ASSESSING INTERVENTIONS TO IMPROVE PATIENT CARE CONDUCTED BY PHARMACISTS AT AN OUTPATIENT RENAL VANDERBILT WUNIVERSITY TRANSPLANT CLINIC WITHIN A COLLABORATIVE PHARMACY PRACTICE AGREEMENT

MEDICAL CENTER

Email Keren Johnson for correspondence: keren.e.johnson@vumc.org

Rachel Chelewski, PharmD, CSP¹ I Keren Johnson, PharmD, CSP¹ I Autumn Zuckerman, PharmD, BCPS, AAHIVP, CSP² I Megan Peter, PhD² I Anthony Langone, MD³

¹ Vanderbilt Transplant Pharmacy, ² Vanderbilt Specialty Pharmacy, ³ Vanderbilt University Medical Center, Department of Medical Specialties

BACKGROUND

- Collaborative pharmacy practice agreements (CPPA) permit pharmacists to perform clinical services under a supervising physicians without direct intervention.
- The Vanderbilt Renal Transplant Clinic implemented a CPPA in March 2017.

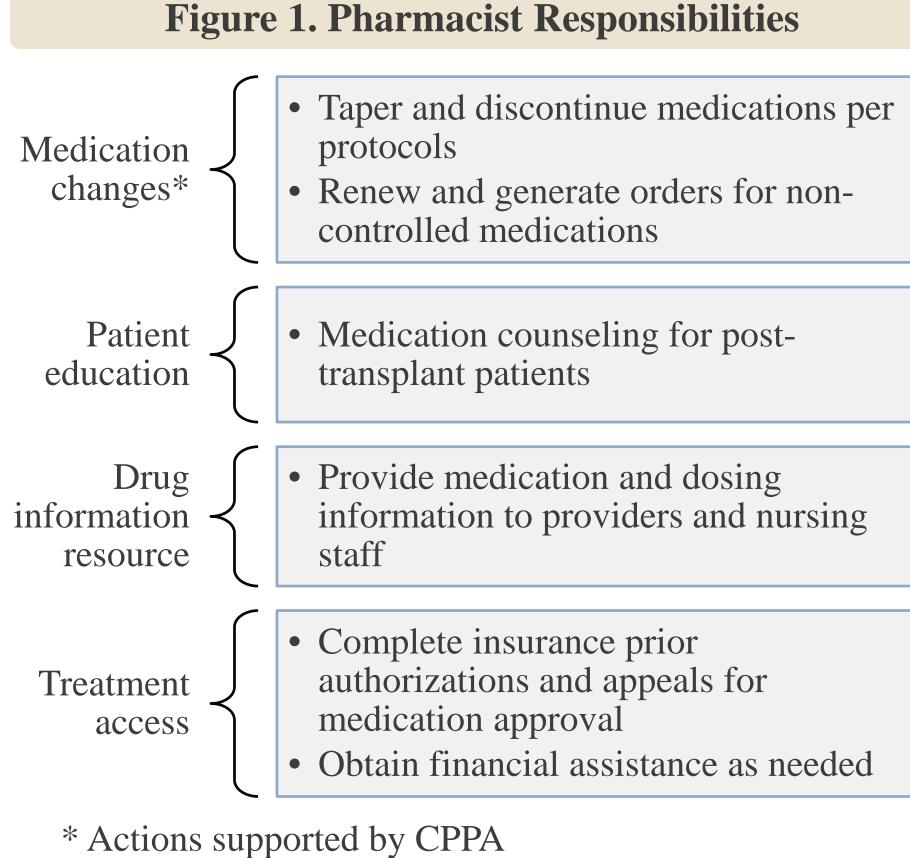


Figure 2. Clinic Workflow

Post renal transplant patient discharged and followed by renal transplant clinic

Patient referred to pharmacist by nurse, physician, or pharmacy via phone, EMR message, or clinic visit

Pharmacist performs chart reviews to ensure appropriate medication and dose

Pharmacist generates renewal or new medication order

> Pharmacist provides interventions during therapy as needed

Steps Performed in Chart Reviews for Orders

- ✓ Verify CPPA referral on file
- Verify last clinic visit occurred within 12 months
- ✓ Review EMR for medication changes
- ✓ Review laboratory results
- ✓ Update medication list if appropriate



