



VIRTUAL
2020 NATIONAL
RYAN WHITE
CONFERENCE ON
HIV CARE & TREATMENT

Utilizing an HIV Clinical Pharmacist to Improve Patient Outcomes

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Objectives



- Define what it is to be a clinical pharmacist and how one specializes in HIV treatment
- Identify components that can make up a clinical pharmacist's chart review
- Describe how a clinical pharmacist may help improve quality management performance measures

What is a Clinical Pharmacist?



- A pharmacist that provides direct patient care beyond just medication dispensing
- Often based in a clinic or hospital setting
- Function alongside doctors and mid-level practitioners as the team's pharmacotherapy expert
- Can function independently, aiding patients with all aspects of medication usage

Clinical Pharmacist Training



- Generally one to two years of residency training in addition to the traditional pharmacist degree
 - Post-Graduate Year 1 – Generalized pharmacotherapy training
 - Post-Graduate Year 2 – Specialized training
- Board Certification
 - Board of Pharmacy Specialties (BPS) offers numerous generalized and specialty certifications
- American Academy of HIV Medicine
 - HIV Pharmacist (AAHIVP) specialty certification

Roles of a Clinical Pharmacist



- Direct Patient Care
 - Medication Education
 - Treatment Adherence
 - Comprehensive Medication Reviews
- Clinical Provider Support
 - Aid in Complex Regimen Formation
 - Facilitate Transitions in Care
 - Education
- Quality Management



Direct Patient Care

Medication Education



- Access patient readiness
- Review baseline labs and their meaning
- Discuss goals of therapy
- Review regimen characteristics
 - Medication names/components
 - Dose
 - Frequency
 - Time of Day
 - Food requirements

Medication Education



- Possible side effects
 - Common vs Rare
 - Duration
 - Management
- Drug interactions
 - Prescription vs Over-the-counter
- Verify patient knowledge
- Provide any possible handouts / printed materials

Treatment Adherence



- 1-on-1 Medication Adherence Sessions
 - Can be requested by patient or referred by provider
 - Address barriers to knowledge, skills, or motivation
- Appointment Adherence Session
 - Scheduled when a patient “no-shows” or same-day cancels two provider visits in a row
 - Aids with continuity of care

Medication Adherence



- Fill In Any Gaps In Knowledge
 - Understanding of lab values
 - Resistance and how it develops
 - Review of side effects
- Develop Adherence Skills
 - Review patient's daily routine (sleep, meals, etc.)
 - Using the pharmacy (transportation, refills)
 - Adherence tools
- Motivational Interviewing

Appointment Adherence



- Visits address barriers to attending provider appointments
 - Address transportation needs
 - Provide case managers assistance
 - Simply reinforce visit importance
- Allows for continuity of care
 - Labs ordered and medications refilled while waiting for rescheduled provider appointment
 - Urgent needs can be addressed by PharmD or RN
- Frees up provider schedules from frequent “no-shows”

- “A systematic process of collecting patient-specific information, assessing medication therapies to identify medication-related problems, developing a prioritized list of medication-related problems, and creating a plan to resolve them with the patient, caregiver and/or prescriber.”*
- One-on-one
- Helps ensure all medications are linked to a proper diagnosis
- Ensures the patient has a good knowledge of all medications
- Reviews appropriate use of OTC meds and supplements



Clinical Provider Support

Clinical Chart Reviews



- Detailed reviews of all patients attending clinic each day
- Monitor pertinent labs
- Medication monitoring
 - Drug interactions
 - Missing or incomplete antiretroviral regimens
 - Missing opportunistic infection prophylaxis
- Review and summarize resistance testing
- Screen for needed vaccinations

Complex Regimen Formation



- Antiretrovirals for a patient receiving chemotherapy trying to avoid drug interactions?
- Antiretrovirals that can be crushed for a patient requiring a PEG tube?
- Antiretrovirals for a patient with a 25 year HIV treatment history consisting of numerous mutations to multiple medication classes?
- *How about all three at once?*

Facilitate Transitions In Care



- Review daily reports of patients admitted on antiretrovirals
 - Ensure medications are started appropriately
 - Monitor for drug interactions and abnormal labs
- Order “meds-to-go” for patients being discharged
- Monitor for admission of our clinic’s pregnant patients

Provider Education



- Host a monthly case conference to review complex patients
- Local presenter for our states AIDS Education and Training Center (AETC)
- Nursing continuing education sessions



Quality Management

- Pharmacist roles can have a direct impact on all Ryan White core performance measures
 - Viral load suppression
 - Prescription of antiretroviral therapy
 - Retention in care
- Aid in the development of quality improvement projects
- Help oversee the tracking of performance measures through report development

Quality Improvement



- Appointment adherence visits developed in response to core measures 3 and 4 – Retention in Care
- Improvement in vaccination rates through purposeful reporting and tracking
- Attempting to reduce disparities through use of CQII's disparity calculator

- Longer appointments can help build a strong relationship
- Encourage patients to advocate for themselves and ask questions – reduce medication errors
- Statewide support
 - Formulary support for the State HIV Drug Assistance Program
 - Policy and Advocacy support in the form of State HIV/AIDS Councils

Pre-Exposure Prophylaxis



- Pharmacist led PrEP clinic operating under a collaborative practice agreement
- Authorized pharmacists can:
 - Conduct PrEP visits
 - Order labs and STI screening
 - Refill PrEP medications
- Allows pharmacists to practice at the top of their license while also freeing appointment space in the general ID clinic



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