One Molecule, Many Borders

The Hidden Complexity of Global Prescribing



Global Health LAC | Salud Global LAC
Bridging Healthcare Gaps Across Borders
Issue 3 | March 2026

Rx Edition

Medical Tourism • Medication Safety • Cross-Border Care

Inside the Rx Edition

What this issue covers

One Molecule, Many Borders

- Identifies medication continuity as the hidden risk in medical tourism
- Introduces the Cross-Border Rx Risk Chain
- Shows why discharge is the most fragile point in recovery
- Positions IPS-enabled discharge as a practical governance solution
- Highlights Costa Rica as a strong pilot setting
- Outlines a regional implementation path for LAC

Newsletter Highlight

At a Glance

- 53% post-discharge discrepancies
- 40%+ reconciliation failures
- Global IPS adoption accelerating
- Continuity remains under-governed

Core Insight

Procedures travel. Patients travel. Data can travel. Safe medication continuity must travel too.

Strategic Focus

- Cross-Border Discharge Risk
- Medication Continuity Gaps
- IPS as Governance Mechanism
- Implementation at Scale

Editorial

When Healing Crosses Borders, Medication Must Follow

Medical tourism across Latin America and the Caribbean is growing beyond access and affordability. But the real clinical journey does not end at discharge. It continues across borders, formularies, coverage rules, and regulatory systems that do not always align.

Procedures can travel. Diagnoses can travel. Medication continuity often does not.

The next frontier in global care is not just interoperability. It is preserving treatment continuity after the patient returns home.

Interoperability made health data portable.
Rx continuity makes healing possible.

Standards such as the International Patient Summary (IPS) enable essential clinical information to move with the patient. The next frontier is treatment continuity—ensuring therapies begun in one country can be safely understood and continued in another.

A medication's molecule may be universal,
but its identity and governance remain local.

Bridging this divide requires clear clinical context, coordinated discharge, and trusted cross-border communication. Latin America and the Caribbean are uniquely positioned to lead this shift, combining growing digital-health maturity with strong medical-tourism ecosystems and patient-centered care. Because in global healthcare, success is not measured only by treatment abroad—but by safe healing that continues at home.

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One Molecule, Many Borders

The Hidden Complexity of Global Prescribing

Medical tourism across Latin America and the Caribbean continues to grow, driven by access, affordability, and confidence in high-quality care. For travelers from North America and Europe, procedures are carefully planned—from provider selection to recovery setting. What is less visible is often more complex: medication continuity.

These procedures often require post-operative therapies such as anticoagulants, antibiotics, pain control, and adjustments to chronic-disease treatment.

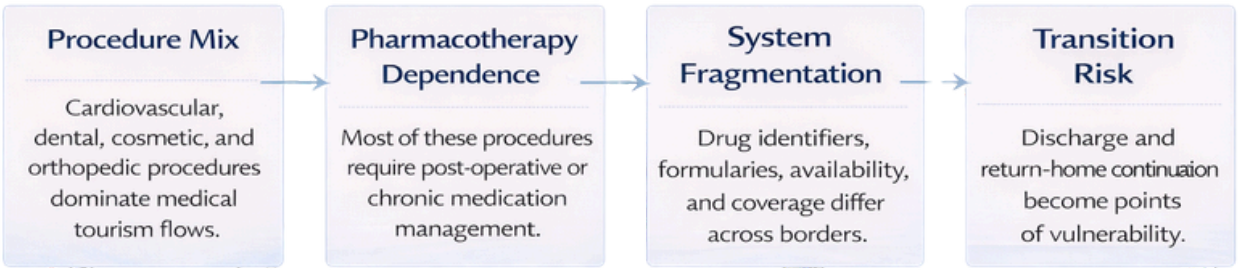
Medication is not secondary to treatment abroad. It is essential to recovery.

A procedure may last hours. Recovery may last weeks.
Continuity must last longer than the trip.

One Molecule, Many Borders

The Hidden Complexity of Global Prescribing

The Cross-Border Rx Risk Chain



Medication continuity is the structural bridge
between successful treatment and sustained recovery.

Where Continuity Breaks

Clinical information may travel. Medication continuity is still shaped by local approval, availability, coverage, and regulation.

- Drug identifiers differ by country
- Formularies vary across systems
- Utilization policies reset at borders
- New therapies may not yet be available

For patients, these differences remain invisible—until continuity is tested.
For clinicians, safe continuity requires rapid translation: brand → molecule → clinical intent → regulatory context.

Without that translation, continuity becomes risk.

One Molecule, Many Systems

Treatment crosses borders, prescribing crosses systems

The Role of the International Patient Summary

The International Patient Summary (IPS) provides a structured way to carry clinical context across borders, capturing conditions, medications, allergies, and recent care in a standardized format.

