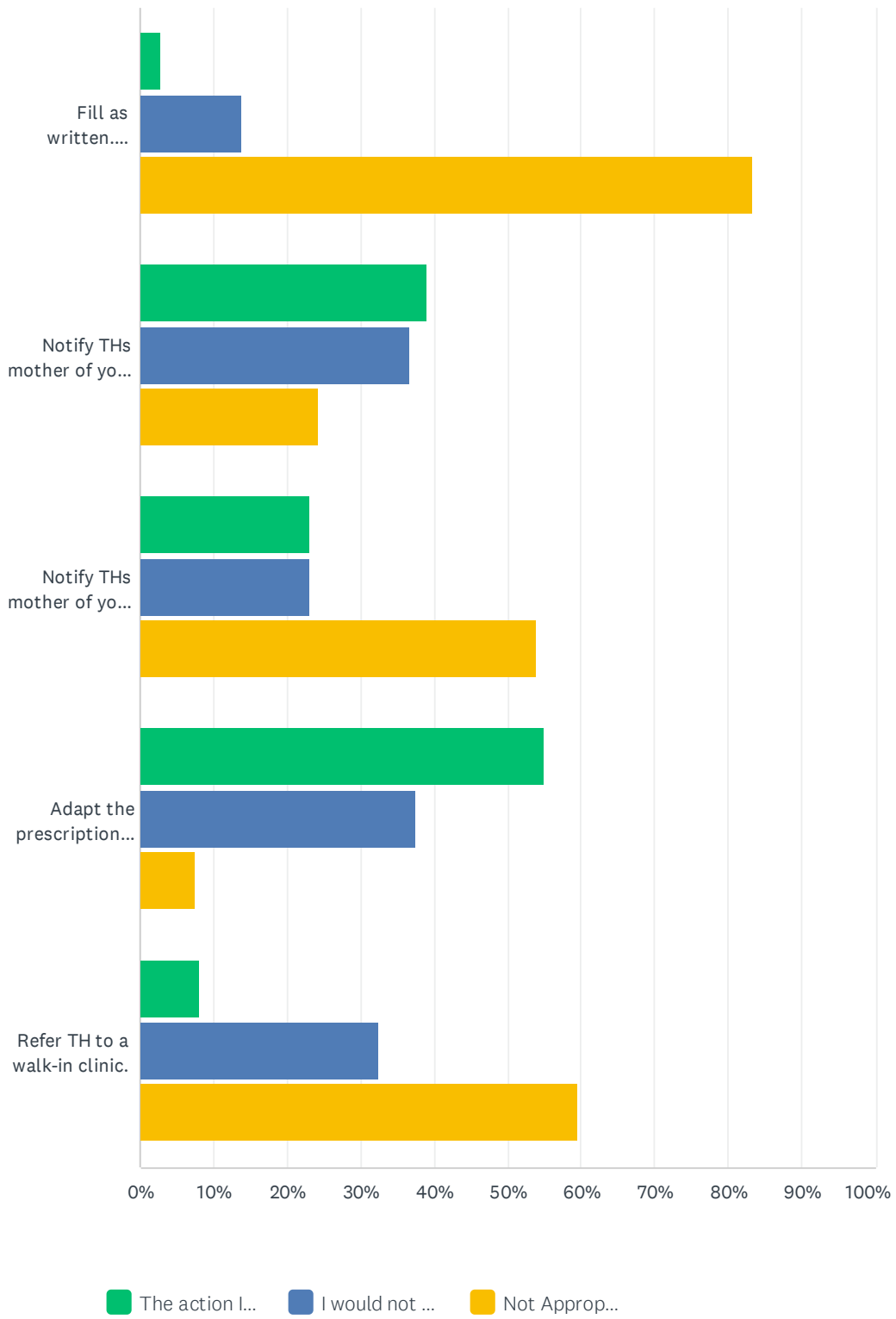


Q1 TH is a 3 yo male who presents with a prescription for amoxicillin for otitis media. His mother indicates that he spiked a fever of 103F in the past 24 hours and has complained of pain in his right ear. TH's family doctor told his mother that the ear was inflamed with a slight bulge. She did not want to watch and wait as TH was in distress. TH has no allergies, medical conditions or other medications. When you confirm THs weight you calculate the dose to be 20 mg/kg/day. You contact the TH's physician concerned the dose is sub-therapeutic but he indicates that that's the dose he wants. "Fill as written." How should a pharmacist respond?

