



Patient Identification Verification (Hospital)



Patient Identification Verification

Health Professions Act (HPA) and Pharmacy Operations and Drug Scheduling Act (PODSA) bylaws require that the identity of a patient is confirmed before providing pharmacy services.

As a pharmacy professional practicing in the hospital, it is your duty and responsibility to make sure the *right person* gets the *right dose* of the *right drug* at the *right time*.

The *very first step* in providing pharmacy care is to ensure you have the *right person*. Without correctly identifying the patient, the remaining steps in patient care and patient safety can be compromised.

Unless dispensing to staff, outpatients, or the general public, you must identify patients using *two* person-specific identifiers before providing any pharmacy services to the patient. When preparing and dispensing medications, these identifiers are typically found on person-specific labels, dispensing or checking record labels, refill lists, written orders and addressographs.

<u>Note</u>: Any medications dispensed to staff, outpatients, or the general public must be labelled and dispensed according to <u>HPA Bylaws - Community Pharmacy Standards of Practice</u>, this includes following Community Pharmacy patient identification requirements (<u>PPP-54</u>).

Acceptable Person-Specific Identifiers

- Patient/resident's full name
- Home address, if confirmed by the patient/resident or family
- Date of birth
- Personal identification number (e.g. hospital account number, medical record number), or
- An accurate photograph.

Not Acceptable Person-Specific Identifiers

- A patient/resident's room or bed number
- A home address that has not been confirmed with the patient or resident or his/her family, or
- Facial recognition in acute-care settings



In long-term or continuing care settings where the pharmacy professional is already familiar with the patient or resident, facial recognition is also an acceptable person-specific identifier. However, facial recognition cannot be used as a person-specific identifier in hospital acute or subacute care settings.

In addition to identifying patients for the purpose of dispensing a drug, proper identification of both the patient (using *two* person-specific identifiers) and the healthcare provider are required when discussing a patient's medical information. This ensures you are talking about the right patient with the right provider.

The identity of the patient must be confirmed before providing pharmacy services including but not limited to:

- Establishing a patient record
- Updating a patient's clinical information
- Providing a printout of a patient record
- Viewing a patient record
- Answering questions regarding the existence and content of a patient record
- Correcting information on a patient record
- Disclosing relevant patient record information to another registrant for the purposes of dispensing or monitoring.

Confirming the patient's identity can be done through activities such as viewing a patient identification wristband, addressograph or verbally confirming identifiers with a patient.

Who can complete this activity?

| | Pharmacist | Pharmacy Technician |
|----------------|------------|---------------------|
| Verify Patient | V | V |
| Identification | | • |

For more information, please refer to: Professional Practice Policy-54, Professional Practice Policy-75, HPA Bylaws Schedule F Part 2 section 3.2 and 4(5), and PODSA Bylaws section 36.

Why is this a fundamental standard?

Case in point:

A 74-year old patient admitted to a hospital in BC was inadvertently given three extended-release morphine pills meant for another patient. Because the patient's identity was not properly verified prior to administration, this ultimately led to patient harm where they ended up in a comatose state for three days.

https://www.princegeorgecitizen.com/news/local-news/wrong-meds-blamed-for-man-s-coma-1.17873969



Being vigilant by using at least 2 person-specific identifiers prior to providing a pharmacy service is a fundamental principle to ensure that the *right patient* gets the *right drug*.