

WARNING

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Family Name					
Given Name/s					
Student Number					
Teaching Period	Semester 2, 2018				

PHA307 – Clinical Pharmacy Practice	DURATION	
	10 minutes for computer configuration	
	Reading Time:	10 minutes
	Writing Time:	120 minutes
INSTRUCTIONS TO CANDIDATES		
<p>Answer both (2) questions in the answer booklets provided. 50 Marks per question (Total = 100 marks)</p> <p>Students are allowed to bring their own Australian Medicines Handbook. It can be flagged or highlighted but with no additional annotations or material inserted.</p> <p>Students have access to FRED dispensing program and eMIMs on the computer desktop.</p>		
EXAM CONDITIONS		
<p><u>You may begin writing from the commencement of the examination session.</u> The reading time indicated above is provided as a guide only.</p>		
This is a RESTRICTED OPEN BOOK examination		
Any non-programmable calculator is permitted		
No handwritten notes are permitted		
No dictionaries are permitted		
ADDITIONAL AUTHORISED MATERIALS	EXAMINATION MATERIALS TO BE SUPPLIED	
Lecture Textbook/s (AMH – flagged or highlighted but with no additional annotations or loose pages/material inserted).	3 x 8 Page Book	

**THIS EXAMINATION IS PRINTED
DOUBLE-SIDED.**

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LEFT BLANK.**

Prescription-based Questions

Answer BOTH (2) questions in the Answer Booklets provided.

Use a separate booklet for each question/prescription.

Analyse and process the following prescriptions and provide the most appropriate management plan for the consumer.

Your answer should include the procedure you would follow when accepting in the prescription for dispensing and the most appropriate management plan/advice and comprehensive counselling for the consumer. You will be expected to:

- i. Confirm the legality of the prescription(s)
 - Make a statement indicating why the prescription is/is not legal, with justification for your reasoning.
 - If you feel there is a legal discrepancy, contact the doctor and make a record of this in your answer. Assume that the doctor has provided you with a legal replacement script, with the same item(s).
- ii. Identify the consumer, including approximate age, sex and anything else you would want/need to know to make an accurate assessment.
- iii. Identify the consumer's medical conditions (either stated or presumed) based on their medication history and the information provided in the summary.
- iv. Identify (if any) drug-related problems, including adverse drug reactions, drug interactions, missing therapy, contraindications, etc, and any disease state-related problems (if any) and provide appropriate solutions.
 - Ensure you explain and justify the severity of the problem and the recommended solution (relevant to the consumer).
 - Contact the prescriber if required. Assume your suggestion has been accepted and note this in your answer booklet.
 - Clarify information with the consumer if required. Assume that your interpretation is correct, and note this in your answer booklet.
- v. Provide comprehensive drug counselling that is appropriate for the consumer. Remember to justify why you are recommending particular actions and be specific with your recommendations, including any lifestyle counselling and additional information you may be providing.
- vi. Demonstrate dispensing skills.
 - Generate appropriate label(s) you would attach to each product using FRED dispense. Ensure these labels are adhered into your answer booklet, along with any C & A labels you would use. If there are repeats and they are printed from FRED dispense, ensure they are inserted into your answer booklet when handing in your work.

Lisette Simpson is a 37-year-old woman who is a regular customer at your pharmacy. Her dispensing history indicates that she has been collecting prescriptions for olanzapine 10mg tablets (dose 10mg daily) on a regular basis for the past 3 years. During that time, she has gained 20kg (height 155cm, weight 75kg) but is happy to be stable and in a much better mental state. Lisette has also been obtaining prescriptions for metformin XR 500mg tablets (increasing over time to current dose 2000mg once daily), perindopril arginine 5mg daily and rosuvastatin 10mg daily for approximately 18 months. Today she presents this prescription, and tells you this is a new medicine for her.

