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### Supplementary Material

#### **Medication reconciliation and discharge communication from hospital to general practice: a quantitative analysis**

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## Supplementary Material

**Table S1.** Quantitative analysis data collection tool based on ‘National Guidelines for On-Screen Presentation of Discharge Summaries’.

<b>Data collection tool</b>	
1. Demographics	
(a) First nations status	(a) Free text response
(b) Age	(b) Number range
(c) Language	(c) Free text response
(d) Country of birth	(d) Free text response
(e) Home Postcode	(e) Postcode
2. Ward	Free text response
3. Team	Free text response
4. Home medications entered in ieMR on admission	Yes No
5. Discharge medication reconciliation completed by treating team/Medical Officer	Yes No
6. Discharge medication record completed by Pharmacist	Yes No
7. Fields in the discharge summary completed (Audited against ‘National Guidelines for On-Screen Presentation of Discharge Summaries’)	Yes No
(a) Patient details	
(b) Hospital details	
(c) Author	
(d) Presentation details	
(e) Problems and diagnoses present	
(f) Procedures	
(g) Clinical summary (Inpatient Clinical Management)	
(h) Allergies/adverse reactions	

<p>(i) Medications on admission, medications on discharge, medications ceased</p> <p>(j) Alerts</p> <p>(k) Recommendations to GP</p> <p>(l) Follow-up Appointments</p> <p>(m) Information provided to the patient</p> <p>(n) Investigations results</p> <p>(o) Recipients (GP listed as a recipient of the Discharge Summary)</p>	
8. Discharge summary not completed within 30 days after discharge	Yes No
9. Discharge summary not completed within 90 days after discharge	Yes No
10. Patient discharged against medical advice.	Yes No
11. Time from discharge, to discharge summary completion	Number range (days)