

# **HOSPITAL SULTAN ABDUL AZIZ SHAH UNIVERSITI PUTRA MALAYSIA**

**Kod Dokumen: HSAAS/FAR/GP12** 

### **GUIDELINE FOR CLINICAL PHARMACY**

## 1.0 PURPOSE

This guideline provides a general process of pharmacotherapy monitoring of patients in ward by clinical pharmacist.

## 2.0 TERMINOLOGY

ADR : Adverse Drug Reaction

CP1 : Medication History Assessment Form

CP2 : Pharmacotherapy Review Form

CP3 : Clinical Pharmacy Report Form

CP4 : Discharge Referral Note

: Hospital Sultan Abdul Aziz Shah HSAAS

: Over-The-Counter OTC

### 3.0 GUIDE

No.	Activity	Action
1.	A. Recommend pharmacotherapy regimen and monitor patient progress	Clinical
	<ul> <li>Comprehend patient's case notes, review patient's medication</li> </ul>	Pharmacist
	history, perform medication reconciliation and participate in ward rounds	(UF 48/44/41)
	<ul> <li>Identify and report ADR and medication error</li> </ul>	
	<ul> <li>Document and use all appropriate forms (CP1, CP2, CP3 &amp; CP4)</li> </ul>	
	B. Patient medication counseling and bedside dispensing	
	<ul> <li>Conduct bedside dispensing and any drug-relate enquiries</li> </ul>	
	C. Ward rounds/Bedside Case Discussion	
	<ul> <li>Ensure appropriate medication use and record any pharmaceutical care issues and intervention done</li> </ul>	



# **HOSPITAL SULTAN ABDUL AZIZ SHAH UNIVERSITI PUTRA MALAYSIA**

**Kod Dokumen: HSAAS/FAR/GP12** 

**GUIDELINE FOR CLINICAL PHARMACY** 

#### 4.0 **DESCRIPTION**

No	Description	Person in charge
1.	New patient admission	
2.	OBTAIN MEDICATION HISTORY  Obtain and collect patient's current and past medication history, including supplements, OTC and herbal preparations.	Pharmacist
3.	<ul> <li>PHARMACOTHERAPY REVIEW</li> <li>Conduct pharmacotherapy review by monitoring medication effect, compliance, adverse drug reactions and outcomes related to therapy.</li> <li>If pharmacotherapy requires interventions, communicate findings with prescriber.</li> <li>Record information into CP2 when interventions are accepted.</li> <li>If a patient requires counseling, proceed to the counseling workflow.</li> <li>If any ADR is identified, proceed to ADR reporting workflow.</li> </ul>	Pharmacist
4.	<b>DOCUMENTATION</b> Document any activities in the ward. All daily activities in the ward should be documented as statistics in CP3.	Pharmacist
5.	PATIENT MONITORING  Monitor patient progress daily and update CP2 & CP3 when necessary, according to patient progress.	Pharmacist
6.	PATIENT REFERRAL Issue CP4 to refer a patient requiring drug-related progress monitoring.	Pharmacist