

Q1 (Your submission) TJ a 47-year-old male books an appointment at the clinic for a renewal on olanzapine. He does not have a family doctor and has been getting refills from walk-in clinics. Based on your assessment you determine that the therapy should continue but you notice that he hasn't had a lipid panel done in 2 years. You have the ability to order labs. How should a pharmacist respond?

Answered: 20 Skipped: 2

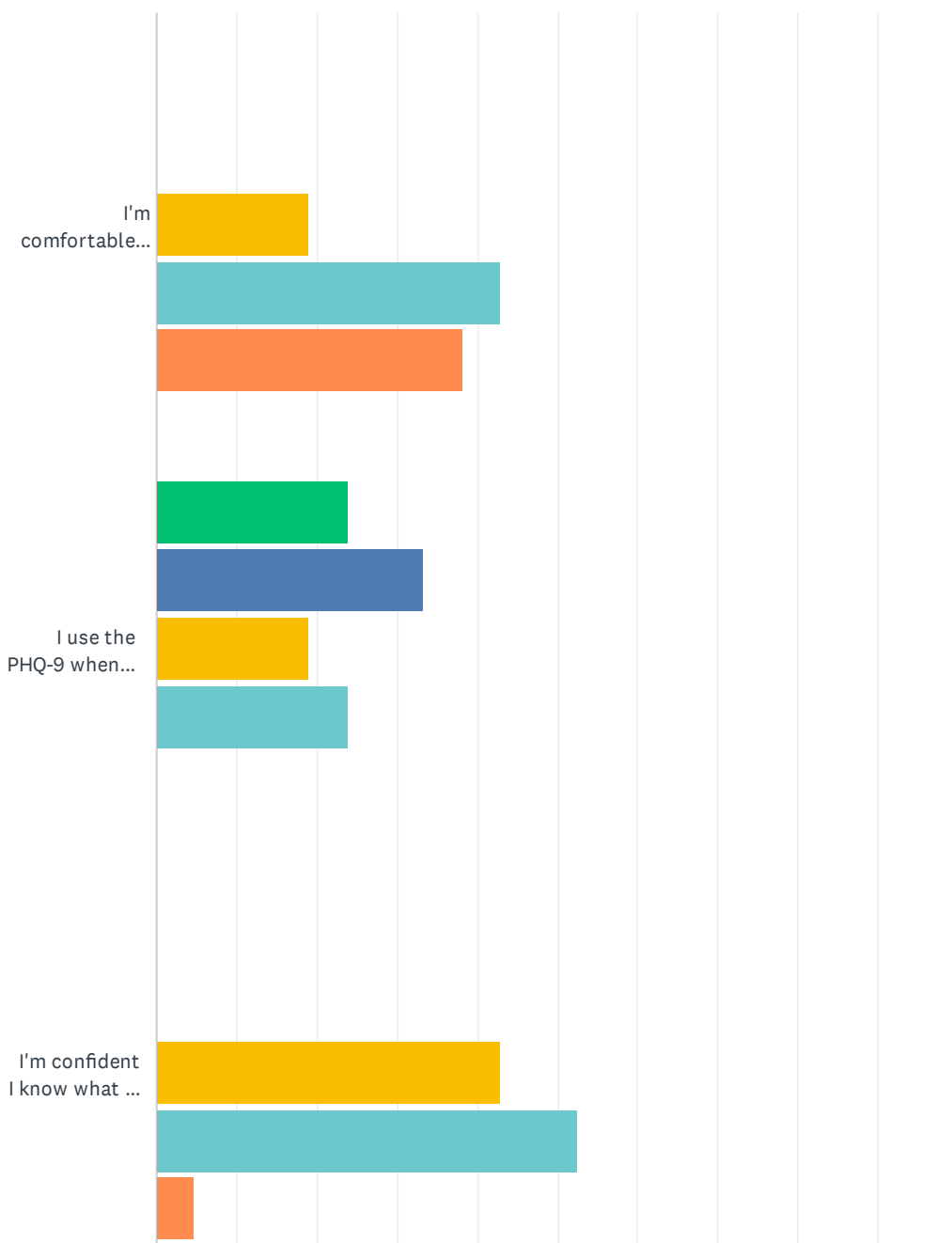
Panel of Peers Survey - Oct 12, 2023

	THE ACTION I WOULD TAKE	I WOULD NOT DO THIS, BUT IT IS OKAY IF ANOTHER PHARMACIST DID	NOT APPROPRIATE	TOTAL
Refer the patient to a walk-in clinic for labs as it is beyond our authority.	20.00% 4	10.00% 2	70.00% 14	20
Order the lipid panel because it falls within our authority.	80.00% 16	5.00% 1	15.00% 3	20
If the lipid panel warranted treatment I would refer for therapy initiation.	60.00% 12	30.00% 6	10.00% 2	20
If the lipid panel warranted treatment I would start therapy as it falls within CDM-CVD.	30.00% 6	15.00% 3	55.00% 11	20
If the lipid panel warranted treatment I would start therapy even though it does NOT fall within CDM-CVD.	0.00% 0	10.00% 2	90.00% 18	20