When integrated into medical-tourism workflows, IPS can:

- strengthen pre-operative reconciliation
-

In this way, IPS shifts continuity from individual effort to system-supported safety.

Translating Clinical Intent

Safe cross-border prescribing requires more than matching molecules.

It requires preserving the clinical story behind treatment:

- diagnosis and severity
- treatment phase and duration
- comorbidities and contraindications
- allergies and prior reactions
- recent procedures or complications

Without this context, substitution may be pharmacologically similar yet clinically unsafe

At the center of cross-border prescribing is a simple truth:

The molecule is global.
The system around it is local.

Continuity depends not only on access to a therapy, but on understanding why it was prescribed, under what conditions, and for how long.

Why Rx Continuity Matters in Medical Tourism

Medical tourism is often assessed through clinical quality, cost, and patient experience. But one of the biggest determinants of safe recovery appears after the patient returns home: medication continuity.

Across borders, therapies may be renamed, unavailable, restricted by coverage policy, or interpreted without full clinical context

- Renamed under different brand systems
- Unavailable in local formularies
- Restricted by coverage or utilization policy
- Interpreted without full clinical context

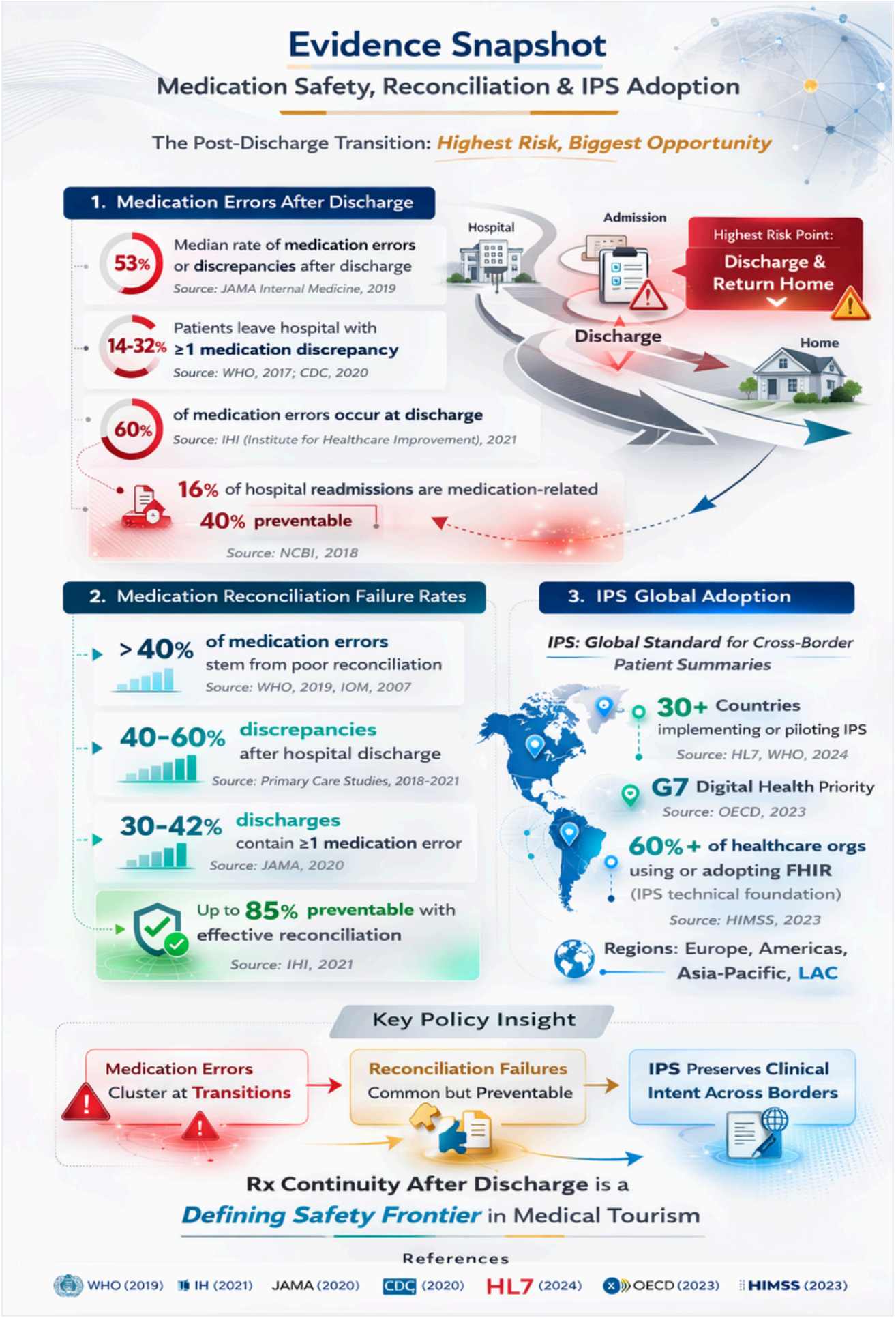
These gaps create risk at the most vulnerable point in the journey: discharge and follow-up.

