



Banking By Word Of Mouth:

Tips For Improving Compliance With Patients.

James Hull R.Ph.

Pharmacist

Country Roads Community Health
Centre

*Primary Care Hypertension/Smoking Update Brag and Steal
Opportunities to Improve your Practice*

Faculty/Presenter Disclosure

- **Faculty:** James Hull
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 - **Other:** Employee of Country Roads Community Health Centre.

Context

- Previous worked as a Retail Pharmacist for 5 years.
- Now working in a Community Health Centre with multiple providers and professions for the past 3 ½ years.
- We work closely with patients to make sure they have access to drugs. Yet, people stop taking meds they are prescribed and paid for.

Here are a few tips to help improve adherence of antihypertensive medications.

Tip 1

I WANT TO SEE THE BOTTLES!

- Lists are often out of date and incomplete.
- Pharmacy will provide list, but we are unable to tell which medication has been discontinued or stopped.
- Pharmacy list will be incomplete if Patient is on more than 10 medications.
- Homemade lists are just as often inaccurate or fraudulent.

Tip 2

LOOK AT THE BOTTLES!

Patients will bring in their bottles once.

If you don't look at them they will never bring them back again.

Once you have the bottles look at:

- Expiry dates – ie. Nitro
- Dispensing dates – Is the prescription a year or two old?
- Is the right medication in the bottle?

You have to realize Patients will empty bottles as soon as they leave the Pharmacy.

Example:

- Bottle of ranitidine 150mg BID.
- Actual pills in bottle atorvastatin 80mg!!

Examples

- Rx for dose reduction of L-thyroxine. 100mcg to 88mcg.
- Clinic had documentation discussing dose reduction with Patient.
- Pharmacy had documentation discussing dose reduction and change of brand with Patient.
- Patient took both Eltroxin 100mcg and Synthroid 88mcg.

Example

- Bottle of bisoprolol 5mg.
- Actual pills in bottle: bisacodyl 5mg.

Tip 3

**IF YOU START, STOP OR MODIFY A
MEDICATION, CREATE A PRESCRIPTION!**

- Never tell Patients to adjust medication without providing an Rx.
- Pharmacies usually see GO prescriptions. We rarely see STOP prescriptions.
- Often confusion about when a medication dose was started, adjusted or stopped.
- Document why a medication was stopped to avoid the dreaded scroll of allergies.
 - Example1: Patient refuses to take Red Capsules.
 - Example 2 Patient “doesn’t like taking medications”

Tip 4

**SEND PRESCRIPTIONS DIRECTLY TO
THE PHARMACY.**

- Often Rx's will be lost or sitting in someone's wallet.
- If sent in on the same day of the your appointment then the Pharmacy can clarify any errors or omissions.
- If delayed, the Prescriber is often not available to correct Rx.

Tip 5

**LIST THE INDICATION AND
TIMELINE IN YOUR PRESCRIPTION.**

- Helpful with other Specialists and Providers.
- How long is medication to be given?
 - i.e. Dual antiplatelet therapy after PCI.
- When does this antidepressant need to be reviewed?

Tip 6

**SHOW PATIENTS THEIR LAB RESULTS
AND TRENDS OVER TIME.**

Labs available online: www.lifelabs.com

Show the Patients improvement in their A1C, lipids and or blood pressure.

Congratulate Patients when they make an improvement.

Show Patients changes for the positive!

Tip 7

**LET THE PATIENT KNOW YOU WORK
FOR THEM!**

- If they are having side effects ask them to call you!
- If you are having side effects, we can find alternatives!

Contact for more information:

Name: James Hull R.Ph.

Role on Team: Pharmacist

Email: jhull@crchc.on.ca

Phone: 613-272-3302 ext 260