

Maximize Solutions: Use Your Pharmacy's Assets to Meet Patient Needs

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Foodland Discount Pharmacy

Faculty Disclosure

Matt Colvin reports no actual or potential conflicts of interest associated with this presentation.

Learning Objectives - Pharmacist

Upon successful completion of this activity, **pharmacists** should be able to:

- Discuss competitive advantages inherent to community pharmacy
- Discuss common seasonal and requested over the counter product categories to meet patient needs
- Outline methods to identify existing and new patients for pneumococcal, tetanus, pertussis, hepatitis and other vaccines
- Conduct short individualized assessments to effectively screen patients for recommended preventive and self-care products, services and education
- Utilize powerful tools to promote your pharmacy's services





Tell me about you. *My primary role is*:

- a. Staff pharmacist
- b. PIC
- c. Owner
- d. Pharmacy Technician
- e. Other



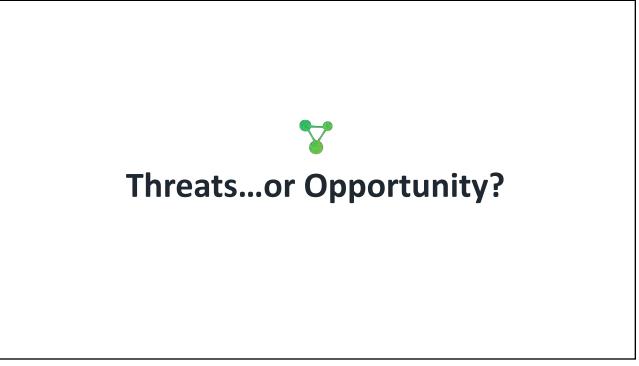
An Evolving Health Care System

Managed Medicaid Accreditation Value Based **Quality Rating System** Reimbursement **Medicare Star Ratings Enhanced Services** Networks Specialty Pharmacy Team-based Care **Pay-For-Performance Quality Ratings System** ACOs, MCOs, PSAOS, GPOS for Health Exchanges **CDC and State Departments of Health Alternative Payment Models Merit-Based Incentive Payment System**



- This is How Amazon Could Invade the Pharmacy Business
- Anthem Partners with CVS to Launch new PBM
- CVS to Buy Aetna for \$69 Billion in a Deal that May Reshape the Health Industry
- Amazon, Berkshire Hathaway and JPMorgan Team up to Try to Disrupt Health Care . . .

• And all things COVID-19





Which of the following services does your pharmacy offer?

- a) Medication Synchronization?
- b) Influenza Immunization?
- c) Other Immunizations?
- d) Proactive OTC Assistance?
- e) More than one of the above



How do you market those services?

- Take a moment to consider and/or jot down your current marketing strategy
 - What has worked well?
 - What have you tried that has not been effective?



The Future is Now

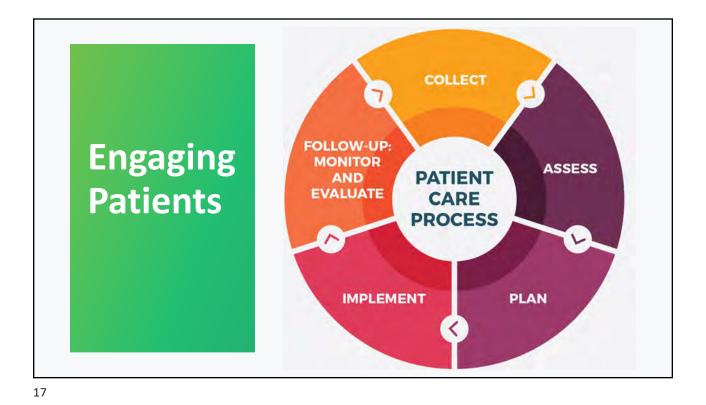
Historical Role: Community Pharmacy

- Serve customers
- Right drug, bottle, label
- Dispensing process: Fast, accurate and volume driven

