Precepting Tips

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UCSD Medical Center
Outline

- Review clinic structure
- Role of the Transplant Pharmacist
- Role of the Student Pharmacist
- Precepting Tips
Solid Transplant Clinics

- 8 half day clinics
  - 10-20 patients per clinic
- Organ Transplanted
  - Kidney, Kidney/Pancreas
  - Liver
  - Heart
  - Lung, Heart/Lung
- Time Post Transplant
  - Peri-operative period
  - Long-term follow-up
Multidisciplinary Team

- Physician
- Social Worker
- Patient
- Pharmacist
- Dietician
- Coordinator
Role of the Ambulatory Care Transplant Pharmacist

- Conduct medication history for each patient
- Review laboratory results and goals with patients
- Evaluate medication profile for drug related problems
  - Immunosuppression
  - Post transplant DM
  - Hypertension
  - Infection prophylaxis
  - Renal/hepatic dosage adjustments
- Recommend changes to team
- Prepare prescriptions
- Provide updated medication list and counseling
- Document in electronic medical record
Role of the Ambulatory Care Transplant Pharmacist

- Patient education for transplant support group meetings
- Staff education
- Prepare/update transplant protocols/policies and procedures
- Participation in selection, team, quality assurance and research committees
- Liaison to outpatient pharmacy
  - Prescription questions
  - Insurance issues
- Adherence monitoring program
- Assist with patient access to medication
  - Patient assistance programs
Electronic Medical Record

Medication Documentation

<table>
<thead>
<tr>
<th>Medication Name</th>
<th>Sig (F3 to Edit)</th>
<th>Taking?</th>
</tr>
</thead>
<tbody>
<tr>
<td>calcitRIOL (ROCALTROL) 0.25 MCG capsule</td>
<td>Take 1 Cap by mouth three times a week.</td>
<td>✔️</td>
</tr>
<tr>
<td>tacrolimus (PROGRAF) 1 MG capsule</td>
<td>Take 4 Caps by mouth 2 times daily.</td>
<td>✔️</td>
</tr>
<tr>
<td>NIFEdipine (ADALAT CC) 50 MG CR tablet</td>
<td>Take 1 Tab by mouth 2 times daily.</td>
<td>✔️</td>
</tr>
<tr>
<td>SIMVASTATIN 10 MG OR TABS</td>
<td>1 TABLET AT BEDTIME</td>
<td>✔️</td>
</tr>
<tr>
<td>ONETOUGH ULTRA TEST VI STRP</td>
<td>FOR BLOOD SUGAR TESTING AS DIRECT</td>
<td>✔️</td>
</tr>
<tr>
<td>FAMOTIDINE 20 MG tablet</td>
<td>Take 20 mg by mouth at bedtime.</td>
<td>✔️</td>
</tr>
<tr>
<td>MAGNESIUM OXIDE 400 MG tablet</td>
<td>Take 400 mg by mouth 2 times daily.</td>
<td>✔️</td>
</tr>
<tr>
<td>PREDNISONE 5 MG OR TABS</td>
<td>2 TABLETS DAILY</td>
<td>✔️</td>
</tr>
<tr>
<td>METOPROLOL TARTRATE 50 MG OR TABS</td>
<td>2 TABLET TWICE DAILY</td>
<td>✔️</td>
</tr>
</tbody>
</table>

Last Reviewed by [redacted]
=Patient Reported ✔️ =Taking

Medication List Comments:

