

Pharmacy Services available for Long-Term Care residents

MEDICATION REVIEW SERVICES

Medication reviews are covered on admission to facility only; one review only will be provided per year.

- **Basic:** patient is taking 3 prescription medications
- **Advanced:** patient is taking 4 or more prescription medications; OR taking one of the following:
 - methyl dopa | indomethacin | cyclobenzaprine | diazepam*
 - chlordiazepoxide | clorazepate | amitriptyline*
- OR the patient has at least one of the following diseases:
 - asthma | diabetes | hypertension | hyperlipidemia | congestive heart failure*
 - chronic obstructive pulmonary disease (COPD) | arthritis*

Medication review follow-ups are not eligible for reimbursement.

PRESCRIPTION RENEWALS

Prescription renewals in nursing homes are typically provided during scheduled patient rounds or other established processes. It is expected that these processes remain in place, and that only in unique circumstances would a prescription renewal by a pharmacist be required. However,

- The pharmacist can renew prescriptions for all medications
- The pharmacist renews prescriptions for typical duration unless pharmacist determines it would be unsafe or unwise to do so
- Prescription renewals for over-the-counter products (e.g. vitamins, minerals, eye drops, diabetic test strips, lancets, ostomy supplies, etc.) are not eligible.
- All medications are renewed for up to 1 year.
- There is a maximum of 4 renewals per patient per year.

ASSESSMENT & PRESCRIBING FOR HERPES ZOSTER (SHINGLES)

- Pharmacists can treat if Shingles rash has been present for 72 hours or less (7 days or less if immunocompromised)
- Pharmacists can prescribe anti-viral medication but not pain treatment associated with Shingles
- Pharmacists will refer to another healthcare provider if there are complicating factors

COMMUNITY PHARMACY ANTICOAGULATION PROGRAM (CPAMS)

- This service is for management of patients taking warfarin.
- Pharmacy must be registered with PANS
- Pharmacist will liaise as appropriate with the patient's primary prescriber and provide an initial assessment, prescribe dosage adjustments and recommend test intervals. If the patient does not have a primary care provider, the patient is provided the record in addition to the one maintained at the pharmacy.