

## Prescription Drug Patient Counseling – Detailed Format

INTRODUCTION	<ol style="list-style-type: none"> <li>1. Introduces self (must say first name) AND role (pharmacist)</li> <li>2. Confirms patient identity (must say last name AND DOB)</li> <li>3. Explain the purpose of the counseling session and estimate how long it will take</li> <li>4. Verify patient allergies to medications, foods, or other substances</li> </ol>
DRUG NAME	5. State the <u>name</u> , <u>strength</u> , and <u>dosage form</u> of the drug and whether <u>generic substitution</u> has occurred
OPEN-ENDED #1	<p>6. <i>“What did your prescriber tell you the medication is for?” *</i></p> <ul style="list-style-type: none"> <li>✓ Confirm intended use and describe benefits to taking medication</li> </ul>
OPEN-ENDED #2	<p>7. <i>“How did your prescriber tell you to take the medication?” *</i></p> <ul style="list-style-type: none"> <li>✓ Show medication and read patient the SIG on their prescription label</li> <li>✓ Explain dosage regime giving specific recommendations regarding when during the day to take the medicine, minimum number hours between doses, maximum doses per day, etc. <ul style="list-style-type: none"> <li>○ Give administration advice including whether to take with food, empty stomach, avoid certain foods, do not crush or chew, etc.</li> <li>○ <u>For any complicated dosage form</u> (e.g. inhaler, injection, eye/ear drop, suppository, etc.): <ul style="list-style-type: none"> <li>– Describe and demonstrate proper administration</li> <li>– Ask if they have questions or anticipate problems administering the medication</li> <li>– Ask patient to teach back administration instructions</li> </ul> </li> </ul> </li> <li>✓ Explain in precise terms what to do if they miss a dose</li> <li>✓ Point out the day’s supply of medication provided and whether refills were authorized</li> <li>✓ Discuss storage recommendations</li> </ul>
OPEN-ENDED #3	<p>8. <i>“What did your prescriber tell you to expect from the medication?” *</i></p> <ul style="list-style-type: none"> <li>✓ Tell when medicine will start to work and whether it will alleviate any symptoms (i.e. notice an effect)</li> <li>✓ Explain how long they can expect to be taking the medication</li> <li>✓ Discuss common side effects of the medication <ul style="list-style-type: none"> <li>○ Warn about and describe symptoms of developing an allergic reaction to the medication</li> <li>○ Warn about rare but serious side effects of the medication <ul style="list-style-type: none"> <li>✓ <u>If medication requires a Med Guide</u>: tell patient <i>“I am also providing you with a required medication guide that can help patients avoid serious adverse events.” *</i></li> </ul> </li> </ul> </li> <li>✓ Discuss precautions (e.g., activities to avoid) and beneficial activities (e.g., exercise, decreased salt intake, diet, self-monitoring)</li> <li>✓ Tell patient <i>“To avoid potential harmful interactions, always talk with us or your prescriber before starting any new medication, including prescription or OTC, natural products, or vitamins.” *</i></li> <li>✓ Point out that additional side effects and warnings are listed in the written drug information sheet provided</li> </ul>
REPEAT-BACK	9. <i>“Just to make sure I have not left anything out, can you tell me how you are going to take this medication?” *</i>
CONCLUSION	10. Provide closure (pay compliment, express thanks) and give follow-up instructions and contact information

\* Text in *italics* must be spoken essentially the same as written, and while some variation is acceptable, the intent, content and tone must match. Topics with a ✓ bullet point are required. Topics with a ○ bullet point are “if applicable.”

