

# INVOLVEMENT OF THE PHARMACIST IN THE COMPUTERISED MEDICAL RECORD



Martí-Gil C, Marcos-Pérez G, Sánchez-Gundín J, Llorente-Serrano M, Recuero-Galve L, Barreda-Hernández D.  
Pharmacy Department. Virgen de la Luz Hospital. Cuenca. Spain



## Background

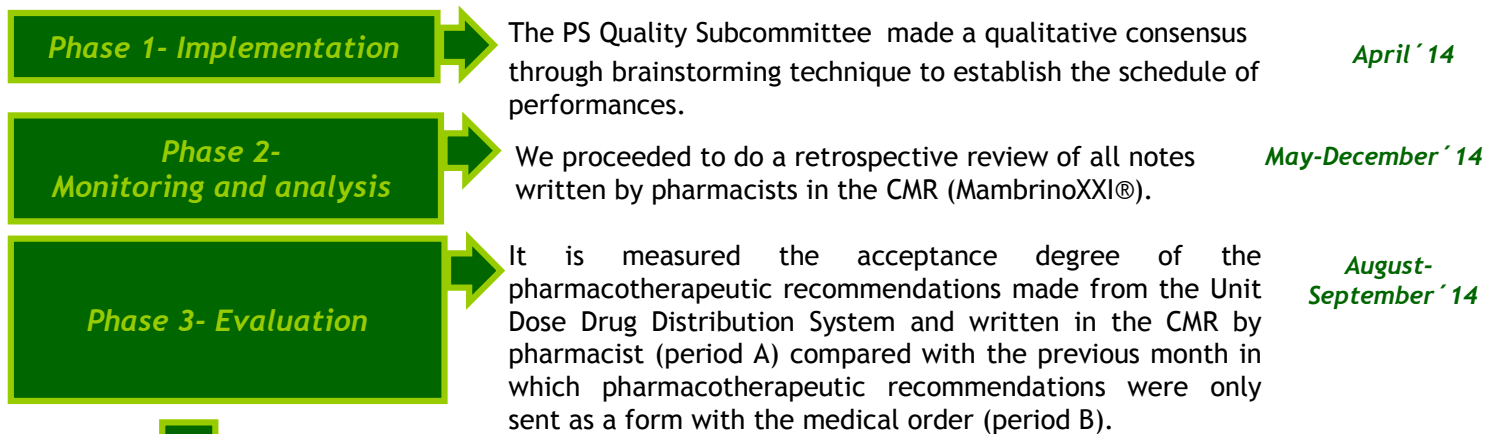
After analyzing the results and suggestions proposal on the satisfaction surveys conducted to internal customer of Pharmacy Service (PS), PS Quality Subcommittee proposed, among others, as an improvement action: "Increase the presence of the pharmacist in the computerised medical record (CMR)".

## Objectives

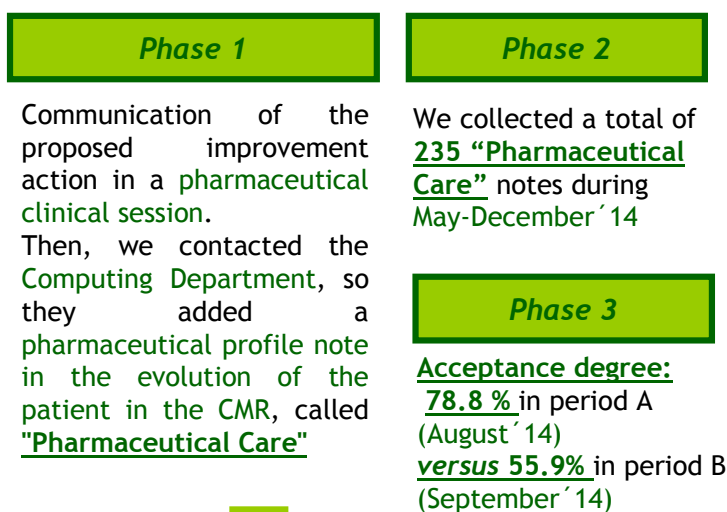
- ✓ To describe the process undertaken for the implementation of this improvement action
- ✓ To quantify and analyze the participation of the pharmacist in the CMR
- ✓ To evaluate its impact.



## Material and method



## Results



"Pharmaceutical Care" note types	n	%
Substitution of not included guide drugs by alternatives medications covered by guide	60	25,5%
Special drug dispensation	31	13,2%
Clarification and/or confirmation of the prescription	23	9,8%
Sterile/non-sterile compound preparation	16	6,8%
Dosage recommendations	15	6,4%
Shortage, out of stock and provider pharmacy incidents	15	6,4%
Antibiotic or others drugs stopped due to antibiogram, duplicity or duration	14	6,0%
Electrolyte monitoring	11	4,7%
Pharmacotherapeutical information	9	3,8%
Administration, management and stability drugs	8	3,4%
Substitution for drug interaction	8	3,4%
Not included guide drugs and off-label drugs incidents tramitation	8	3,4%
Therapeutic interchange protocol	6	2,6%
Allergies/intolerances	4	1,7%
Drug application protocol	3	1,3%
Pharmaceutical care outpatient	2	0,9%
Renal failure dosage readjustment	1	0,4%
Others	1	0,4%

## Conclusions

The technology as a facilitator support allows medical record to be a tool providing a permeability in a continuous information access with a traceability in pharmaceutical care -in particular- and welfare -in general- throughout the whole process of the patient for clinical decision making higher quality care.

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