Pharmacist-led medicine charting has been shown to reduce the average duration of hospital stays from 4.7 days to 4.2 days in Australian research published in the *British Journal of Clinical Pharmacology*¹.

The 12 month study of 8,648 general medical patients in eight Victorian hospitals studied a collaborative model of medicine charting between pharmacist and doctors.

The model involved a pharmacist taking a medicine history, conducting a blood clot risk assessment and then having a face-to-face discussion with the admitting doctor before agreeing on a medicine management plan. This meant medicine problems were found and fixed on-the-spot at the point of admission, rather than placing the patient at risk for hours or days during their hospital stay.

The results found the proportion of patients with at least one medicine problem dropped from 66% to 3.6%. Reducing exposure to medicine-problems at admission was likely a major contributor to the reduced average duration of admission.

"Medicine safety is in the DNA of pharmacists. It is not surprising that when hospital pharmacists are more involved in taking a medicine history and charting medicines that patients are safer, and that this leads to shorter hospital stays." Pharmaceutical Society of Australia National President A/Prof Chris Freeman said

"On top of the obvious benefit of patients being safer and getting home sooner, there are clear financial benefits to our stretched health system from patients experiencing shorter hospital stays which stem from higher-quality episodes of care.

"Models of care like this pharmacist-led medicines charting initiative need to become normal care for all patients in all hospitals if we are serious about medicine safety. Whatever Australian hospital a patient is in, they deserve to receive access to high quality pharmacist care like this."

"We welcome this research as it adds further weight to PSA’s call in *Pharmacists in 2023*² for hospital pharmacists to be available at comparable levels regardless of location, timing or nature of stay to make patients in Australian hospitals safer.”

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