## COUNSELING SESSION

<p>1. Introduces self (must say first name) AND role (pharmacist)</p> <p>2. Confirms patient identity (must say last name AND DOB)</p>	<p>The health care professional should introduce himself or herself to the patient or patients' agent, and ask if the person is the patient, the caregiver, or someone simply picking up the prescription for the patient.</p> <p><b>"My name is _____ and I am a pharmacist. To whom am I speaking with?"</b></p> <p><b>"What is the name of the patient? To ensure I have the correct prescription, please verify their date of birth."</b></p>
<p>3. Explain the purpose of the counseling session and estimate how long it will take</p>	<p>The health care professional should prepare the patient or caregiver for the information to be presented and explain why the information is important to the patient. It is important to tell patients why the counseling session is important from their perspective.</p> <p><b>"I would like to take a couple of minutes to review some important information about your new prescription including how to take it and what to expect."</b></p>
<p>4. Verify patient allergies to medications, foods, or other substances</p>	<p>This involves verifying that the profile information is up-to-date (names, addresses, current medications, etc.) and that the information points to any possible problems (drug-drug, drug-food, or drug-disease interactions; noncompliance).</p> <p><b>"Before we begin I wanted to update our profile and make sure we have current information regarding any drug allergies or sensitivities as well as noting any medical conditions."</b></p>
<p>5. Drug Name: state the <u>name</u>, <u>strength</u>, and <u>dosage form</u> of the drug and whether <u>generic substitution</u> has occurred</p>	<p>Tell the patient the <u>name</u>, <u>strength</u>, and <u>dosage form</u>: telling patients the name of the medication helps them get used to identifying it. Telling the patient whether generic substitution has occurred can avoid drug name confusion and gives the pharmacist a chance to emphasize cost savings.</p> <p><b>"The name of this medication is DRUG NAME XX mg DOSAGE FORM."</b></p> <p><b>"With your prescriber's permission, we have substituted a generic form of the drug which was much less expensive."</b></p>
<p>6. Open-Ended Question #1: Assesses patient understanding of the reason(s) for therapy.</p>	<p>It is extremely useful to find out what the patient already knows. Doing this has the potential for saving time in the counseling sessions and reinforces learned information. In addition, any incorrect information could be corrected at this time. It would be important to assess what the patient understands about the seriousness of the illness, the treatment, dietary restrictions, etc.</p> <p><b>"What did your prescriber tell you the medication is for?"</b></p> <ul style="list-style-type: none"> <li>— <u>Tell the patient the indication of the medication</u>: This and the steps that follow will generally be performed after determining the appropriateness of the medication and filling the prescription. Stating the indication reinforces the diagnosis and creates confidence in the appropriateness of the therapy.</li> <li>✓ Confirm intended use and describe benefits to taking medication <ul style="list-style-type: none"> <li>— <u>Emphasize the benefits of the medication</u>: Pharmacists should make every effort to support the chosen therapy and tell patients about the benefits of the treatment before they discuss potential side effects. This not only helps to put side effects in perspective, but it also promotes patient confidence in the therapy. Lack of confidence in the chosen therapy results in a higher incidence of noncompliance.</li> </ul> </li> </ul>

7. Open-Ended Question #2:  
conveys administration  
information including dosage  
regimen, missed dose  
instructions, refills, and storage.

***“How did your prescriber tell you to take the medication?”***

- ✓ Show medication and read patient the SIG on their prescription label
  - Hold up and point to where the patient instructions are typed on the prescription label. Read the instructions clearly, emphasizing any key points.
- ✓ Explain dosage regime giving specific recommendations regarding when during the day to take the medicine, minimum number hours between doses, maximum doses per day, etc.
  - Patients should be told the dosage regimen in order to either reinforce what the doctor instructed or inform them for the first time.
  - While a particular dosage regimen may seem straightforward or obvious, it may be interpreted incorrectly. For example, not everyone eats three meals a day. Therefore, directions that state, “Take one tablet after meals and at bedtime,” may prompt some patients to take their medications more or less than the intended four times per day.
  - Some medications dosed “once daily” should actually be given at a specific time such as in the morning, or the evening, or possibly at bedtime.
  - PRN or “as needed” medications need particular instructions regarding the minimum amount of time needed between doses as well as the maximum number of doses to take in a day (e.g. “do not exceed 6 tablets per day”).
- Give administration advice including whether to take with food, empty stomach, avoid certain foods, do not crush or chew, etc.
  - Many medications have special administration instructions including to either take with food (i.e. to avoid stomach upset), or on an empty stomach (i.e. to ensure drug absorption). Many sustained-release products need a warning to avoid crushing or chewing which would destroy their release mechanism.
- For any complicated dosage form (e.g. inhaler, injection, eye/ear drop, suppository, etc.)
  - Describe and demonstrate proper administration
  - Ask if they have questions or anticipate problems administering the medication
  - Ask patient to teach back administration instructions
- ✓ Explain in precise terms what to do if they miss a dose
  - “If you miss a dose, take it as soon as you can. If it is almost time for your next dose, take only that dose. Do not take double or extra doses.”
    - You MUST make clear what “almost time for your next dose” means!
    - Actual times of day and specific examples should be used to make this clear.
    - For example, explain what to do the next morning if a patient misses their bedtime dose.
    - For example, “What will you do if it is 3:00 in the afternoon and you realize you have missed your noon dose?”
- ✓ Point out the day’s supply of medication provided and whether refills were authorized
  - Patients need to plan in order to be compliant, and this information assists them in doing so. The pharmacist could say, “Mrs. Jones, the doctor has given you a 30-day supply. Therefore, I’ll see you on June 30th for your refill.” By doing this, the pharmacist lets the patient know when to come back in. Stating the date may also remind the patient if there is a scheduling conflict.
- ✓ Discuss storage recommendations
  - Give general storage recommendations for all medicines. Many patients still store their medications in medicine cabinets in the bathroom—probably the worst place in the house to keep medicine because of heat and humidity. Warn all patients about keeping all medications out of the reach of children and pets but strongly emphasize this point if the product is not being dispensed in a child-resistant package (e.g. inhaler, birth control, topical cream, etc.).

8. Open-Ended Question #3: conveys safety information about both beneficial as well as unwanted (side) effects, warnings or precautions, and potential interactions.