<p>Dr Mitchell Alexander 123 Maluka Court Casuarina NT 0810 (08) 8946 7490 Prescriber no.: 457419</p>	<p>Dr Mitchell Alexander 123 Maluka Court Casuarina NT 0810 (08) 8946 7490 Prescriber no.: 457419</p>
<p>Patient's Medicare no.: 6088 87536 7 - 1 Exp: 09/2020</p> <p>Pharmaceutical benefits entitlement number <input type="text"/></p> <p><input type="checkbox"/> Safety Net entitlement card holder (cross relevant box) <input type="checkbox"/> Concessional or dependant RPBS beneficiary or Safety Net concession card holder</p> <p>Patient's name: MS LISETTE SIMPSON Address: 52 Springfield Way Rosebery, NT 0832</p> <p>Date 20/10/2018 PBS x RPBS <input type="checkbox"/> Brand substitution not permitted</p>	<p>Patient's Medicare no.: 6088 87536 7- 1 Exp: 09/2020</p> <p>Pharmaceutical benefits entitlement number <input type="text"/></p> <p><input type="checkbox"/> Safety Net entitlement card holder (cross relevant box) <input type="checkbox"/> Concessional or dependant RPBS beneficiary or Safety Net concession card holder</p> <p>Patient's name: MS LISETTE SIMPSON Address: 52 Springfield Way Rosebery, NT 0832</p> <p>Date 20/10/2018 PBS x RPBS <input type="checkbox"/> Brand substitution not permitted</p>
<p>Gliclazide-MR 30mg tablet 30mg daily Qty: 100 Nil rpts 1 item <i>M Alexander</i> Dr Mitchell Alexander M.B.B.S.</p>	<p>Gliclazide-MR 30mg tablet 30mg daily Qty: 100 Nil rpts 1 item <i>M Alexander</i> Dr Mitchell Alexander M.B.B.S.</p>
<p>Pharmacist patient COPY</p> <p>Doctor to sign original and duplicate</p>	<p>Medicine Australia (MVA)</p> <p>Please turn over for privacy note</p> <p>I certify that I have received this medication and the information relating to any entitlement to free or concessional pharmaceutical benefits is not false or misleading.</p> <p>_____/_____/_____ Date of supply</p> <p>_____ Patient's or agent's signature</p> <p>_____ Agent's address</p> <p>4004 (10/06)</p>

Lisette seems very happy, and confides in you that she has been in a new relationship for 6 weeks. Lisette would like your advice on contraceptive options for her (she and her boyfriend are currently using condoms). She would like to use something more reliable than condoms, as she does not want to have children. Lisette remembers using the oral contraceptive pill, *Levlen*® when she was in her 20's and would like to know if the pill would be a suitable option for her.

End of Question ONE

Mr Mangoes is a customer in his early 70's, who presents this prescription to you for dispensing. He tells you that this was written a few months back for the dermatitis on his forearms and wrists that flares from time to time, which he has had for most of his life. He usually manages it with hydrocortisone 1% cream that he purchases without a prescription. However, he has been using the hydrocortisone cream of late but his dermatitis is not settling. You notice that the skin on both his arms is very dry and inflamed.

Dr Mitchell Alexander (08) 8946 7490 Prescriber no.: 457419	Dr Mitchell Alexander (08) 8946 7490 Prescriber no.: 457419
Patient's Medicare no.: 6077 76425 6 - 1 Exp: 03/2020 Pharmaceutical benefits entitlement number: 403 608 781 A <input type="checkbox"/> Safety Net entitlement card holder (cross relevant box) <input checked="" type="checkbox"/> Concessional or dependant RPBS beneficiary or Safety Net concession card holder	Patient's Medicare no.: 6077 76425 6 - 1 Exp: 03/2020 Pharmaceutical benefits entitlement number: 403 608 781 A <input type="checkbox"/> Safety Net entitlement card holder (cross relevant box) <input checked="" type="checkbox"/> Concessional or dependant RPBS beneficiary or Safety Net concession card holder
Patient's name: MR ALBERT MANGOES Address: 23 Cheesewood Way Fannie Bay, NT 0820 Date 20/08/2018 PBS <input checked="" type="checkbox"/> RPBS <input type="checkbox"/> Brand substitution not permitted	Patient's name: MR ALBERT MANGOES Address: 23 Cheesewood Way Fannie Bay, NT 0820 Date 20/08/2018 PBS <input checked="" type="checkbox"/> RPBS <input type="checkbox"/> Brand substitution not permitted
Betamethasone dipropionate 0.05% cream Apply daily to affected areas Qty: 15g 1 rpt 1 item <i>M. Alexander</i> Dr Mitchell Alexander M.B.B.S.	Betamethasone dipropionate 0.05% cream Apply daily to affected areas Qty: 15g 1 rpt 1 item <i>M. Alexander</i> Dr Mitchell Alexander M.B.B.S.
Doctor to sign original and duplicate	Please turn over for privacy note I certify that I have received this medication and the information relating to any entitlement to free or concessional pharmaceutical benefits is not false or misleading. ___/___/___ Date of supply _____ Patient's or agent's signature _____ Agent's address 4004 (10/05)