Current Role: Community Pharmacy

- Serve patients, prescribers and payers
- Appropriate medication, correct administration, achievement of therapeutic outcome
- Dispensing process: technician led, appointment-based care, outcome improvement

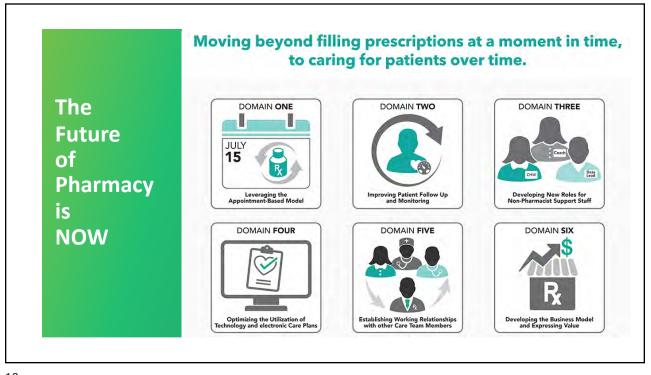




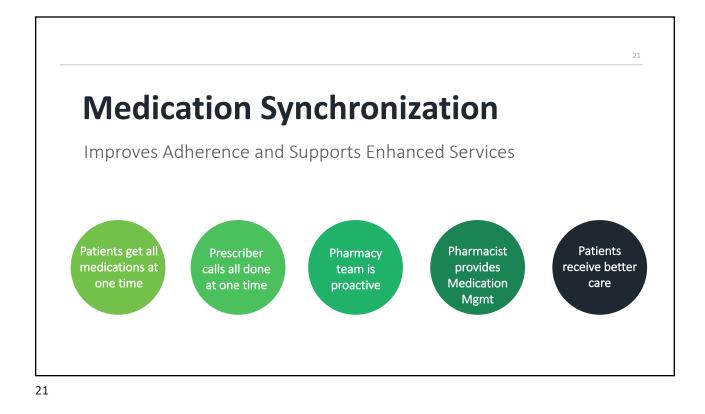


Pick up: lisinopril

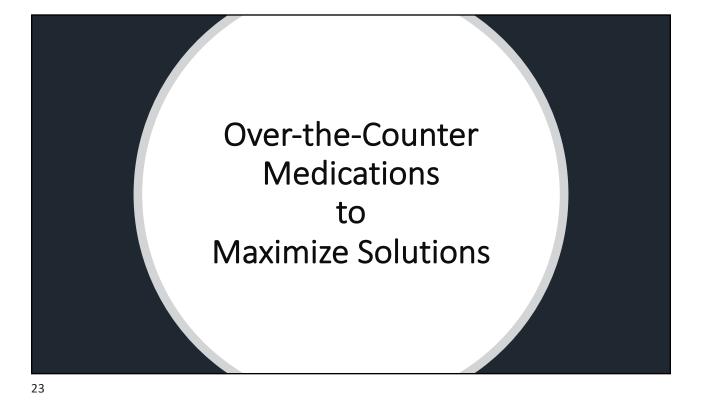
- **Collect**: Current BP, goal BP, past treatment, symptoms, etc.
- Assess: Check BP; obtain goal from PCP
- Plan: Check BP at home
- Implement: Share note with PCP
- Follow up & Monitor: BP to goal