The Role of the International Patient Summary (IPS)

The IPS provides a structured, portable clinical record that enables:

- Accurate medication reconciliation
- Safer therapeutic substitution
- Clear discharge intent and duration
- Confident continuation by home clinicians

By preserving the clinical meaning behind prescribing, IPS transforms cross-border treatment into continuous care.



Medication risk clusters at transition points. Better discharge governance is one of the clearest safety opportunities in cross-border care.

The Cross-Border Patient (Rx) Journey

Safe Treatment Abroad → Sustained Recovery at Home

Traveler: North America / Europe → Destination: Latin America & Caribbean

A Continuous Path to Rx Safety

1. Depart Home Country

- Patient located in North America or Europe
- Reviews destination provider and procedure
- Prepares medication list and health records
- Exports International Patient Summary (IPS)





2. Pre-Travel Clinical Readiness

(NEW — replaces duplicate step)

- Remote consultation with destination provider
- Medication reconciliation using IPS
- Guidance on which drugs to continue, pause, or adjust
- Travel-safe prescribing plan established

Purpose:
*Ensures the patient arrives **clinically optimized and understood**.*

2. Arrive in LAC & Intake

- Arrives at LAC treatment center
- IPS quickly reviewed on arrival
- Core medications reconciled
- Allergies and conditions confirmed

Purpose:
Ensures the patient arrives clinically optimized and understood.



3. Arrive in LAC & Clinical Intake

- Admission at destination treatment center
- Review of IPS, allergies, and comorbidities
- Confirmation of current medications
- Local formulary and substitution planning

4. Safe Treatment Abroad

- Planned procedure performed
- Peri-operative and chronic medications aligned
- IPS updated with treatmen details and medication changes



5. Coordinated Clinical Handoff Home

- Discharge plan documented in IPS
- Final medication list, doses, and duration
- Follow-up guidance shared with home clinician

From Procedure to Recovery Without Border Interruptions

Interoperability made health data portable
Rx continuity makes healing possible.

International Patient Summary (IPS) | Turning cross-border cores, into continuous care

SPOTLIGHT ON COSTA RICA

IPS Enabled Discharge

Costa Rica is a high-trust medical-tourism destination for travelers from North America and Europe, supported by organized private-sector care, strong patient experience, and reliable peri-operative medication access.

The country receives roughly 70,000 medical tourists annually, generating an estimated $437 million in revenue. About 59% of those travelers come from North America, reinforcing its role as a meaningful cross-border care destination.

With clinical quality already established, the remaining vulnerability becomes clearer: medication continuity after discharge.

That makes Costa Rica a practical setting to pilot IPS-enabled discharge and preserve clinical intent beyond the destination country.



IPS is already advancing cross-border clinical information exchange.
The next step is to apply it more intentionally to medication continuity after medical tourism discharge.