In addition, Albert tells you that he has developed a rash on his left leg, which started 2-3 days ago, but looks different to his usual dermatitis. You notice that Albert appears to be wearing his pyjama pants. He tells you that the rash on his leg is so sensitive that he can't stand the sensation of clothing on it, and he is unable to wear underpants or anything close to his skin. He thought he'd initially been bitten by an ant, or had an allergic reaction to a plant in the garden, so has been applying hydrocortisone twice daily to help with the itch and irritation and taking loratadine 10mg tablets. However, the rash has spread, is burning and tingling, and is keeping him awake at night, so he thought the prescription betamethasone cream would be more suitable. You invite Albert into the private counselling room so that you can assess his rash, which reveals the following.



Albert's regular prescription medications (he has been taking these long-term) include the following;

Ramipril capsule	10mg daily
Amlodipine tablet	5mg daily
Salbutamol 100mcg/dose MDI	2 puffs every 4 hours when required via spacer
Fluticasone 250mcg/salmeterol 25mcg/dose MDI	1 puff twice daily via spacer
Atorvastatin tablet	20mg daily

End of Question TWO

PHA307 Clinical Pharmacy Practice – Assessment Rubric for Demonstration of Pharmacist Dispensing & Counselling Skills – Question One

STUDENT NAME:	Absent	Novice	Competent	Proficient
	0 marks	2 marks	3 marks	5 marks
Who is the consumer? Identified comorbidities (stated or presumed from prescribed medicines) including untreated illnesses, and other patient characteristics	Did not identify correct consumer and characteristics.	Gathered some information about consumer	Gathered most of the pertinent information about the consumer	Gathered all pertinent characteristics and information about consumer
	0 marks	2 marks	3 marks	5 marks
Meets legal labelling and dispensing requirements – written communication meets scope of professional practice with quality labelling and repeats if applicable	Poor label with misleading instructions and major error(s) e.g. wrong patient name, expired script	Some labelling errors including misleading instructions, incorrect spelling	Adequate label with errors that could be overcome with appropriate counselling (e.g. missing C & A labels)	Excellent quality of labels with appropriate C & A labels
	0 marks	2 marks	3 marks	5 marks
Comprehension of the prescription – indication, mode of action (medical terminology), PBS requirements, precautions/contraindications. Identify DRP (ADR, interaction, contraindication) with severity. Appropriate contact with prescriber if necessary.	Inadequate clinical judgement. Did not identify significant/relevant drug related problems (DRPs)	Some clinical judgement shown. Identified some DRPs but could not explain significance	Adequate clinical judgement shown. Identified relevant DRPs with some explanation.	Excellent clinical judgement shown, with identification of relevant DRPs & linked mode of action to ADRs
	0 marks	2 marks	3 marks	5 marks
Counselling on use of medication (directions for use/administration, device use, frequency, dosage, how long before symptom relief or resolution expected with follow-up advice if treatment fails)	No counselling provided	Minimal counselling provided with several omissions	Adequate counselling provided with some omissions	Excellent counselling provided, including follow-up advice/timeframe for referral if treatment fails
	0 marks	3 marks	7 marks	10 marks
Recommend appropriate product and/or lifestyle strategy for OTC/customer query issues and justify choices. Counselling on OTC medication/query where appropriate or referral to other health care professional(s).	No recommendation made	Made a clinical recommendation which was incorrect	Made a clinical recommendation which was appropriate but with some errors	Made an appropriate clinical recommendation with excellent justification for action(s)
	0 marks	2 marks	3 marks	5 marks
Self-management and lifestyle advice – holistic approach considering social, physical, mental, cultural and spiritual issues where relevant	No lifestyle advice provided	Minimal lifestyle advice provided	Adequate lifestyle advice provided with some omissions	Comprehensive lifestyle advice provided with specific information
	0 marks	2 marks	3 marks	5 marks
Ensured patient understanding, explained reasons for recommendations in language that a low health literate person would understand	No reinforcement of information provided. Little progression from topic to topic.	Some reinforcement of information but using medical jargon. Some logic and progression through topic(s).	Clear reinforcement of information using mostly appropriate language with adequate progression through counselling interview	Excellent reinforcement of information using entirely appropriate language, with clear progression through topic(s) to emphasise points
	0 marks	2 marks	3 marks	5 marks
Written information provided to support counselling	No written material offered to support oral counselling	Written material provided without explanation	Written material provided with relevant connection to information given to patient	Written material provided is relevant & utilized to maximise compliance and adherence (QUM)

