

Ambulatory Care Pharmaceutical Services

Pharmacy 492
February 2007

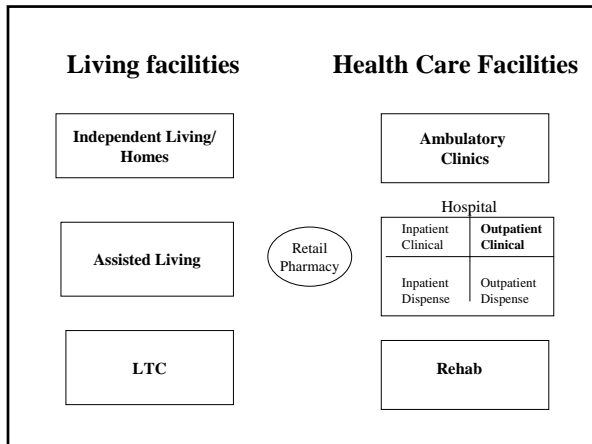
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QUESTIONS

- Where: Is my practice site?
- What: Is my job description?
- Why: Is it important?
- Fun: Is it interesting and stimulating?
- Not fun: What are the challenges?

Where

- Senior Care Clinic (SCC) is located on the 4th floor of Harborview Medical Center (HMC) Hospital ambulatory care tower
- The setting is an outpatient clinical practice
- The site is both primary care (SCC) and specialty care services (cardiology and neurology)



Primary Care Clinics
Vs.
Ambulatory Care Clinics
Vs.
Specialty Care Clinics

- HMC Ambulatory Care Clinics**
- | | |
|--|---|
| <u>Primary Care Clinics</u> | <u>Specialty Clinics</u> |
| <ul style="list-style-type: none"> ▪ Senior Care ▪ Family Medicine ▪ Adult Medicine ▪ Pioneer Square ▪ International Medicine | <ul style="list-style-type: none"> ▪ Cardiology ▪ Neurology ▪ Ophthalmology ▪ Renal ▪ Diabetes ▪ HIV ▪ Rheumatology ▪ Podiatry ▪ Orthopedics |

Clinical Versus Distribution

- Distribution
 - Dispensing medications
 - Retrospective evaluation—Fix problems
 - Clarification of orders

- Clinical
 - Monitoring medications—labs, side effects
 - Prospective evaluation—Anticipate problems
 - Writing the orders—prescriptive authority

What

- Clinical services development in Senior Care Clinic
 - See 4-12 patients per day, each for 30-60 minutes

- Pharmacy staff development

- Provide educational services
 - Interns, medical + pharmacy residents
 - Support UW Pharmacy School: didactic and rotations
 - Drug information to 4west clinics staff

Clinical Services

- Disease States Management in SCC
 - Diabetes
 - Hypertension
 - Hyperlipidemia
 - Congestive heart failure

- Anticoagulation management

- Glucometer Education

- Coordination of Care

- Medication Evaluation—poly-pharmacy

Why Is It Important?

- Assist in medication adjustments
- Assess how pt is using the medications
- Evaluate appropriate medication prescribing
- Educate patient on various disease states
- Monitor lab values
- Individualize therapy for patients
- Problem solve medication issues

FUN

- Direct patient care
- Ability to tailor medications and individualize therapy for patients
- Plenty of opportunities for patient education
- Prevent problems—anticipate meds that could cause falls and side effects
- Pharmaceutical care: allows follow-up and outcome evaluations

NOT FUN

- Documentation of interactions
 - Time consuming
 - Paperwork
 - Billing
- Multi-tasking
- Constant interruptions
- Liability
- Must keep up with current drug studies

Typical day in Senior Care Clinic

71 Year Old Female

- Was hospitalized 6 times in 2005
- Recently discharged from HMC Hospital
- Has rapid heart rate—was prescribed warfarin
- Seeing pharmacists for:
 - Warfarin management
 - Medication monitoring
 - Asthma and diabetes education & management
 - Medication assessment of appropriate prescribing

Medication Assessment: 27 Meds

Medical Problems

- Asthma
- Hypertension
- Hx of heart attack 2002
- Atrial Fibrillation
- Hyperlipidemia
- Diabetes
- Anxiety & depression
- Insomnia
- Osteoporosis
- Gout
- Osteoarthritis—pain
- Psoriatic dermatitis
- Decreased hearing
- Right eye cataract surgery 2005

Medications

- 4 different breathing inhalers
- Montelukast
- Nasal spray
- Lisinopril
- Diltiazem
- Bumetamide
- Digoxin
- Warfarin
- Atorvastatin
- Lispro insulin
- Diazepam, Trazodone
- Venlafaxine
- Pantoprazole
- Alendronate, Tylenol
- Calcium carbonate
- Docusate, multivitamin, Senna
- Prednisone

What Do You Do First?

- Geriatric considerations?
 - Falls assessment
 - Sleep regimen
- Does disease states match with medication list?
- Compliance issues: caregivers?
- Can we minimize the number of meds needed?
- Level of education needed?
 - Consider pt's hearing and cognition ability







Questions
