College of Pharmacists of British Columbia



Profile Check



Profile Check

Review PharmaNet and local profile to assess the appropriateness of drug therapy and resolve any drug therapy problems.

Health Professions Act (HPA) Bylaws require a pharmacist to complete this step for every prescription, both new and refills.

Pharmacists are the medication experts of the healthcare team. An integral part of that role is to assess medication for appropriateness of therapy. The collection of information regarding the patient's medication history is fundamental to this process. PharmaNet provides a list of all prescriptions filled at any community pharmacy within BC in the previous 14 months. This information should be used to supplement the medication record available on the patient's local profile at the pharmacy, and any additional information collected from the patient.

PharmaNet also supplies information on any previously recorded clinical conditions including drug allergies and adverse drug reactions.

Additionally, PharmaNet provides Drug Use Evaluation (DUE). It compares the current prescription being processed to active medications in the history to assess:

- drug-to-drug interactions
- drug to prior adverse reactions
- duplicate therapy or ingredients
- dose too high or dose too low¹

Both the PharmaNet profile and the DUE returned by PharmaNet must be reviewed and assessed by a pharmacist for every prescription, new and refill. Pharmacists processing prescriptions will have access to the PharmaNet profile and DUE displayed in real time during prescription processing. However, when a pharmacy assistant or technician processes prescriptions, the pharmacist is still required to review the PharmaNet profile and DUE. If the pharmacy software system is incapable of displaying both the PharmaNet profile and DUE after prescription processing, then a pharmacist is required to process all prescriptions.

It is acceptable to re-access a patient's PharmaNet profile for the purpose of assessing therapy, even if it occurs on a different day from prescription processing. The reason for access must be documented. PharmaNet access audits conducted by the Ministry of Health should not deter appropriate patient record checks.

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¹ http://www2.gov.bc.ca/assets/gov/health/health-drug-coverage/pharmacare/3-12to3-19.pdf



It is important to note that PharmaNet's DUE is not a replacement for the pharmacist's cognitive assessment of drug therapy. A lack of a PharmaNet DUE does NOT verify the absence of a drug therapy problem. Pharmacists should maintain up-to-date clinical pharmacy knowledge to appropriately assess drug therapy.

Consider the following questions when reviewing patient profiles and medication histories to the appropriateness of drug therapy:



Cipolle R, Strand, L, Morley, P.
Pharmaceutical Care Practice: The Clinician's Guide,
2nd ed. New York: McGraw-Hill, 2004

Is there a clinical indication for drug therapy? ☐ Is the drug therapy optimal for that clinical condition? Is there any therapeutic duplication? ☐ Is the drug one of the most effective options? Assess if the dose, dosage form, route, frequency & duration of administration are appropriate? ☐ For ongoing therapy, are the monitoring targets being achieved? (Consider signs & lab test results, self-monitoring) ☐ Is the dosage safe? Any contraindications or allergies? Are there any potential drug interactions? ☐ Is the monitoring plan appropriate? ☐ For ongoing, therapy, any signs of adverse reactions, intolerances or toxicities? ☐ Is the patient willing & able to adhere to therapy as prescribed? (Consider cost concerns, culture, health

literacy/education)

Potential Drug Therapy Problems (DTP's) include:

- Needs additional drug therapy
- Dose too low
- Dose too high
- Ineffective drug
- Unnecessary drug therapy
- Adverse drug reaction
- Nonadherence

If any drug therapy problems are identified as a result of this assessment, the pharmacist should *take appropriate action* to resolve the issue.

- This should be done in collaboration with the patient.
- It may also be necessary to consult with the prescribing practitioner to resolve the drug therapy problem.



Who can complete these activities?

	Pharmacist	Pharmacy Technician
Review information	V	
on PharmaNet		
Review DUE on	V	
PharmaNet		
Assess & Resolve Drug	V	
Therapy Problems		

For more information, please refer to: HPA Bylaws Schedule F Part 1, section 6 and 11.

Why is this a fundamental standard?

Case in point:

A patient who was on azathioprine therapy was initiated on allopurinol. The pharmacist dispensing the allopurinol prescription missed the interaction between these two drugs. Over the next two months, both medications were refilled by two other pharmacists. Each time, the pharmacists did not review PharmaNet and did not detect the drug interaction. The patient was admitted to the hospital after she started experiencing symptoms of pancytopenia, where she remained for 18 days and had to undergo several blood transfusions.

http://www.bcpharmacists.org/readlinks/what-went-wrong-patient-profiles-and-adverse-drug-reactions

Being vigilant by reviewing PharmaNet and assessing the appropriateness of drug therapy for every prescription is a fundamental principle to ensure that the *right patient* is getting the *right dose* of the *right drug* at the *right time*.