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## Documentation for Renewals: General Instructions

(In Kroll under “Comments”)

“Date”

“Title” = Renewal Assessment for Drug A, Drug B, Drug C

“Patient consented to Renewal Service. (or insert agent name). Patient/agent is aware that they are eligible for 4 renewal services per rolling 12 month period under the public funding program.”

- Establish indication and current therapies for indication (all not just drug renewed)
- Assessment of efficacy and tolerability using subjective and objective measures. Could someone else read this and say “Yes, the drug was working and well-tolerated.” Do NOT state “The patient said the drug was working”. Record the signs and symptoms, which shows that it was working.
- Screen for Red Flags that warrant referral. “Patient reports no signs of ...”
- Assessment of patient medical background “Allergies, Medical Conditions and Medications updated on file”. This shows that you looked at the patients file and had the opportunity to review drug allergies, drug-drug interactions and drug-disease interactions.
- Clinical Impression or DRP – “Patient has HTN and would benefit from continued therapy.”
- Plan: Prescription provided (Note: This is already recorded in the software so you do not have to write it twice.)
- Quantity represents patient’s usual quantity (i.e. patient usually gets 3-months and 3 repeats, pharmacist would be expected to prescribe 3-months and 1 repeat (up to our 6-month maximum) unless there was a clinical reason why the patient should get less (e.g. needs repeat blood work, condition not controlled, patient experiencing adverse effects, patient would like to stop therapy). The patient has an upcoming doctor’s appointment is NOT considered a clinical reason to prescribe less than the usual duration and will be clawed back upon audit.
- Any specific communication provided to the patient (e.g. Referred the patient for blood work. Advised patient to make an appointment with MD in the next month.)
- Monitoring Plan – Identify which healthcare provider is monitoring and when. Can include “Patient to be reassessed by MD in 6 months.” Note: copy to the Follow-up plan section if using Kroll and this will print on physician notification.
- Fax notification to Dr. Z (when required Post-COVID or if warranted during COVID)
- Pharmacist who conducted the assessment

## Examples of Documentation

Sep 2, 2020 Renewal assessment for latanoprost. Verbal consent from pt. Patient aware this is 1 of 4 assessments covered by public funding per 12-month period.

- Mr. Smith diagnosed with POAG roughly 10 years ago. Current tx: latanoprost 1 gtt ou hs x 2 years. IOP unknown. Last assessed by Dr. Smith Sep 2019. Reports no local irritation, vision disturbances or pain.
- Allergies, Medical Conditions, Medications updated on file.
- Mr. Smith has POAG and would benefit from continued therapy.
- Rx latanoprost 1 gtt ou qhs M: 2.5 mL Rx1. Referred patient to Dr. Smith to reassess IOP within next month, therefore renewed less than usual duration.
- Faxed notification to Dr. Smith and Dr. Johnson (family doc).

T. Johnson, Phc 1234

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Sep 2, 2020 Renewal assessment for citalopram. Verbal consent from pt. Patient aware this is 1 of 4 assessments covered by public funding per 12-month period.

- Mrs. Johnson reports hx of anxiety/panic. Current tx: citalopram 40 mg ½ tab od x 6 months. Was 1 od prior x 2 years and patient cut dose on her own 6 months ago. Lorazepam 1 mg po od-bid prn. Last fill 30 tabs 11 months ago roughly 15 left. Prior to citalopram roughly 1-2 panic attacks per week. No longer has panic attacks even at 20 mg dose. Lorazepam prn for sleep (once monthly). Discussed risks/benefits of continuing tx. No family doctor.
- Medical background updated on file.
- Mrs. Johnson would benefit with continued tx. Rx citalopram 20 mg od M: 90 R x 1. Phc to monitor continued absence of panic attacks and maintained tolerability at next refill (3 months). Copy of notification provided to patient.

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Nov. 30, 2020 – Renewal request ramipril 10 mg, Mr. Smith consented to Renewal Service. Patient aware this is 1 of 4 assessments covered by public funding per 12-month period.

- Mr. Smith hx of HTN roughly 10 years. Currently on ramipril 10 mg od and metoprolol 50 mg bid > 2 years
- BP recorded in pharmacy – 134/82, 130/80
- SHARE (Aug 20, 2020) – eGFR 84, K+ WNL (4.0)

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- Mr. Smith reports no signs of dizziness, cough, unusual fatigue.
  - Medical background updated on file.
  - Rx: ramipril 10 mg od M: 90 R x 1. Next appointment with family doctor in 1 month. Mr. Smith to follow-up re HTN with family doctor.
  - Fax notification sent to Dr. Ling.

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Oct 15, 2020 Renewal req for Synthroid. Ms. Patriquin consented to Renewal Service. Patient aware this is 1 of 4 assessments covered by public funding per 12-month period.

- Ms. Patriquin hx of hypothyroidism x 5 years. Current tx Synthroid 0.1 mg od x 3 years (last Rx 3 months 3 Rpt).
- Reports minor fatigue but unsure whether it is seasonal,
- Reports no: weight gain/loss, palpitations, heat/cold sensitivity, muscle problems
- SHARE – Nov 1, 2018 – TSH WNL. No more recent blood work.
- No family doctor.
- Medical background updated in software.
- Ms. Patriquin may be experiencing signs of hypothyroidism and may benefit from increased dose.
- Plan: Rx Synthroid 0.1 mg once daily M: 8 weeks and referred for updated blood work from walk-in clinic. Pharmacist to reassess therapy in 8 weeks post-blood work. Patient to monitor symptoms.
- Provided Notification to Ms. Patriquin for walk-in clinic.

T. Johnson, Phc, 1234

## Documentation Template

Date:

Patient consented to Renewal Service. Patient aware this is 1 of 4 assessments covered by public funding per 12-month period.

Medication(s) assessed:

Patient allergies, medical conditions, medications have been updated on patient file. Relevant info:

Is treatment working? Evidence:

Tolerability/ADRs:

Labs/Share:

Red Flags Assessed:

Clinical Impression/DRP:

Monitoring Plan:

Pharmacist name and license #:

Physician notification has been sent.