Comments: Major errors (such as mislabelling for the wrong patient or drug name or overlooking a serious drug related problem [DRP]) can result in the loss of 50% of marks for the scenario when the action is likely to cause injury or death to the patient.

Total: /50

PHA307 Clinical Pharmacy Practice – Assessment Rubric for Demonstration of Pharmacist Dispensing & Counselling Skills - Question Two

STUDENT NAME:	Absent	Novice	Competent	Proficient
	0 marks	2 marks	3 marks	5 marks
Who is the consumer? Identified comorbidities (stated or presumed from prescribed medicines) including untreated illnesses, and other patient characteristics	Did not identify correct consumer and characteristics.	Gathered some information about consumer	Gathered most of the pertinent information about the consumer	Gathered all pertinent characteristics and information about consumer
Meets legal labelling and dispensing requirements – written communication meets scope of professional practice with quality labelling and repeats if applicable	Poor label with misleading instructions and major error(s) e.g. wrong patient name, expired script	Some labelling errors including misleading instructions, incorrect spelling	Adequate label with errors that could be overcome with appropriate counselling (e.g. missing C & A labels)	Excellent quality of labels with appropriate C & A labels
Comprehension of the prescription – indication, mode of action (medical terminology), PBS requirements, precautions/contraindications. Identify DRP (ADR, interaction, contraindication) with severity. Appropriate contact with prescriber if necessary.	Inadequate clinical judgement. Did not identify significant/relevant drug related problems (DRPs)	Some clinical judgement shown. Identified some DRPs but could not explain significance	Adequate clinical judgement shown. Identified relevant DRPs with some explanation.	Excellent clinical judgement shown, with identification of relevant DRPs & linked mode of action to ADRs
Counselling on use of medication (directions for use/administration, device use, frequency, dosage, how long before symptom relief or resolution expected with follow-up advice if treatment fails)	No counselling provided	Minimal counselling provided with several omissions	Adequate counselling provided with some omissions	Excellent counselling provided, including follow-up advice/timeframe for referral if treatment fails
Recommend appropriate product and/or lifestyle strategy for OTC/customer query issues and justify choices. Counselling on OTC medication/query where appropriate or referral to other health care professional(s).	No recommendation made	Made a clinical recommendation which was incorrect	Made a clinical recommendation which was appropriate but with some errors	Made an appropriate clinical recommendation with excellent justification for action(s)
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Comments: Major errors (such as mislabelling for the wrong patient or drug name or overlooking a serious drug related problem [DRP]) can result in the loss of 50% of marks for the scenario when the action is likely to cause injury or death to the patient.

Total: /50

End of Examination