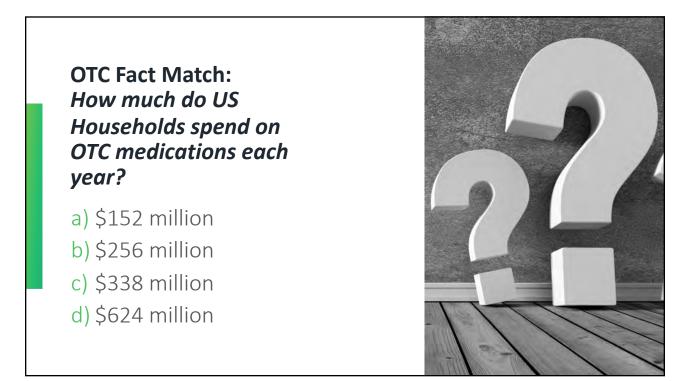




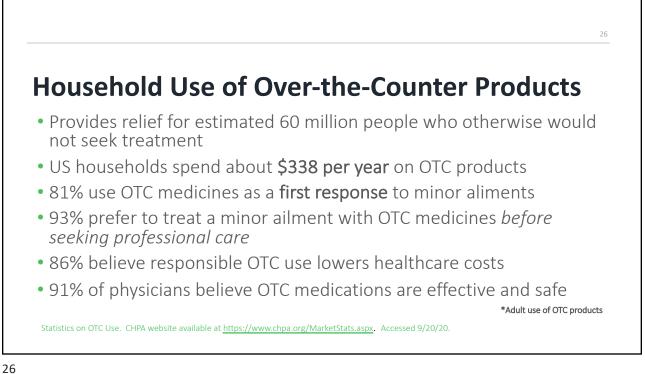
How do you provide OTC assistance currently?

- a) Keep seasonal and common OTCs by check out
- b) Review OTC needs during preappointment med sync call
- c) Assess the patient at each prescription pick up
- d) Offer ancillary OTC items based on prescriptions dispensed
- e) More than one of the above









OTC Fact Match: How many trips are taken to a retail setting to purchase OTC products each year? a) 2.4 million b) 2.4 billion c) 5.6 million d) 2.9 billion



Over-the-Counter

• 400 active ingredients

Marketplace

- 700 therapeutic uses
- 100,000 drug products

2.9 billion retail trips each year to purchase OTC products

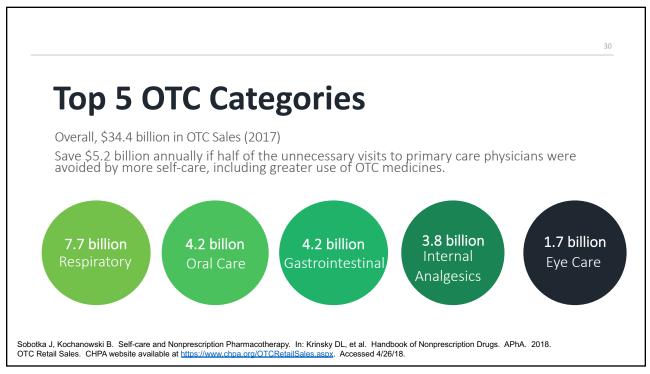
Sobotka J, Kochanowski B. Self-care and Nonprescription Pharmacotherapy. In: Krinsky DL, et al. Handbook of Nonprescription Drugs. APhA. 2018.

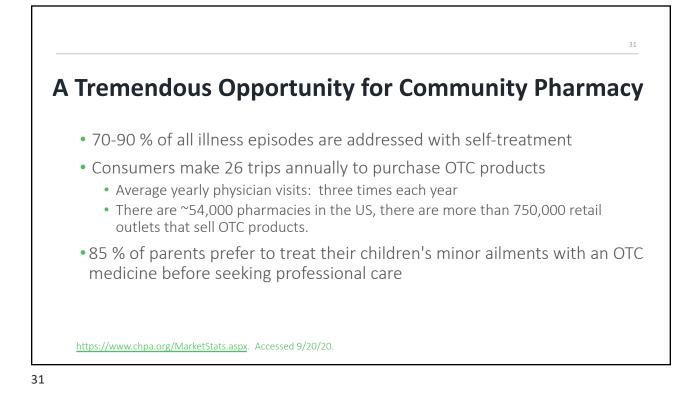


Nearly 70% of parents have given their child an OTC medicine late at night to help treat a sudden medical symptom