***“What did your prescriber tell you to expect from the medication?”***

- ✓ Tell when medicine will start to work and whether it will alleviate any symptoms (i.e. notice an effect)
  - If patients are not told when to expect onset of action, they may believe the medication is not working. Patients may cease taking a medication, or they may take too much because they believe one dose did not work.
- ✓ Explain how long they can expect to be taking the medication
  - Patients need to have a reasonable expectation of how long they will need to take the medication. This helps them get into a “mind set” of compliance. It also helps to eliminate unrealistic expectations. Moreover, it gives patients a chance to express concerns about the length of treatment.
- ✓ Discuss common side effects of the medication
  - The more specific pharmacists’ advice can be, the better. Will the side effects go away, and if so, within what period of time? Are there steps the patient can take to prevent, alleviate or manage the side effects? What should they do if side effects don’t go away or become intolerable? Effective counseling helps patients understand the extent of the risk they are taking by using a medication.
- Warn about and describe symptoms of developing an allergic reaction to the medication
  - Briefly mention that all medications can cause an allergic reaction and if the patient were to develop symptoms like “skin rash, itching or hives, swelling of the face, lips, or tongue” they should stop taking the medication and immediately contact their prescriber.
- Warn about rare but serious side effects of the medication
  - Emphasize the rarity of some of the side effects listed, and encourage the patient to call if he/she has any concerns about these.
- ✓ If medication requires a Med Guide: tell patient ***“I am also providing you with a required medication guide that can help patients avoid serious adverse events.”***
- ✓ Discuss precautions (e.g., activities to avoid) and beneficial activities (e.g., exercise, decreased salt intake, diet, self-monitoring)
  - It should not be assumed that the physician has discussed these things with the patient. Ask patients what they have been told, and discuss if necessary.
- ✓ Tell patient ***“To avoid potential harmful interactions, always talk with us or your prescriber before starting any new medication, including prescription or OTC, natural products, or vitamins.”***
  - Patients generally are not aware that other medications, foods, or diseases may interfere with the drug they are taking or affect the condition for which they are being treated. For example, a patient with high blood pressure should be told to ask the pharmacist before taking any medicines for coughs or colds.
- ✓ Point out that additional side effects and warnings are listed in the written drug information sheet provided
  - An information sheet summarizing facts about the medication should be given to the patient at the end of the counseling session. Patients should be told to contact the pharmacy or their prescriber if they have any questions or concerns.

9. Repeat-Back: verifies patient understanding via feedback.	<p><b><i>“Just to make sure I have not left anything out, can you tell me how you are going to take this medication?”</i></b></p> <ul style="list-style-type: none"> <li>– The health care provider should verify patient understanding via patient feedback. Correct answers can be praised and incorrect information can be corrected. Praising has been shown to reinforce adherence.</li> </ul>
10. Conclusion: provide closure and follow-up instructions.	<p>Provide closure (pay compliment, express thanks) and give follow-up instructions and contact information</p> <ul style="list-style-type: none"> <li>– Ending a conversation can be difficult. In a busy environment like a pharmacy, it is important to manage your time which includes know how to end a conversation without being seen as rude.</li> <li>– Putting it all together: <ul style="list-style-type: none"> <li>▪ <b><i>“I’m glad we got to talk. Thank you very much for your time. Do you have any questions, comment, or concerns? Here’s my phone number, feel free to contact me anytime.”</i></b></li> <li>▪ <b><i>“It was nice to meet you. Thank you for coming in today. Please contact me with any questions and I should hear from you again in about a month when it is time for a refill.”</i></b></li> </ul> </li> </ul>

<b><i>Interpersonal and Professional Communication Skills</i></b>	
A. Presents facts and concepts in a logical order.	It has been shown that people retain information longer when it is presented from simple to complex. In addition, the most important point should be communicated to the patient first, then repeated again at the end of the counseling session.
B. Provides accurate information and a written supplemental handout.	All information provided to the patient should be accurate. The pharmacist should also provide a written summary of information to supplement verbal patient counseling. However, this supplemental information is not a substitute for the verbal counseling but given in addition.
C. Uses language the patient is likely to understand.	Health care professionals should avoid technical jargon when counseling patients. For example, “high blood pressure” is generally more understandable than “hypertension.” Technical language is only appropriate when the health care professional feels that the patient understands it.
D. Displays effective nonverbal behaviors (eye contact, body language, gestures).	Generally speaking, the most effective interviewers are ones who talk less than the client and spend more time listening. Listeners convey their understanding and concern through nonverbal gestures (facial expressions, eye contact, nodding) and through short verbal prompts (“I see,” “Uh huh,” “Really?” etc.)
E. Identifies and appropriately addresses any real or anticipated concerns or problems of importance.	Patients are often reluctant to vocalize concerns unless they are asked. It is important to deal with this issue early in the conversation otherwise patients may not be listening to the information as attentively. The health care professional should make every effort to understand the concerns of the patient and give those concerns the attention they deserve.
F. Uses understanding or empathetic responses.	This skill is absolutely essential to an effective counseling session. If the patient sees the health care professional as competent, trustworthy, and someone who cares about what happens to them, it increases their compliance. Health care professionals need to hear what patients have to say without judgment or attempting to minimize their concerns.
G. Maintains control and direction of the counseling session.	While the emotional needs of the patient relative to drug therapy should be addressed, the counseling session needs to move forward. Patients may dwell on certain areas even after reassurance and explanation. The health care professional needs to assertively address the concern and move on to be sure all important issues are covered.