Pharmacist to review meds....
## MedAction Plan

<table>
<thead>
<tr>
<th>Take These Medications</th>
<th>At These Times</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Prograf®</strong> (Tacrolimus) 1mg</td>
<td>7am</td>
</tr>
<tr>
<td>*Prevents rejection. **EMPTY STOMACH = Take 1 hr before food or 2 hrs after food ** <strong>Take after morning blood test drawn</strong></td>
<td>1 Capsule(s)</td>
</tr>
<tr>
<td><strong>Cellcept®</strong> (Mycophenolate mofetil) 250mg</td>
<td></td>
</tr>
<tr>
<td><em>Prevents rejection</em></td>
<td></td>
</tr>
<tr>
<td>4 Capsule(s)</td>
<td>4 Capsule(s)</td>
</tr>
<tr>
<td><strong>Prednisone</strong> 5mg</td>
<td></td>
</tr>
<tr>
<td><em>Prevents rejection</em></td>
<td></td>
</tr>
<tr>
<td>7 Tablet(s)</td>
<td></td>
</tr>
<tr>
<td><strong>Sulfamethoxazole; Trimethoprim SS = 400mg/80mg</strong></td>
<td></td>
</tr>
<tr>
<td><em>Treats/prevents bacterial infections. REPORT RASH</em></td>
<td></td>
</tr>
<tr>
<td>1 Tablet(s)</td>
<td></td>
</tr>
<tr>
<td><strong>Valcyte®</strong> (Valganciclovir Hydrochloride) 450mg</td>
<td></td>
</tr>
<tr>
<td><em>Treats/prevents viral infections</em></td>
<td></td>
</tr>
<tr>
<td>2 Tablet(s)</td>
<td></td>
</tr>
<tr>
<td><strong>Fluconazole</strong> 100mg</td>
<td></td>
</tr>
<tr>
<td><em>Treats/prevents fungal infections</em></td>
<td></td>
</tr>
<tr>
<td>1 Tablet(s)</td>
<td></td>
</tr>
<tr>
<td><strong>Famotidine</strong></td>
<td></td>
</tr>
</tbody>
</table>
Student Pharmacist

- Extender of Transplant Pharmacist
**Syllabus**

- **Calendar**
  - Topic discussions
  - Required readings

<table>
<thead>
<tr>
<th>Monday</th>
<th>Tuesday</th>
<th>Wednesday</th>
<th>Thursday</th>
<th>Friday</th>
</tr>
</thead>
<tbody>
<tr>
<td>5 Calcineurin Inhibitors</td>
<td>6</td>
<td>7 Antiproliferatives</td>
<td>8</td>
<td>9 Steroids</td>
</tr>
<tr>
<td>read NEJM paper by Halloran on Kidney Transplantation and UCSD Protocols</td>
<td></td>
<td>read NEJM paper by Halloran on Kidney Transplantation and UCSD Protocols</td>
<td></td>
<td>read DiPiro and UCSD Protocols</td>
</tr>
<tr>
<td>12 Fungal/PCP</td>
<td>13</td>
<td>14 CMV/VIRAL</td>
<td>15</td>
<td>16 Liver txp</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td>overview of liver txp and UCSD Protocols</td>
</tr>
<tr>
<td>19 Holiday – no clinic</td>
<td>20</td>
<td>21 Rejection</td>
<td>22</td>
<td>23 HTN/proteinura</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td>read DiPiro and UCSD Protocols</td>
</tr>
<tr>
<td>26 Diabetes</td>
<td>27</td>
<td>28 Hepatitis B</td>
<td>29</td>
<td>30 Hepatitis C</td>
</tr>
</tbody>
</table>
Common Topic Discussions

- Immunosuppression
- Acute and Chronic Rejection
- Post Transplant Infections/Opportunistic infections
- Diabetes
- Hypertension
- Hyperlipidemia
- Bone disease
- Hepatitis B and C
Precepting Tools: Pharmacist Extenders

Week 1: Student Shadows Pharmacist

Week 2: Pharmacist Shadows Student

Weeks 3-6: Student See Patient & Presents to Preceptor
Precepting Tools: Chart Preparation and Admin Time

- 2 half days per week
- Chart preparation
  - Review labs
  - Medication regimen
  - Prepare flow-sheets
- Patient follow-up
- Adherence monitoring
- Answer drug information questions
- Unit inspections
Precepting Tips: Evaluations

- On-going feedback in clinic
  - Shadowing
  - Patient presentations
  - Residents required to provide verbal evaluations of students with preceptor
  - Use midpoint evaluation to structure learning activities for remainder of rotation
- Feedback from team
  - Physicians, nurses, patients
Conclusions

- Keys to success
  - Organization and structure
  - Timely evaluations
  - Administrative time