Answered: 44 Skipped: 1

Panel of Peers Survey - February 4, 2022



Panel of Peers Survey - February 4, 2022

	THE ACTION I WOULD TAKE	I WOULD NOT DO THIS, BUT IT IS OKAY IF ANOTHER PHARMACIST DID	NOT APPROPRIATE	TOTAL
Fill as written. Provide usual counselling about monitoring TH's symptoms in case the infection persists.	2.78% 1	13.89% 5	83.33% 30	36
Notify THs mother of your concern with the physician order, fill as written and emphasize monitoring as the dose is sub-therapeutic.	39.02% 16	36.59% 15	24.39% 10	41
Notify THs mother of your concern, let her know what the dose is and what you think it should be and fill it with enough drug for the higher dose.	23.08% 9	23.08% 9	53.85% 21	39
Adapt the prescription to a higher dose and notify the physician.	55.00% 22	37.50% 15	7.50% 3	40
Refer TH to a walk-in clinic.	8.11% 3	32.43% 12	59.46% 22	37



Panel of Peers – Reflections From Select Panel Members Feb 4, 2022



Question 1

- Broad range of responses from the group. Really interesting discussion points in the comments:
 - 83% - Not Appropriate to fill it and not highlight the sub-therapeutic dose to TH's mother
 - Really mixed response in telling TH's mother that the dose was sub-therapeutic but filling it as written – 39% - Action I would take, 37% - Not the action I would take but OK, 24% Not appropriate
 - Less support for telling his mom the dose was low and giving her enough and directions to take the right amount while filling with the original directions – 23% Action I would take and I would not do this but OK, 54% - Not appropriate
 - Majority would adapt – 55% - Action I would take
 - Most would not refer – 8% Action I would take, 60% Not appropriate

