

Pharmacy Residency Program

Patient Counseling Policy & Procedures

Background

Patient counseling is important for assuring optimal outcomes of drug therapy. TBHC pharmacotherapy residents offer patient counseling to improve patient care prior to discharge.

Policy

A pharmacotherapy resident may provide counseling at discharge for all HIV positive mothers on the appropriate administration of the child's antiretroviral therapy as well as all patients in which the pharmacotherapy resident on-call is consulted for warfarin drug monitoring. The pharmacotherapy resident on-call can be consulted for all patients that do not meet the above criteria upon the request of the medical team, nursing staff, patient or patient's family/caregiver. Counseling services are available for insulin administration, inhaler technique and medication discharge counseling.

Procedure

1. The pharmacotherapy resident on-call will be paged at #3509 when all HIV positive mothers are admitted to labor and delivery. The child will be followed throughout their stay and a discharge plan will be created. Prior to discharge, the Pediatric Infectious Diseases Specialist will send a prescription to the outpatient pharmacy. The pharmacy resident will deliver a 28 day supply of the infant's HIV medication (generally zidovudine only) from the outpatient pharmacy and provide bedside counseling to the parents.
2. The pharmacotherapy resident on-call will carry pager #3509 for all other counseling consults.
3. The medical team or nursing staff will page the pharmacotherapy resident on-call when patient counseling is warranted or requested.
4. If the patient accepts counseling, the pharmacotherapy resident on-call will counsel the patient on the following points:
 - a. Counseling of HIV positive mothers
 - i. Discuss the importance of adherence to the baby's health

Policy Name: Patient Counseling		Date Approved: 9/2004	Policy #: R-005
Written by: Joanna Tang, PharmD Chief Resident 2005-2006		Approved by: Robert DiGregorio, PharmD, BCACP Sr. Director, Pharmacotherapy Services	
Revised by: Elise Kim, PharmD, BCACP, CDCES & Briann Fischetti, PharmD, PharmD, MBA BCACP, AAHIVP			
Replaces: none	Reviewed: 5/2022	Revised: 2/2008, 10/2009, 6/2015, 9/2015, 5/2022	Pages: 4

- ii. Name of the medication(s)
 - iii. Intended use and expected action of the drugs
 - iv. The appropriate administration of the child's antiretrovirals including route, dosage form, dosage and administration schedule
 - v. Any precautions needed to be observed during administration such as spitting up
 - vi. Common side effects that may be encountered
 - vii. Proper storage of medications
 - viii. Action to be taken in the event of a missed dose
 - ix. Importance of follow-up at PATH Center
- b. Discharge counseling
- i. Name of the medications
 - ii. Intended use and expected action of the drugs
 - iii. Route, dosage form, dosage and administration schedule
 - iv. Any special directions for preparation or administration
 - v. Any precautions needed to be observed during administration
 - vi. Common side effects that may be encountered
 - vii. Proper storage of medications
 - viii. Potential drug-drug or drug-food interactions or other therapeutic contraindications
 - ix. Action to be taken in the event of a missed dose
 - x. Any other information specific patient or medication
- c. Inhaler counseling
- i. Name of the medication
 - ii. Intended use and expected action of the medication
 - 1. Maintenance versus rescue
 - iii. Route, dosage form, dosage, storage and administration schedule
 - iv. Appropriate inhaler technique
- d. Insulin administration counseling
- i. Name of the medication
 - ii. Intended use and expected duration of action of insulin
 - iii. Route, dosage form, dosage and administration schedule
 - iv. Storage recommendations
 - v. Self-injection technique
 - vi. Common side effects that may occur especially hypoglycemia and appropriate treatment

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- vii. Blood glucose monitoring (BGM) recommendations including technique
- e. Warfarin counseling
 - i. Name of the medication
 - ii. Intended use and expected action of warfarin
 - iii. Patient-specific INR goal
 - iv. Potential drug-food interactions
 - v. Potential drug-drug interactions
 - vi. Monitoring for signs and symptoms of bleeding and VTEs
- f. Direct oral anticoagulant (DOAC) counseling
 - i. Name of the medication
 - ii. Intended use and expected action of DOAC
 - iii. Dosing of DOAC
 - iv. Potential drug-drug interactions
 - v. Monitoring for signs and symptoms of bleeding and VTEs

After providing counseling to the patient, the pharmacotherapy resident will enter a document into the electronic medical record and into the electronic intervention database.

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