Reviewer’s report

Title: Impact of Pharmacy-Led Medication Reconciliation on Admission to Internal Medicine Service: Experience in Two Tertiary Care Teaching Hospitals

Version: 2 Date: 17 Feb 2019

Reviewer: Amy Shaver

Reviewer's report:

The authors present an interesting paper that could help to inform future standardized practice in Lebanon with application of the use of student pharmacists as pharmacist extenders applicable worldwide.

A few areas if expanded would increase the robustness of the paper. My comments and questions are below.

1) Pilot studies are run so as to gather the necessary information to perform a larger study. Please provide some details about whether the sites involved plan on implementing larger studies or the chance of implementing a more pharmacist and student pharmacist driven medication reconciliation process. In other words, how has this study helped to influence policy at the study sites, and if not what more could be done to implement a standardized process?

2) Could the authors discuss the reasons for 25.6% of the recommendations being rejected (line 274) or if one type of recommendation was rejected more than another. The reasons that were given for the rejection, if known, may be useful for other practitioners. Further, the fact that 64.6% of recommendations were accepted should be more greatly emphasized in the discussion as it bolsters the argument of expanding the utilization of pharmacists and student pharmacists in the medication reconciliation process.

3) Would it be possible to provide the unadjusted odds ratios (see Table 4) in supplemental materials?
4) Although the authors state there is no PDMP in Lebanon, please give a reason as to why outpatient pharmacies were not contacted in completing the BPMH (lines 293-295)?

5) The authors mention an ADE from an omitted medication leading to hospitalization (lines 306-307); please elaborate on this concept and if possible provide an example from the study population. Though it is a possibility such an ADE could have resulted from previously poor medication reconciliations, it cannot be the result of med recs occurring on day one of said hospitalization. The authors could make the case for the need for future study on how having a BPMH at the point of transition from inpatient to the outpatient setting may aid in avoiding such ADEs.

6) The discussion lines 308-328 is currently disjointed and is in need of better organization. The authors appear to be emphasizing that although many discrepancies were not judged to be clinically significant over one-third were including some involving narrow therapeutic index medications such as NOACs. This point is somewhat lost in jumping from low clinical significance (line 308) to high (line 309) to low (line 314) to clinically significant again (line 316) and on to narrow TI drug discussion (318-328).

7) The authors list the pharmacist as the medication expert and indicate that they should always be involved in the medication reconciliation process. Do they have any plans on comparing this process with the 'usual care' process at each site? (lines 350-352)

8) The authors mention using an inter-professional medication reconciliation process, please describe this. (lines 354-355)

**Are the methods appropriate and well described?**

If not, please specify what is required in your comments to the authors.

Yes
Does the work include the necessary controls?
If not, please specify which controls are required in your comments to the authors.

Unable to assess

Are the conclusions drawn adequately supported by the data shown?
If not, please explain in your comments to the authors.

No

Are you able to assess any statistics in the manuscript or would you recommend an additional statistical review?
If an additional statistical review is recommended, please specify what aspects require further assessment in your comments to the editors.

I am able to assess the statistics

Quality of written English
Please indicate the quality of language in the manuscript:

Needs some language corrections before being published

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