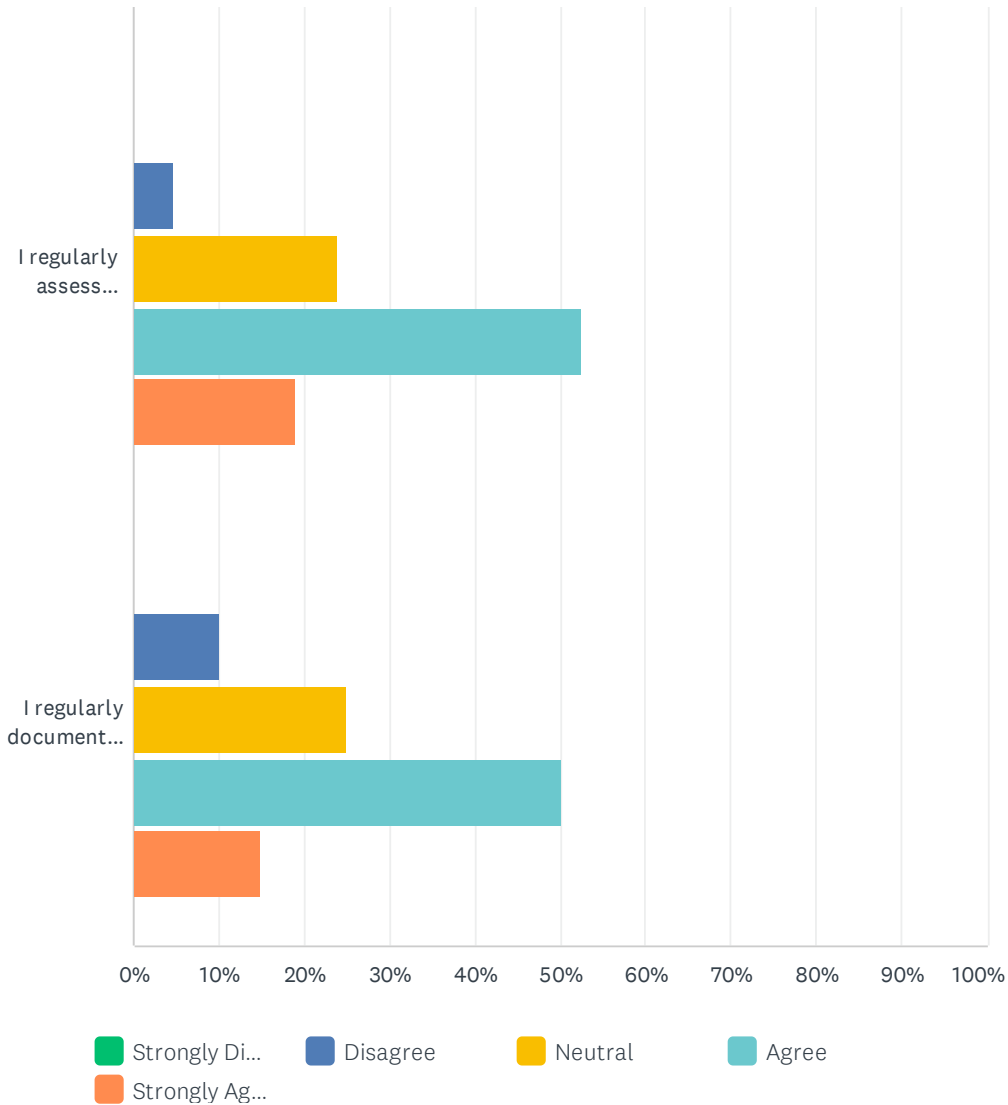
#	COMMENT (OPTIONAL)	DATE
1	I feel it is within my knowledge and competency to initiate and monitor dyslipidemia but understand I do not have a prescribing authority. If my patient was unsuccessful in getting treatment through virtual care or mobile primary care I would seriously consider prescribing it and having the patient sign something stating he was unable to get reasonable access to care elsewhere	10/18/2023 10:19 AM
2	Assuming we are not able to diagnose and therefore cannot initiate therapy the patient would have to be referred. If they were seen at a CPPCC site , I believe they have special authority to be able to initiate therapy in certain circumstances	10/17/2023 7:53 PM
3	I think this DOES fall within chronic disease management ?	10/15/2023 10:52 AM
4	Although it is not appropriate to initiate therapy for somebody without a diagnosis, this may depend on the area. Is there access to a clinic that could provide the initial diagnosis and prescription with follow-up from the pharmacy team?	10/12/2023 4:37 PM

