. How to communicate effectively in patients' medical notes. Clinical Pharmacist 2013;5:82](#)
- PharmacyJoe. How to write a pharmacy progress note. Available from <https://www.pharmacyjoe.com/>
- [Pullinger and Franklin. Pharmacists' documentation in patients' hospital health records: issues and educational implications. IJPP 2010;18:108-115](#)
- SA Pharmacy Clinical Educators group. Good practice guidance for documenting in medical records. 2016
- [SHPA. Australian Medicines Information Procedure Manual. \(2017\)](#)
- SHPA. Electronic Medicines Information Training (EMIT). Available from <https://onlinecpd.shpa.org.au/>
- [Zierler-Brown et al. Clinical documentation for patient care: models, concepts, and liability considerations for pharmacists. Am J Health Syst Pharm. 2007;64\(17\):1851-1858. doi:10.2146/ajhp060682](#)
- [Zimmer et al. Departmental Initiative to Improve Documentation in the Medical Record by Acute Care Pharmacists. Can J Hosp Pharm. 2019;72\(2\):151-154.](#)

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MI Q&A is an initiative of the Medicines Information Leadership Committee of the Society of Hospital Pharmacists of Australia. MI Q&A aims to present concise, factual information on issues of current interest in therapeutics, medicine safety and cost-effective use of medications. The topics presented are based on frequently encountered medicines information requests made to Medicines Information centres and/or matters of current clinical importance. Note that any treatment decisions should be made with careful consideration of the individual clinical circumstances of each patient. Comments, contributions or suggestions are welcome. Please join the SHPA Medicines Information stream at: <https://www.shpa.org.au/specialty-practice> or email specialtypractice@shpa.org.au