

UNIVERSITY OF MISSISSIPPI SCHOOL OF PHARMACY
ADVANCED PHARMACY PRACTICE EXPERIENCES

Student: _____ Date: ___/___/___ Rotation Type: **AMBULATORY CARE** Rotation # _____

Preceptor: _____ Preceptor Signature: _____

APPE Ambulatory Care PRCT 587 Medication Intervention

Directions: Choose one patient, thoroughly review his/her history and medication list, and then answer the following:

Identify one medication intervention you can make or have made on this patient, and then describe the intervention in detail.
(Question 1 of 8 - Mandatory)

Did the intervention you identified prevent the patient from harm? (Question 2 of 8 - Mandatory)

Yes No

Did it lead to a cost savings for the patient? (Question 3 of 8 - Mandatory)

Yes No

What was the impact on therapy? (Question 4 of 8 - Mandatory)

Who did you notify concerning your medication intervention? Was your recommendation taken? If not, why not? (Question 5 of 8 - Mandatory)

Is there any potential therapeutic duplication in the patient's profile that could lead to an intervention? (Question 6 of 8 - Mandatory)

Yes No

Identify one drug on the profile that requires laboratory monitoring. Describe what monitoring is needed, how often that monitoring should occur, and whether or not it is occurring for this patient. (Question 7 of 8 - Mandatory)

After reviewing the patient's history and current problem list, are there any medications not on the current list that should be? If so, what are they? Are there guidelines available for treating the problems being followed? If so, what are they called and what agency is responsible for releasing them? (Question 8 of 8 - Mandatory)

Review your answers in this evaluation. If you are satisfied with the evaluation, click the SUBMIT button below. Once submitted, evaluations are no longer available for you to make further changes.