

Patient Centered Pharmaceutical Care in the Community Setting

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Evolution of the Pharmacist's Role

1950-1960s

Dispensing | Medication Error

Prevention

Compounding

Adverse Drug Interventions







Clinical Development
Direct Patient Care

1970-1980s

1990s

Pharmaceutical Care

Medication Therapy Management (MTM)
Immunizations





Expanded Practice

Chronic Disease Management

Collaborative Drug Agreements

Prescriptive Authority

2010-Current



Optimize Drug Therapy Outcomes Collaboration with other Healthcare Providers

Community Pharmacy Expanded Practice

Better Access to

Patient Care

Point of Care Testing Prescriptive Authority

Hormonal Contraceptive Prescribing

Travel Health



ACPE accredited program training required

+ BOP specific requirements

Clinical Laboratory Improvement Amendments (CLIA) Waiver

- Operates under Centers for Medicare and Medicaid Services (CMS)
- Granted for simple labs
 - Low risk for erroneous results when performed correctly

https://www.accessdata.fda.gov/scripts/cdrh/cfdocs/cfclia/analyteswaived.cfm





Collaborative Practice Agreement (CPA)

- Health Practice Partnership between a pharmacist and presciber
- Specifies functions that can be performed outside of normal scope
- Permits patient care services beyond drug therapy management
- Allowances are based on agreement terms

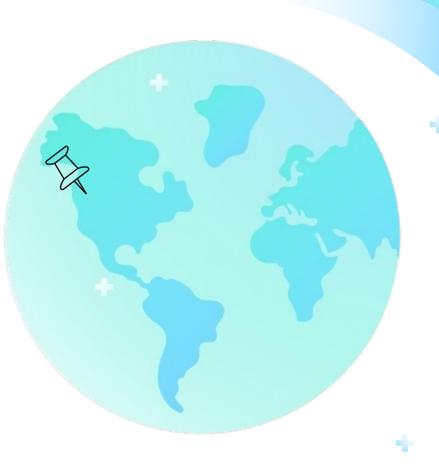
Statewide Protocol

- Framework specifies conditions under which pharmacists are authorized to prescribe
 - Specific medication or category of medications

State Specific Allowances

All expanded programs are tailored to individual states' specific regulations and guidelines

States have varied expanded program approvals



Point of Care Testing

Overview

- POC testing allows patients to receive a diagnostic test outside of a traditional laboratory
- Increases Accessibility
- Fast, Reliable Results
- Affordable



Qualitative

Positive or Negative

- SARS-CoV-2
- Influenza A & B
- Group A Strep
- HIV
- HEP C



Quantitative

Numerical Results

- Blood Glucose
- Cortisol
- Hemoglobin A1c Iron
- INR

TSH

Lipid Panel



Assessment of Vitals

Blood Pressure

Temperature

Heart Rate

Lymph Node Palpation

Respiratory Rate

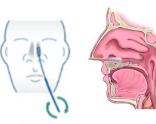
Tenderness

Pulse Oximetry

Speciman Collections

Anterior Nares Swab

- SARS-CoV-2
- Influenza A & B





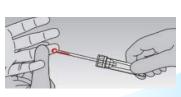
Group A Strep



Capillary Collection

- Blood Glucose
- Hemoglobin A1c
- INR
- Lipid Panel
- HIV

- HEP C
- Cortisol
- Iron
- TSH
- Lyme Disease



Results & Treatment

Diagnostic Testing Tool

- Small
- Portable
- Easy-to-use
- Rapid Results









Prescriptive Authority

Overview

- Some states permit pharmacists to prescribe medications to treat certain acute conditions
- Pharmacies are required to develop and utilize an evidence-based protocol for prescribing
- Regulations are determined by individual states

Each state specifies:

- 1. Qualifications required to implement
- 2. Procedures that must be followed





Prescriptive Authority

Treat

- Urinary Tract Infections
- Yeast Infections
- Cold Sores
- Acne (with topical trx)
- Nausea

Prescribe

- Rescue Inhalers
- Spacers
- Statins in Patients with Diabetes
- Epinephrine pens

Poll Question 1

Have you participated in Point-of-Care Testing (POCT) or Prescriptive Authority?

- A. POCT
- B. Prescriptive Authority
- C. Both
- D. Neither

Hormonal Contraceptive Prescribing

Overview

Allows RPhs to prescribe birth control after a consultation with the patient

Outcomes

- Improves hormonal contraception access
- Provides timely and urgent access/continuity to care
- Decreases the rate of unintended pregnancies
- Provides patient education support

Travel Health Consultation

Overview

- Allows RPhs to evaluate patient's health-related needs for travel
- Makes recommendations on:
 - Vaccines (ex. Yellow Fever, Typhoid, JE, etc.)
 - Prophylactic medications (traveler's diarrhea, altitude sickness, motion sickness, etc.)
 - Travel-related support (how to travel safely, bug spray, sunscreen, safe food/drink, OTC recommendations, etc.)

Outcomes

- Improves patient education and access to travel safety
- Prevents disease through prophylactic immunizations



Note: Not available in all states. State-specific regulations apply.

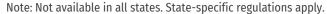
HIV Prevention Consultation

Pre-Exposure Prophylaxis (PrEP)

- Preventive medication regimen for people at high risk of HIV infection
- <u>Indications</u>: Individuals at high risk, including HIV-negative partners of HIV-positive individuals
 - People who inject drugs
 - Others at risk through sexual activity

Post-Exposure Prophylaxis (PEP)

- PEP is a preventive treatment for people potentially exposed to HIV
- <u>Treatment Window</u>: Start within 72 hours (ideally sooner) after potential exposure
- <u>Duration</u>: Typically 28 days
- Indications: Healthcare workers after occupational exposure
 - Sexual assault survivors
 - Others with recent high-risk exposure



Poll Question 2

Prior to this presentation, were you aware of the expanded programs available in our community pharmacy settings?

A. Yes, I was aware of them.

B. No, I was not aware of them.





Let's continue to advocate and collaborate to further expand pharmacy practice in the community setting.







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