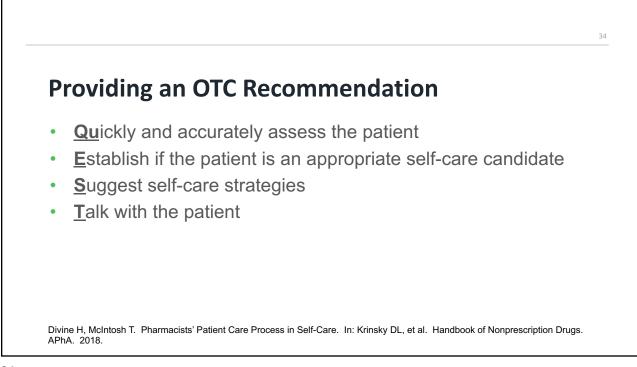
https://www.chpa.org/MarketStats.aspx. Accessed 9/20/20.











at is the situation like? Is it changing? at has been done so far? Has this ever happened before, and, b, what was done then? What was successful; what wasn't?
, what was done then? What was successful; what wasn't?
en did it start?
ere is the problem?
at makes it worse?
at makes it better?
cription and nonprescription as well as complementary and rnative products
Real Constant and the constant of the constant
dications and other substances

Case: Pediatric Population

18-month-old female, Nora

- Presents with her mother for an Amoxicillin prescription to treat otitis media
- Nora's mother would like you to recommend an OTC product to help with the pain.
- What questions do you have for Nora and her mother?



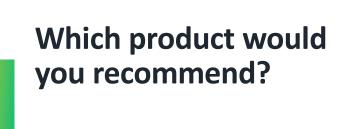
Case: Pediatric Population

What questions do you have for Nora's Mother?

- Symptoms: Pulls on both ears, yellow/brown discharge from both ears
- Characteristics: Unknown
- History: Previous ear infection at 12 months
- Onset: About 2 days ago, in the late evening
- Location: Both ears
- Aggravating factors: none
- Remitting factors: none
- Medications: none (Amoxicillin)
- Allergies: none known
- Coexisting medication conditions: none known







