• Setting the stage for precepting drug therapy assessment
• Elements of drug therapy assessment
  • Hierarchy
  • Flow chart
• Student use of flow chart
• Reviewing the Student’s Assessment
• Feedback and evaluation of your student
• Overview of preceptor role
• An example: my practice
1. Identify and evaluate how you assess drug therapy in your practice
   • What is your practice environment?
   • Who are your team members, if any?
   • What role do other patient care providers have with respect to assessing drug therapy?

2. Get to know your student; specifically, their comfort and experience with drug therapy assessments
   • How many drug therapy assessments have been learned and practiced?
   • What specific drug therapy assessments have been learned and practiced?
3. Share your approach with your student

- What types of drug therapy assessments do you routinely conduct?
- Where is information documented and stored which supports your assessment?

For example:

- Past Medical History (PMH)
- Netcare data
- Refill records
Hierarchical Drug Therapy Problems (DTPs)

1. Indication
2. Efficacy
3. Adherence
4. Safety

PRECEPTING TIP:
After your student has gathered a patient database, have him present to you the INDICATION for each drug. This would also apply for:
- EFFICACY
- ADHERENCE
- SAFETY
Is drug therapy effective for each indication? (Goals/Efficacy Monitoring Parameters)

- Why? Additional therapy required
- Non-adherence
- Low dose/dosing frequency/dose titration
- Interaction
- Onset of action
- Malabsorption
- Formulation
- Expired drug

Move on to Adherence and Safety Evaluation

Is the patient at risk of or experiencing any significant drug-drug, drug-food, drug-disease, or drug-laboratory test interactions?

- Continue therapy, it appears appropriate for this patient.

Can the interaction be managed? Is a change in therapy indicated?

Move on to Efficacy Evaluation

Has drug therapy been initiated?

- Yes
- No

Is drug therapy optimal (first-line) for that specific condition?

- Yes
- No

Explore reasons for use of alternate drug therapy

Consider switching to optimal therapy if appropriate

Move on to Efficacy Evaluation

Is therapy indicated? (Consider non-drug management and patient preferences)

- Yes
- No

Can therapy be discontinued?

Is the patient able to take drug therapy as prescribed?

- Yes
- No

Why? Adverse Effect
- Incorrect dosage form/frequency
- Directions not understood (consider culture, language, education/health literacy)
- Cost/Drug access
- Patient preference, beliefs, motivators
- Patient ability to self-administer drugs (age, dexterity, vision, swallowing, memory)

Move on to Safety Evaluation

Is the dose appropriate? (Consider weight, organ function, age) Is the patient being monitored appropriately?

Is the dose too high? (Consider weight, organ function, age) Can the adverse effect be managed? Is a change in therapy indicated?

Developed by: Deon Druteika, PharmD, Pharmacy Services AHS
Adapted by: Patient Care Working Group, Faculty of Pharmacy, UofA 2011
Copyright © 2011, Faculty of Pharmacy & Pharmaceutical Sciences, University of Alberta
• Have your student use the flow chart as a guide when evaluating drug therapy

• Keep in mind that the flow chart is not all inclusive, but rather a systematic process tool

PRECEPTING TIP:
For more comprehensive information about assessing drug therapy, refer your student to the full Patient Care Process document for suggestions.
Is the student’s assessment *thorough, accurate* and *clinically relevant*?

- **Missing Information**
  - What is needed, and how will it be gathered?
  - Chart, patient, Netcare, community pharmacy, MD, allied healthcare providers, other

- **Assessment inaccurate or not clinically relevant**
  - How can you re-direct?

**PRECEPTING TIP:**
Role model for your student how to think like a detective when gathering and assessing information.
Feedback and Evaluation

• Provide feedback to your student on:
  • Ability to ask the right questions which in turn, forms the assessment of the patient
  • Ability to interpret, integrate and apply retrieved data
  • Ability to prioritize medical and drug therapy problems

• Evaluate your student on the following criteria:
  • Ability to identify clinically relevant DTPs
  • Quality of DTP assessment
    · Thorough
    · Accurate

Note: If student is unable to assess drug therapy despite feedback and sufficient practice, please contact the course coordinator.
Before the clinical placement

- Be familiar with the drug therapy assessment process student’s are taught
- Suggest medical conditions and therapeutics your student should review that are commonly assessed in your practice

Early in the clinical placement

- Discuss your expectations for patient assessments (on Day 1)
- Ensure your student can compile a thorough patient database
- Assign some straightforward, simple patients with few co-morbidities
- Review thoroughly to ensure student has a good grasp on process and assessments are comprehensive.

Later in the clinical placement

- Assign more complex patients, and increase patient workload
Have the student compile a list of current & previous medical problems from assigned patient(conditions)

Have the student prioritize them (starting with the reason for admission/encounter/or consultation)
Precepting Drug Therapy Assessment in my practice – Step 2

Focus your student to start with highest priority medical problem and begin movement through the flow chart.

Your student should use one cycle of the flow chart per medication used for each medical condition and multiple cycles for conditions requiring multiple therapies.

Once all cycles complete for one medical condition, assess therapy for next problem in prioritized list. Rinse, repeat.
As DTP’s are identified via the flow diagram, formulate a list of problems that can be resolved.

Prioritize solvable DTP’s in terms of clinical relevance and timeframe

Move onto the next step in process of care....resolving DTPs.