EXPERIENCE OF IMPLEMENTATION OF A CLINICAL PHARMACY SERVICE IN A FIRST-LEVEL HOSPITAL IN PORTUGAL

Catarina Luque J*, Pâdusa Santos C*, Santos M*; Porto da Palma D
*Hospital de Cascais - Dr. José de Almeida, Serviços Farmacêuticos, Cascais, Portugal

BACKGROUND

In February 2017, a Clinical Pharmacy Service (CPS) team based on the ward was implemented at the Internal Medicine Service in a 1st level Portuguese hospital with several objectives: to identify, solve and prevent the occurrence of therapeutic problems, to guarantee the rational use of medicines, to reduce hospital stay and improve treatment adherence to ensure medicines optimization along with a multidisciplinary team.

PURPOSE

To identify the actions and results obtained after the implementation of a CPS at the Internal Medicine Service in a 1st level hospital in Portugal.

MATERIAL AND METHODS

STUDY
Retrospective Descriptive

PERIOD
8 months: February to September 2017

RECORDS
Ages, sex and provenance
(home/hospital)
CPS interventions
Drugs involved
Degree of acceptance

RESULTS

14,955 prescriptions
902 alerts sent

163 Patients
79 male (48.47%)
Mean age 76.83
Lived at home
(123) (75.46%)

196 actively interventions discussed on the ward

Top drugs involved
Paracetamol
48 interventions
(24.49%)
Enoxaparin
29
(14.93%)
Vancomycin
20
(10.26%)

Type of intervention
Switch from endovenous to oral route
61 (31.25%)
Inappropriate dose according to patient renal function
20 (10.26%)
Medicines reconciliation
20 (10.26%)

CONCLUSIONS

The Clinical Pharmacy Service identified and intervened in a large number of inadequate/inaccurate prescriptions in the Internal Medicine Service. As a challenge it is expected an extension to other clinical services that will benefit from the activity of the Clinical Pharmacy Team.

ACKNOWLEDGEMENTS
Thanks to all the great multidisciplinary Internal Medicine and Pharmacy Services team from Hospital de Cascais - Dr. José de Almeida