Standardization of medication counselling material for paediatric solid organ transplant recipients and their families

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Abstract number: INT-002

Background
Paediatric drug therapy in solid organ transplants is complex and demanding. Lack of patient medication counselling material written in Finnish led to situation where the quality of the drug information to patients and their families was very heterogeneous depending on the healthcare professionals providing it.

Purpose
- To improve and uniform the content and quality of patient medication counselling by creating a written counselling material and a patient guide for pediatric solid organ transplant recipients
- To uniform practices and procedures on the ward concerning medication treatment
- To show how clinical pharmacist can support the multiprofessional team and patients and promote medication safety

Material and methods
Healthcare professionals (nurses, physicians, pharmacists) providing medication counselling were observed to find out the current situation with best practices and shortcomings. A summary of the observations was used as a basis for developing written medication counselling material. Clinical pharmacist’s experience and drug information databases were used to complement the information gathered from the observations.

Results
The need for a practical and uniform guide for medications most commonly used with pediatric organ transplant patients was underlined with the observations. Consequently, such a material and guide was developed (Table 1). Due to the results of the observations, the further development of medication counselling process was taken into focus on the ward. The role of the clinical pharmacist was modified by removing tasks concerning drug preparation and logistics. (Picture 1.)

Conclusions
The written medication counselling material and patient guide for pediatric organ transplant recipients helps both the staff and families to understand the use, goals and special considerations of the drug therapy. The use of written counselling material uniformizes and standardizes the content and the quality of medication counselling given by the different health care professionals. The new role of the clinical pharmacist has increased multiprofessional co-operation on the ward.

Table 1. Common aids used in dosing and handling of medication as presented in the written counselling material

<table>
<thead>
<tr>
<th>Common aids used in dosing and handling of medication</th>
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<tbody>
<tr>
<td><strong>Tablet splitter</strong></td>
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<tr>
<td><strong>Tablet crusher</strong></td>
</tr>
<tr>
<td><strong>Dosets for medication</strong></td>
</tr>
<tr>
<td><strong>Oral syringes</strong></td>
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<tr>
<td><strong>Tablet film (Medcoat®) and gel (Gloup®)</strong></td>
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</tbody>
</table>

Picture 1. Modified job description for clinical pharmacist

Medication logistics
Shelving of medication and fluid products
Dispensing oral medication and drug preparation
Unplanned guidance and counselling of patients and families in a rushed schedule

Participation to medical rounds twice a week
Planned and scheduled medication counselling for patients and families
Programmed evaluation of patient’s medication during 3 month check-up on the ward
Creating and updating instructions and guidelines of drug therapies in the ward