1,233 Patients

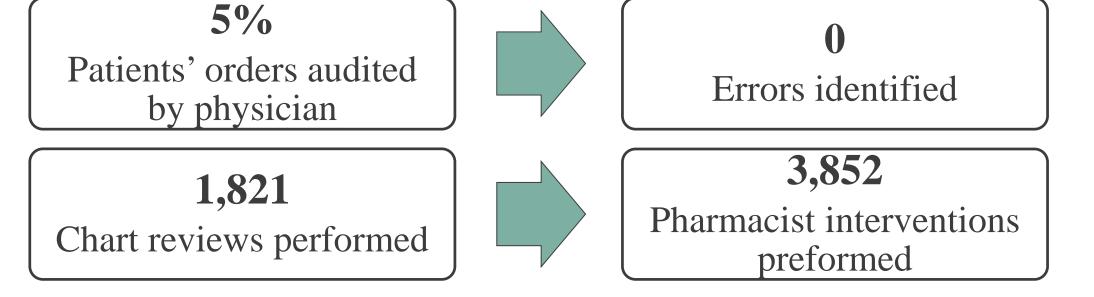
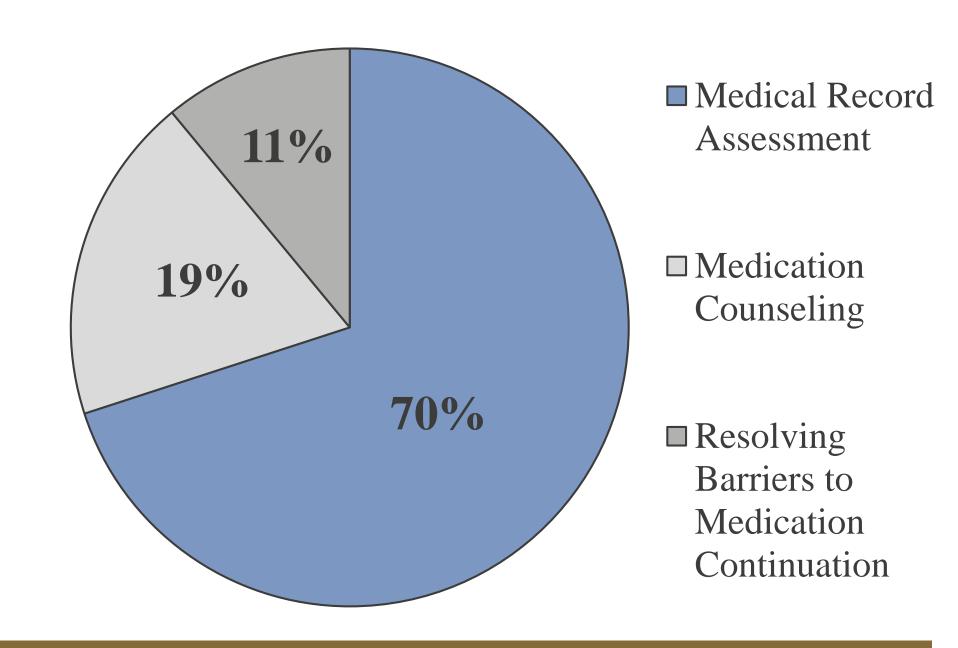


Figure 3. Types of Pharmacist Interventions



RESULTS

Table 1. Pharmacist Interventions by Category

Intervention Category	Subcategory	n	%
Medical Record Assessment (n= 2,695)	Coordination of care	1580	41%
	Dose clarification	600	16%
	Appropriateness of therapy	284	7%
	Labs and medication monitoring	156	4%
	Medication reconciliation	61	2%
	Allergy review	10	<1%
	Disease related event or symptom	4	<1%
Medication Counseling (n= 734)	Drug/administration information	635	16%
	Side effect management	53	1%
	Drug interaction	38	1%
	Storage and stability	8	<1%
Resolving Barriers to	Facilitating medication access	378	10%
Medication Continuation (n= 423)	Adherence	45	1%

METHODS

Study Design Adult patients prescribed medication from Sample the renal transplant clinic from 1/01/2019

to 6/30/2019

Data

Source

Retrospective review of clinic notes in patient electronic medical records (EMR)

Evaluate interventions performed by Objective pharmacists in a CPPA at a renal transplant clinic

Interventions

Medical record assessment	Evaluate patient-specific information to facilitate medication prescribing, adjustment continuation, or coordination of care	
Medication counseling	Educate patients in clinic or by phone on drug-specific information based on need	
Resolving barriers to medication continuation	Identify and address potential issues that may impact medication persistence	

CONCLUSIONS

- Prescription management by pharmacists prescribing under a CPPA is safe.
- Pharmacist interventions were common, emphasizing the vital role pharmacists can have on a posttransplant healthcare team.
- CPPAs are a prudent method of providing quality patient care, particularly in clinics with high patient volume and frequent medications changes such as transplant.

RECOMMENDATIONS FOR ESTABLISHING A CPPA

Obtain liability insurance for pharmacists

Seek legal review of agreement before initiating a **CPPA**

Integrate a pharmacist in clinic before initiating a CPPA to build trust with providers

Maintain open and constructive communication between physicians and pharmacists in a **CPPA**