GOALS AND ESSENTIAL ELEMENTS FOR MONITORING DRUG THERAPY

GOALS

A. To maintain an up-to-date database on the patient's condition.
B. To organize the database in a way that facilitates correlation and integration of information.
C. To utilize this database to evaluate the therapeutic effectiveness of current drug therapy, establish existent problems (drug and non-drug related) and anticipate potential drug problems.

ESSENTIAL ELEMENTS

A. Name, age, weight, sex, race, should be recorded.

A. Allergies and current medications should be recorded from the patient interview

B. Problem:

1. A problem can be defined as a proven diagnosis; a physiologic entity or syndrome; a symptom; a physical sign or finding, or an abnormal laboratory value.

2. Based on the pharmacy interview, physician's work-up, nurse's work-up, the old chart, and admission laboratory data, an initial problem list can be defined. All problems should be listed.

   Problem number 1 should be assigned to the primary reason for admission. All other active problems should follow the primary problem and should be numbered sequentially. Inactive problems should follow the “other” active problems and should be assigned sequential numbers and designated as “inactive” under the consideration column.

   As new problems arise, the date should be noted, the problem stated, and the next sequential number assigned.

   The rationale for the use of any medication should be based on the problem list and considerations

C. Considerations

1. Considerations can be defined as those thoughts relating to the problem viewed from a pharmacist perspective.
   a. Is the problem drug-induced?
   b. Are any of drugs the patient currently receives known to aggravate the problem or be affected by the problem?
   c. What potential therapeutics maneuvers (drug and non-drug) can be utilized to treat the problems?
   d. Correlative with the patient’s database, what would be the therapy or therapies of choice?

2. Not every problem will have an associated consideration or considerations.

D. Complete Medication Profile

E. Lab Data

1. Record only serial lab data which will reflect the status of the patient’s problem list and considerations or as instructed by preceptor.

   a. e.g., if the patient has diabetes insipidus the plasma electrolytes (N+, K+, Cl-, HC03-), osmolality, urine volume and fluid intake, and his body weight should be monitored.
   b. e.g., if the patient is receiving an aminoglycoside, the patient’s WBC, Cr, BUN, and fever should be followed.

   Appropriate considerations and recommendations would then be recorded.