- a) ibuprofen
- b) acetaminophen
- c) homeopathic agent
- d) None of the above



OTC Option 1: ibuprofen

Warnings	Drug Facts (continued) Keep out of reach of children. Incase of	Drug Fac	ts		
Illergy aller through in your case is seen addressed on experially in people along to aspin, yoppuns may include an inter- an inclusion for an integression cours, see private and set interfactively for away an integression cours, see private and set interfactively for away and aller association cours and an an an and an and an and an and association and an an and an and an and an and an and an and association and an an an and an and an and an and an and association and an an an and an and an and an and an and association and an and an and an and an and an and an and association and an and an and an and an and an and an and and and an and an an an and and an and an and an and and and an and and an an and an and an and an and an and and and and and an an an and and an and an and an and and and an and an an an and an and an and an an an an an an an and an and an	Overdose, get medical help or contact a Polson Control Center right away. (+ 800-222-1222) Directions		fient (in each 1.25 mL) ISAID)* Inflammatory dyg	Purp	ose lucer
talea al loci floritority grintozogale igno sovici dong najmoster drugosovalning prescripton or norprescription NSADs (espirin, buprolen, naproze, or offersi plalea mile er na brogar time iban drecki d set al talko al al offerbar miling: NSADs, accept aspirat, increase the risk of heast altack, heart hun, and stime. These can be liaid. The risk is high er lyou use nore than directed or for forgor and incred.	 State well before using Infinition of the second state of th			on cobi, flu, sore throat, headachea	
iore thread werning: Severe or persistert score threat or sore threat accompanied by high lever, neadache, neuses, and vomiting may be serious. Constatificiar promptly. Do natuse more than drags or administer to children under Syeans of age unless directed by doctor.	toward the inner cheek if needed, repeat dose every 6-8 hours dosed use mercethon 6 home a day	1	1000	Dosing Chart	
uo moi use II the child has even had an allergic reaction to ibuprolen or any other pain reliever/lever reducer In drid before or after heart surgery	Dosing Chart Weight (lb) Age (mos) Dose (mL)		10.2.1.6/03		0.011
Ask a doctor before use if stomach bleedingwarning applies to your child uchild has a history of stomach problems, such as hearburn	under 6 mos ask a doctor 12-17 lbs 6-11 mos 1.25 mL 18-23 bs 12-23 mos 1.875 mL		Weight (ID)	Age (mos)	Dose (mL)
a chỉ chao problemis or sericious side effects from taking pain relievers or fever reducers and to han choen chí triking takids i in chỉ thi hao kota taki chí thư ở due to vornting or d'arrhea an chỉ dhao hại thư do pessue, heard thickee, hevic chí thư đá khiến y disease, or hai a stocke an chỉ dhao saithma in chỉ thị staking a dù takic	Uther Information store between 20-25°C (8-77°F) # do not use if carton take imprinted	J	under	6 mos	ask a doctor
Ask a doctor or pharmacist before use if the child is munder a doctor's care tor any serious condition mitaling any other drug	"SAFETY SEAL®" or bottle wrap imprinted "SAFETY SEAL®" and "USE WITH		In stille	C 11 mm	1 at ml
When using this product 🛛 take with food ormik if stomach upset occurs	ENCLOSED DOSING DEVICE ONLY" is broken or missing		12-17 lbs	6-11 mos	1.25 mL
Sing use and ask a dector if and deeprinces any of the blowing signs of storach blowling; = besids if all more stood in the stood y or block stools = has storach pain that does not get boths = dichloss syndrom or beaut polytance or stolac	Inactive ingredients enlydrous chtcach, caramel, FD&C red no. 40, flavors, glycerin, polysochate 80, pregelathoet starch, purlied water, sodium berzoate, scribitol solution, sucrose,		18-23 bs	12-23 mos	1.875 mL
meannaish non-part or stajédtoo) maturnal apeach misgaweling na ciril de sen rog arang velakelinh tra drag Za konsig kortainent i ser or pan gatsvonse or basis more tran 3 days ne de se or sawiling is present in the paint dana many any wy symptoms appear ne de se or sawiling is present in the paint dana many any symptoms appear	xarthangun Questions or comments? Cal 1-877-985-9665 (tal-tree) or 215-275-8755 (colect)	https://dai	Label picture taker lymed.nlm.nih.gov/ 3-29f066a42dc7.		fm?setid=c2302bfe-b3

OTC Option 2: acetaminophen

Active ingredient (in each 5 mL) Acelanisation 160 mg	Purpose Painteleverfle w reduce	 Boto not give mo emplane can fail maintance 		
I refeves minor aches and pairs due los			Desing Chai	1
Bite common cold Bile Bheadache Bacre	ficoal Diodifactie	Wnight (fb)	Ape (yr)	Dese (mL)
Warnings Liver warning: This product contains accommophen. Severe child takes proce than 5 does in 24 hours, which is the mu		jøder 24	under 2 years	ank a dector
erne wers Internets autority of ours, ward in the re-	tarrut oak sironi	24-35	23 years	5mL
Allergy alert: acutaminophen may cause seven skin reaction	s. Symptoms may include:	1 is as directed		
I skin redskring I biskers III rath Ya skin reaction occurs, stop use and seek medical help right a Serie Berkall wathing: I som broad is serven, periodo iza norr bilowed by lever, beachabe, rash, narses, or vorniling, corault	then 2 days, is accompanied or	Attention: use specifically des Do not use any	gred for use	eth this produ
Do bet use with any other drug-containing sc etaminophen (prescription not sais whether a drug contains acetaminophen, sak a do all your ohid is altergic to acetaminophen or any of the mact	sor nonprescription). Il jourane che or pharmacist.		20-25°C (68-	imprinted
Ask a decter befere use if your child has low disease			-	_
Ask a dector or pharmacist before use it your child is watain		Inactive in unhydrous citri	and buyb	arabin,
When using this product do not exceed recommended o		D&C red no. 33 phycerin, high fi		
Step use and ask a disclar II puin gets worse or tai I have gets worse or lasts niche Thin 3 days I new symptoms occur II redness of swelling is present These could be signs of a version condition.		microcrystalling carbocymethyle glycol, partiad sorbitol solution	e cellulose an cellulose and water, sodiur	d um, propyleni s berzoela,
Reep out of irrach of children. Dennfase warning: In case of oversion, gel medical help or right away. (1-000-223-1222) Cuick moderal attention is official over Kyoz do not notice any signs or symptoms.	norbaid a Polision Control Conten Imadulto es well as forchildren	Questions call-800-450 215-273-8755	1-1615 (b)+1	
Directions: white predict does not contain directions or complex at and give more than directed (new averdoes war make well before using the - million of origin domess-chart #possible, was weight to down or possible and of spinger. And or spinger is com- to be locatio uside some . And syndrom port improve com- to be compared and the spinger is com- to be compared and the spinger is com- a singuens liquid slowly into child's mouth, toward mere chart a single source is add a some hybrid to child a source.	hanin, un ign M Stotos	0	Care to H	Noyclar"

