

Discharge Medicines Service (DMS) data collection sheet

PharmOutcomes are creating an electronic version – until this is available please use this sheet to capture the necessary data to claim for DMS. This data will need to be submitted via MYS with monthly claim.



Month and Year of data collection:	
Date received:	
Patient NHS number:	
NHS trust ODS code:	
Was stage 1 provided: Yes	Yes
Issues identified: Yes/ No	
Yes: Medicine discrepancy Specific request in referral Other	
Issue discussed with: GP/ Hosp/ Primary care pharmacist/ other	
Was there a Rx to intercept? Yes/ No	
Was stage 2 provided: Yes/ No	
By who: Pharmacist/ Technician	
No, why not: Deceased/ Readmitted to hosp/ Consent withdrawn/ Provided by other pharmacy/ Other	
Were issues identified? No/ Yes	
Yes, what? <ul style="list-style-type: none"> Medicines stopped on Rx Wrong med issued Wrong strength, dose, form Missing med New med started by GP post discharge Other 	
Issues discussed with: GP/ Hosp/ Primary care pharmacist/ other	
Was stage 3 provided? No/ Yes	
By who: Pharmacist/ Technician	
How: telephone/ video/ in pharmacy/ home visit	
No, why not? Readmitted to hospital/ Deceased/ Chosen to use another pharmacy/ Uncontactable after several attempts/ Consent withdrawn/ Other	
Outcomes: All changes understood? Advice provided and questions answered? Referral to: GP/ Hosp/ Primary care pharmacist/ other Other service provided (select all that apply from the list): <ul style="list-style-type: none"> Disposal of unwanted meds New Medicine Service Healthy lifestyle advice Other 	