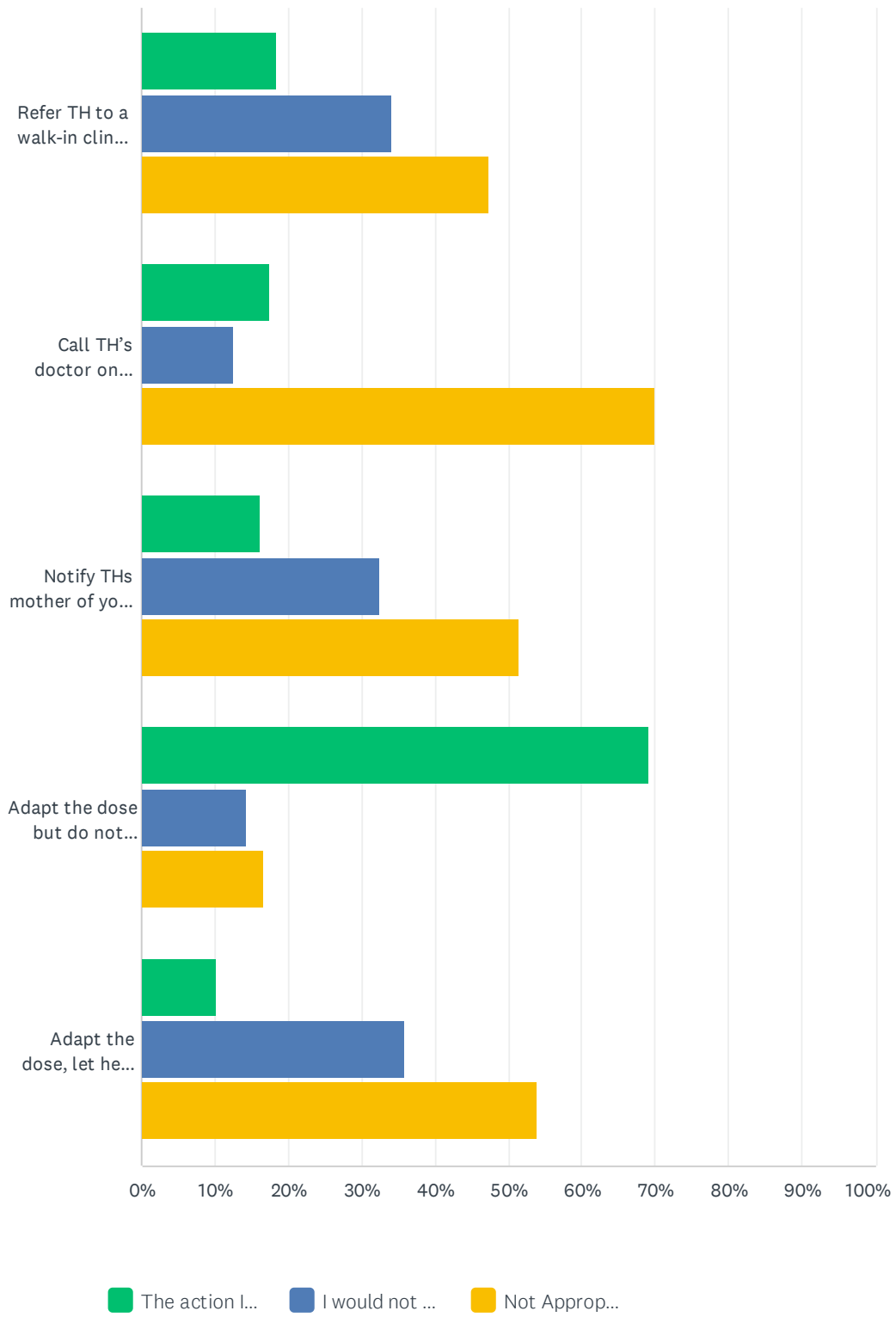
Comments

- I likely would have adapted the dose without contacting the physician. The conflict was created since I called to see if it was okay to switch the dose.
- Unfortunately, there may be repercussions from the prescriber.
- Is it appropriate to adapt the dose after discussion with the doctor? Is the dosing clear cut?
- I would discuss the concern with the parent regarding the sub-therapeutic dose and possible benefits of the higher dose and adapt if that was her preferred course of action.
- Pharmacists are responsible to make decisions about the appropriateness of therapy for the patient. They can consult with the physician but ultimately, it's the pharmacist responsibility to ensure dose is appropriate. Any options that involve deception are ethically not acceptable.
- The dose should be changed or watch and wait. Don't give a sub-therapeutic dose. Don't label one way but imply the patient take it another. We should adapt the dose instead.
- Many doctors would be offended by the adaptation after specifically indicating that this is what they wanted.
- I imagine if adaptations were publicly funded, we may not even call. An advantage in calling the physician is that there is no adaptation fee. Any course of action would involve patient consent. The patient may not consent to the adaptation if she knew the lower dose was what her doctor wanted. We likely wouldn't refuse to fill in that case.
- This looks at the boundary where a physician and pharmacist are in conflict. When we sign off on the prescription, I don't think "the physician said it was ok" negates our responsibility. It would be interesting to raise the stakes by having a significant drug interaction, dosing error on warfarin, etc.
- We can't label the bottle one way and tell the patient to take it another. That's trouble from a documentation of care perspective (assessment, DRP, plan, new prescription, notification, follow-up) and not only would the physician be upset, if they filed a complaint, it's hard to defend. The physician being upset with an adaptation would still be an issue but clinically it would be appropriate care and documentation of care.

Q2 TH is a 3 yo male with a prescription for amoxicillin for otitis media. His mother indicates that he spiked a fever of 103F in the past 24 hours and complained of pain in his right ear. When you determine TH's weight you calculate the dose to be 20 mg/kg/day. TH's doctor has gone for the weekend. You discuss the concern with TH's mother and inform her that you could adapt the dose but there is a fee for the adaptation. TH's mother said she just has enough money for the prescription, she can't afford the adaptation fee. How should a pharmacist respond?

Answered: 44 Skipped: 1

Panel of Peers Survey - February 4, 2022



Panel of Peers Survey - February 4, 2022

	THE ACTION I WOULD TAKE	I WOULD NOT DO THIS, BUT IT IS OKAY IF ANOTHER PHARMACIST DID	NOT APPROPRIATE	TOTAL
Refer TH to a walk-in clinic for the proper dose.	18.42% 7	34.21% 13	47.37% 18	38
Call TH's doctor on Monday to change the dose.	17.50% 7	12.50% 5	70.00% 28	40
Notify THs mother of your concern, fill the prescription as written, let her know what the dose is and what you think it should be and fill it with enough drug for the higher dose.	16.22% 6	32.43% 12	51.35% 19	37
Adapt the dose but do not charge for the service.	69.05% 29	14.29% 6	16.67% 7	42
Adapt the dose, let her know there is a fee for the service, but you will pay the pharmacy's fee out of your own pocket.	10.26% 4	35.90% 14	53.85% 21	39



Panel of Peers – Reflections From Select Panel Members Feb 4, 2022



Question 2

- All over the place again. Stronger opinions on Not Appropriate:
 - Refer to a walk-in clinic – 18% Action I would take, 47% - Not Appropriate
 - Call Monday – 18% Action I would take, 70% - Not Appropriate
 - Fill the prescription as written but give enough and instructions for the higher dose – 16% Action I would take, 51% Not appropriate
 - Adapt and don't charge – 69% Action I would take, 17% Not appropriate
 - Adapt and pay the fee out of your own pocket – 10% Action I would take, 54% Not appropriate

Comments

- I would not want to delay treatment, but I would want the patient to clearly understand that we were waiving our fees.
- Adaptations should be covered for all Nova Scotians.
- We rarely charge for his service.
- Option could be fill as written with a discussion of the dose being too low and call the doctor on Monday.
- This is a frustrating but not impossible scenario showing how pharmacy has evolved in the middle ground of care vs. financial issues that professionals like massage therapists don't have to deal with. I'd give the mom options – underdosing and it's risk or walk-in clinic.
- Provide walk-in clinic option, explain proper dose, fill as written and call doctor on Monday
- I would call an ER doctor as I have a good rapport with the doctor and have it switched.
- By not charging the fee, we undermine the value of the service. We need a better model for healthcare.
- It's a model that doesn't really work. I'm not inclined to give a sub-therapeutic dose but it is important to recognize the value of our service. If we charged everyone for the service and patients were bothered by the cost or delay etc, the public would ask MLAs to get it covered.