

APPROPRIATE PRESCRIBING

AGS Geriatric Evaluation and Management Tools (Geriatrics E&M Tools) support clinicians and systems that are caring for older adults with common geriatric conditions.

From the AMERICAN GERIATRICS SOCIETY

Geriatrics Evaluation & Management Tools

SCREENING

- Perform Medication Review at First Visit and Annually

MEDICATION REVIEW

AT FIRST VISIT AND ANNUALLY

- Perform full medications review, including:
 - Medications from other providers
 - Over-the-counter medications
 - Supplements
 - Herbal preparations
- Complete medications history, including:
 - Prior treatments and responses
 - Allergies and adverse reactions
 - Drug-drug interactions
 - Drug-disease interactions
 - Confirm how each medication is actually being taken compared to medication bottle's directions and dosage
 - Review for potentially inappropriate medications using Beers List and determine if another medication can be used
 - Assess the patient's ability to understand and comply with the medication regimen using the Drug Regimen Unassisted Grading Scale (DRUGS) tool

BEFORE DECIDING TO PRESCRIBE A MEDICATION

- Avoid prescribing before a diagnosis is made
- Consider nonpharmacologic approaches
- Consider whether medication is being used to treat adverse events of another medication
- Identify therapeutic endpoints
- Identify how endpoints will be assessed
- Ask whether therapeutic dose has been reached before switching to a new medication
- Consider whether benefits outweigh the risks of medication:
 - Are there potential drug-drug or drug-disease interactions?
 - Is this medication the least expensive comparable form?

ONCE DECISION TO PRESCRIBE IS MADE

- Consider whether one medication can be used to treat multiple conditions
- Use lowest possible starting dose in most circumstances
- Identify administration times that will be practical for patient and/or caregiver
- Ensure patient and caregiver understand:
 - What the medication is for
 - How to take the medication
 - How long to take the medication
 - When the medication should start to work
 - Possible adverse events and what to do if they occur
- Always review any changes with the patient and caregiver; provide the changes in writing
- Use e-prescribing, if available, to reduce risk of transcription and medication errors

DISCONTINUING MEDICATIONS

- Simplify the medication regimen; use the fewest number of medications and doses per day
- Medications that can usually be stopped are those:
 - Without identifiable indication; confer with other prescribers if needed
 - That do not seem to have had the intended response
 - That are no longer needed
 - With duplicate therapeutic, pharmacologic, or adverse event profiles
 - Not being taken, and adherence is not critical
 - See complete CMS guidance on unnecessary drugs in the nursing home at www.cms.hhs.gov/transmittals/downloads/R22SOMA.pdf [see section 483.25(l) on pages 347–427]