Q2 When assessing appropriateness of ongoing therapy, a pharmacist will check Control (Efficacy), Adverse Effects, Adherence and Complications (2 C's, 2 A's). This assessment process occurs when doing Chronic Disease Management, Advanced Medication Reviews and most often during Renewal Prescribing. Please indicate your agreement with each of the following regarding renewal prescribing for depression. In the comments box indicate what complications should be ruled out in a well-documented renewal assessment.

Answered: 21 Skipped: 1



Panel of Peers Survey - Oct 12, 2023



	STRONGLY DISAGREE	DISAGREE	NEUTRAL	AGREE	STRONGLY AGREE	TOTAL	WEIGHTED AVERAGE
I'm comfortable prescribing renewals for depression.	0.00% 0	0.00% 0	19.05% 4	42.86% 9	38.10% 8	21	4.19
I use the PHQ-9 when prescribing for depression.	23.81% 5	33.33% 7	19.05% 4	23.81% 5	0.00% 0	21	2.43
I'm confident I know what to assess for complications.	0.00% 0	0.00% 0	42.86% 9	52.38% 11	4.76% 1	21	3.62
I regularly assess complications warranting referral during renewal prescribing.	0.00% 0	4.76% 1	23.81% 5	52.38% 11	19.05% 4	21	3.86
I regularly document PATIENT DENIES x, y and z (where x, y and z are complications).	0.00% 0	10.00% 2	25.00% 5	50.00% 10	15.00% 3	20	3.70

#	COMPLICATIONS TO RULE OUT:	DATE
1	Worsening mood, symptoms of self harm, electrolyte disturbances, movement side effects, anticholinergic effects, sexual side effects	10/18/2023 10:19 AM
2	Thoughts of self-harm or harming others	10/18/2023 5:45 AM

Panel of Peers Survey - Oct 12, 2023

3	sexual dysfunction, worsened mental health	10/17/2023 9:25 PM
4	Thoughts of self harm, decrease energy, low mood, worsening of any of those	10/17/2023 7:53 PM
5	suicidal ideation, thoughts of self-harm	10/16/2023 1:47 PM
6	suicidal thoughts, adverse effects (significant weight gain, worsening moods, hypertension)	10/15/2023 10:52 AM
7	suicidal ideation, sleep disturbances, sexual dysfunction, somnolence, GI bleed, HTN (certain meds)	10/14/2023 5:16 PM
8	Suicidal ideation, self harm, significant mood changes, risky behaviour.	10/12/2023 4:37 PM