

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

Cotrina Luque J<sup>1</sup>, Pádua Santos C<sup>1</sup>, Santos M<sup>1</sup>, Porfirio da Palma D<sup>1</sup>  
<sup>1</sup> 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 1<sup>st</sup> 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 1<sup>st</sup> level hospital in Portugal.

### MATERIAL AND METHODS

**STUDY**  
Retrospective  
Descriptive

**PERIOD**  
8 months:  
February  
to September  
2017

**RECORDS**  
Age, sex and provenance  
(home/hospice)  
CPS interventions  
Drugs involved  
Degree of acceptance



### RESULTS

### RESULTS

14955 prescriptions  
902 alerts sent

**163**

Patients  
79 male (48,47%)  
Mean age  
76,61  
Lived at home  
(123) (75,46%)

**196**  
actively  
interventions  
(discussed  
on the ward)

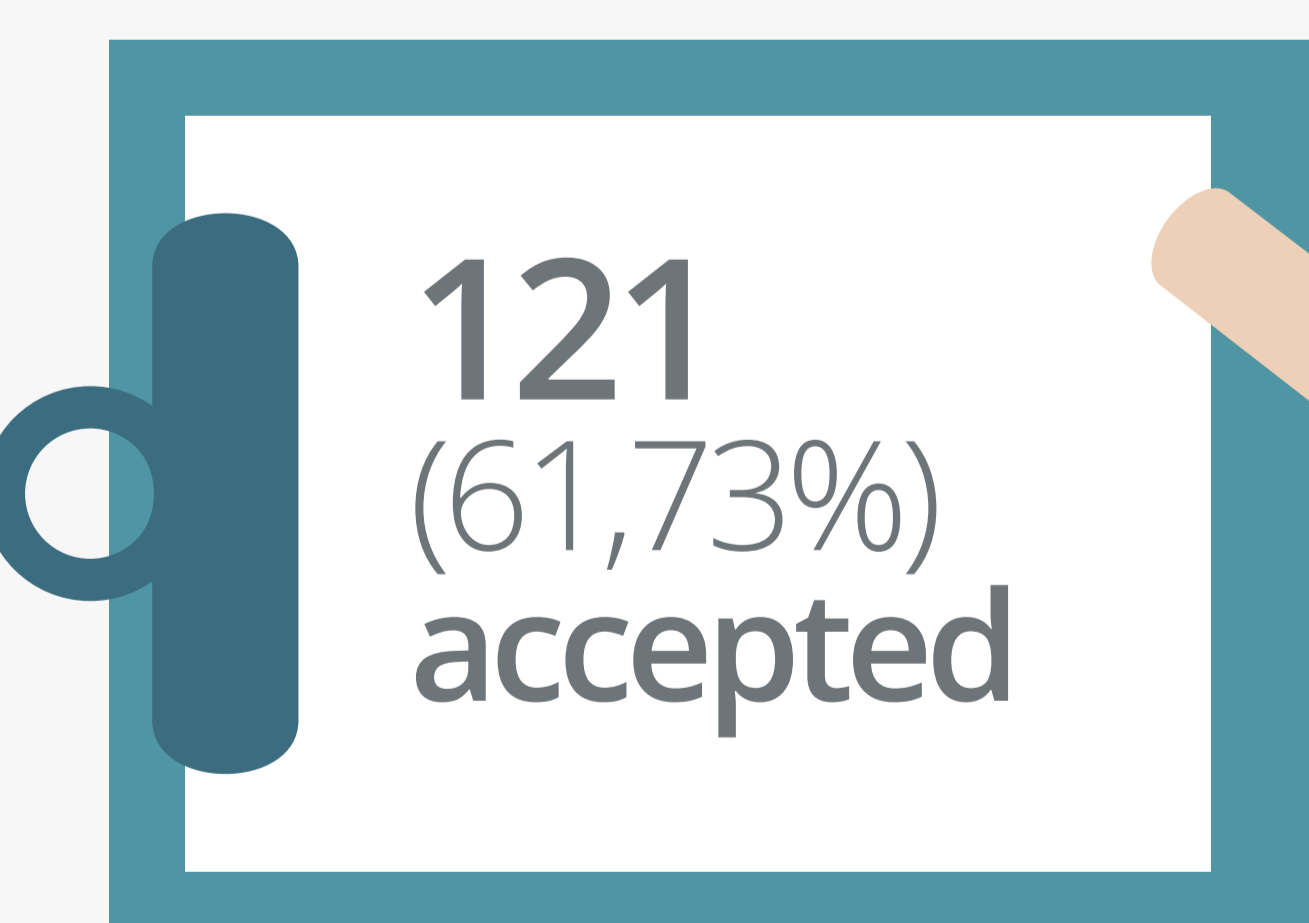
Top drugs involved

**Paracetamol**  
48 interventions  
(24,49%)  
**Enoxaparin**  
29  
(14,80%)  
**Vancomycin**  
20  
(10,20%)

Type of intervention

**Switch from endovenous  
to oral route**  
61 (31,12%)  
**Inappropriate dose  
according to patient  
renal function**  
29 (14,80%)  
**Medicines reconciliation**  
20 (10,20%)

**121**  
(61,73%)  
accepted



### CONCLUSIONS

The Clinical Pharmacy Service identified and intervened in a large number of inadequate / incomplete 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

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