Global Landscape of IPS-Enabled Rx Continuity Initiatives

Initiatives advancing cross-border IPS-enabled medication continuity

Front-Runners

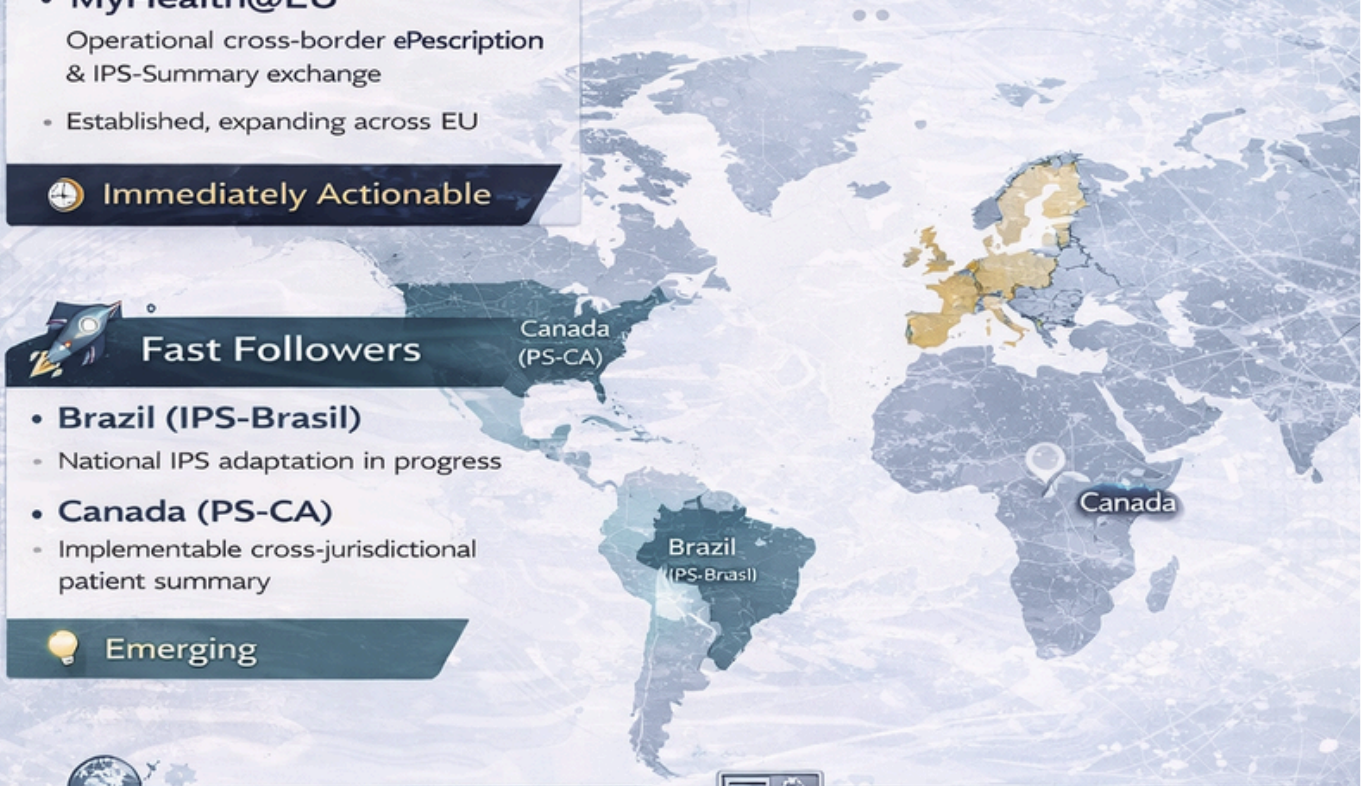
- **MyHealth@EU**
  Operational cross-border ePescription & IPS-Summary exchange
  - Established, expanding across EU

Immediately Actionable

Fast Followers

- **Brazil (IPS-Brasil)**
  - National IPS adaptation in progress
- **Canada (PS-CA)**
  - Implementable cross-jurisdictional patient summary

Emerging



Global Pilots & Mobility

- **WHO Hajj Pilot**
  - Verifable IPS digital health record for cross-border mass mobility.

Emerging

EHR Ecosystem Enablers

- **Epic** Leading EHR vendor announces new IPS support.

Emerging Enabler

Standards Backbone

- HL7 | ISO SNOMED G7
  - International and cross-national governance of IPS
- HL7 | ISIO

Eary Architectural Alignment

Standards Backbone

- HL7 ISO NORTHRAN G7
  - International and cross-national governance of IPS
- HL7 | ISO SNOMED G7

Early Architectural Alignment

Immediately Actionable Emerging Emerging Enabler Early

Final Reflection

Beyond Treatment Abroad

Medical tourism has expanded the geography of care. But the true test of treatment abroad is not the procedure itself. It is whether recovery remains safe and continuous after the patient returns home.

Clinical information is becoming more portable. Medication continuity remains more fragile, shaped by local formularies, regulatory frameworks, and coverage rules.

The opportunity now is to move from interoperability alone to governed continuity at discharge.

Interoperability made health data portable.
Rx continuity makes healing possible.

Question for the global health community:

What is the biggest barrier to safe medication continuity when patients return home after treatment abroad?

References

1. World Health Organization. Medication Without Harm: Global Patient Safety Challenge. Geneva: WHO; 2017.
2. AHRQ. Medication Reconciliation – Patient Safety Network. Rockville, MD: Agency for Healthcare Research and Quality.
3. Mekonnen AB, et al. Medication discrepancies at hospital discharge: systematic review. BMJ Qual Saf. 2016.
4. ISO. ISO 27269: International Patient Summary. Geneva: International Organization for Standardization.
5. HL7 International. FHIR® Implementation Guide: International Patient Summary.
6. OECD. Health at a Glance: OECD Indicators. Paris: OECD Publishing.
7. Mueller SK, et al. Hospital-based medication reconciliation practices. Arch Intern Med. 2012.
8. Costa Rica Investment Promotion Agency (CINDE). Medical tourism sector data.
9. Pan American Health Organization (PAHO). Digital Transformation of the Health Sector in the Americas. Washington, DC: PAHO.
10. ANVISA (Brazil). National Health Surveillance Agency regulatory framework.
11. COFEPRIS (Mexico). Federal Commission for the Protection against Sanitary Risk regulatory publications.

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