Discussion Items

There are numerous topics unique to health-system pharmacy practice. All of the following topics should be discussed by the end of 728-742 rotation. Many of these topics will be covered in the activities embedded in this course. Any remaining topics should be discussed with clinical instructor(s)/staff. See the Resources page in the 742 manual for supporting articles/resources.

Pharmacy Systems (includes practice management)	
Topic	**Completed**
What is the process for completing a MUE/DUE?	
How is the formulary managed (i.e., adding or deleting a medication from the formulary and the establishment of restrictions for use of specific medications on the formulary)? What is the role of the P&T Committee as it relates to formulary management?	
How are requests for non-formulary medication handled?	
Who initiates and prepares the medication therapy monographs for medications under consideration for formulary addition or deletion?	
How are investigational drugs handled (e.g., storage, dispensing, labeling, record keeping, etc.)? What happens if a patient is admitted on an investigational drug who is participating in a research study at another institution and must continue while hospitalized?	
What is the process for initiating and/or developing a clinical drug guideline and/or therapeutic protocol?	
Does the institution/health-system have an Institutional Review Board (IRB)? If not, why not? If yes, what is the purpose and function of the IRB at the institution?	
Which hospital-wide committees, especially those making medication management decisions, include pharmacy representation? What is the pharmacy department's role on those committees?	
What are the general institutional requirements (e.g., processes, equipment, training) needed to administer sterile compounded products?	
What are the differences in the preparation of IV, IM, SC, intrathecal, intraocular, intradermal, large volume, small volume and chemotherapy agents?	
How do you determine medications are incompatible and what proactive strategies are implemented to avoid/minimize the incompatibilities?	
Describe the integration and interface of clinical and distributive functions, including the synergy that translates into safe and effective medication therapy	
Who can administer medications to patients at the institution? Who updates the associated policies?	
Who develops and maintains the policies and procedures for the evaluation, selection, use, calibration, monitoring and maintenance of all automated pharmacy systems?	
What are the functional capabilities of the computer system used by the pharmacy department at the institution? *Capabilities may include: clerical functions, medication records, clinical decision support, patient billing procedures, drug product inventory, drug information, the patient medical record, electronic prescribing, and interface with other computerized systems to obtain patient specific clinical information for medication therapy monitoring and other clinical functions and facilitate the continuity of care to and from other care settings.*	
What is the drug procurement process including vendor selection, drug selection, backorders, recalls, drug waste, and handling of drug shortages? Who develops the policies and procedures governing the procurement, distribution, and control of all drug products used in the hospital?	
What are the policies and procedures for the preparation, handling, storage, and disposal of hazardous drug products and products used in their preparation?	

What are the policies and procedures when drug formulations, dosage forms, strengths, and packaging are not available commercially, but are needed for patient care? How are those products prepared?	
What is the policy about drug samples?	
When a patient brings their own medications to the hospital, what is the policy and procedure for storing the patient's own meds while an inpatient?	
What types of data management systems are used to evaluate workload, financial performance, and drug costs within pharmacy services? How is this data monitored, assessed, reported and documented?	
What is the pharmacy department's staffing plan to ensure that patient needs are being met?	
Who completes the schedules for the pharmacists and the technicians? Is there a specific reason for that person or persons?	
How and to what extent are the mission, vision, goals, and scope of services of the pharmacy department communicated to pharmacy personnel? What is the pharmacy staffs' level of involvement in updating the mission, vision, and goals?	
What are the methods/organizational philosophy for performance reviews, assessing practice competency?	
What is the pharmacy department's personnel evaluation process? What are the competency assessment procedures and metrics used to assess competency?	
Medication Safety and Quality	
Topic	**Completed**
What is the pharmacy department's approach with staff involved in a medication error?	
Discuss how each of the following contribute to organizational performance and CQI: TJC (accreditation, medication use standards); Institutional Policies and Procedures; National Patient Safety Goals	
How and where does the pharmacy's quality assessment program integrate with the hospital's or health system's quality assessment and improvement activities?	
To what extent are pharmacists and/or pharmacy managers at the institution involved with improvement techniques such as RCA (includes cause and effect), FMEA, and PDS/CA. What system issues have been addressed within the previous 12-months using quality improvement techniques?	
Review the most recent Hospital National Patient Safety Goals (NPSG) and discuss their relevance to pharmacy and how they are/will be implemented.	
What are the policies and procedures for assuring safe medication use? Examples include: look-alike /sound-alike medications, high alert medications, unapproved abbreviations	
Does the pharmacy department and/or the institution have a systematic program for quality assessment and improvement of pharmacy services and the medication-use system? ***Tip**: The program should include routinely evaluating the literature for new technologies or successful practices that have been demonstrated to enhance safety in other organizations to determine if such technologies or practices can improve the hospital's medication-use system.*	
Professional Practice and Professional Development	
Topic	**Completed**
Is each pharmacist expected to have a continuous professional development plan? If not, what is the preferred alternative approach?	
How is the pharmacist's continuous professional development plan used for competency assessment and promotion? If not used at the institution for this purpose, explore the advantages and disadvantages of using such an approach as a component of professional competency.	