Discretionary Revisions:

Medication errors are a leading cause of patient injury and medication reconciliation is a strategy known to decrease the rate of medication errors. In 2007, the Dutch government launched a patient safety program in hospitals, which included a bundle intervention concerning medication reconciliation. The aim of this study was to gain an understanding of the barriers and facilitators that influence the implementation of the mandated bundle intervention. This is an important qualitative research study as implementation of this patient safety program has yet to be completed. Lessons learned can be applied to improve the adoption of the medication reconciliation bundle intervention throughout Dutch hospitals.

1. The investigators conducted 20 interviews (until saturation was reached) with physicians, nurses, policy makers, researchers, and pharmacists. The authors invited various clinicians and nurses from hospital departments in the process of implementing the medication reconciliation bundle to participate. However, it was unclear why and how the policy maker and researcher were chosen to participate. The investigators did not discuss if they considered inviting patients to participate in the research study. Including the patients/caregivers’ perspective would have added value.

2. A theoretical framework based on Cabana and Grol was used to classify barriers and facilitators. There was no information provided about the data collection process. Unclear if the data collection process was iterative and emerging. The semi-structured interview guide was not discussed. Additionally, the reader could not assess the methodological rigor of assessing the validity of the findings.

3. The results section was very thorough and comprehensive. Barriers and drivers were identified for each level of the framework. Quotes were provided with interpretation. As a result this section was very long. Table 3 summarized the barriers and drivers classified by theoretical framework succinctly.

4. Discussion and conclusion were relevant and presented in an unbiased manner. Table 4 presents suggested strategies for implementation but limited discussion of these in the body of the article.
Level of interest: An article whose findings are important to those with closely related research interests

Quality of written English: Acceptable

Statistical review: No, the manuscript does not need to be seen by a statistician.