Active ingredient

- Acetaminophen 160mg/5ml
- Dosing

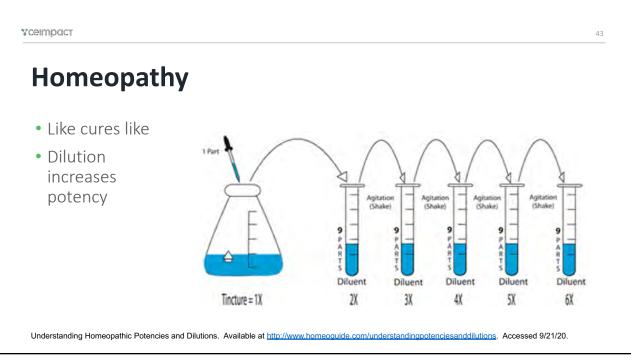
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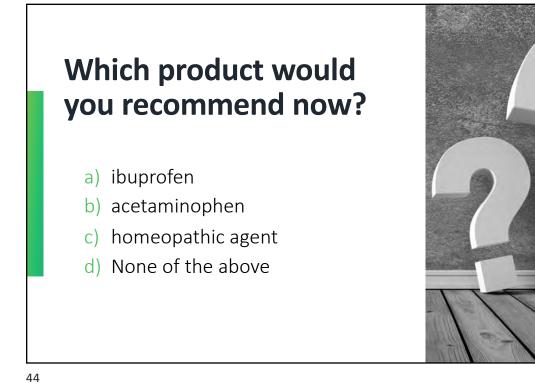
- By label (age/weight)
- By weight

Drug Fact Label picture taken from https://dailymed.nlm.nih.gov/dailymed/drugInfo.cfm?setid=0027e3a2-862a-474d-8c33-

OTC Option 3: homeopathic agent







Consider this. . .

- How can Pharmacy Technicians collect patient information related to this OTC case so they can assess the patient in workflow or at the prescription pick up/appointment and provide a plan?
- What can Pharmacy Technicians do to help monitor the Pharmacist's recommendation after the pick-up?

Case: Pediatric Population

Additional information

- Nora doesn't always like to take liquids
- Nora's mother would like some tips on how to get children to take mediation



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Case: Pediatric Population

Pharmacist Medication Management

- Positive attitude
- Flavoring
- Cold taste buds and/or cold medicine
- Flavored chaser
- Mix with food
- Administer toward cheek
- Provide choices
- Explain why medicine is needed
- Pacifier Liquid Medicine Dispenser







Case: Healthy Living with Diabetes

What questions do you have for Michael?

- Symptoms: Stuffy Nose
- Characteristics: Feels hard to breath through his nose
- History: Gets a cold every year!
- Onset: About 2 days ago, in the late evening
- Location: Nasal passages
- Aggravating factors: Lying down
- Remitting factors: Hot shower
- Medications: Metformin, atorvastatin, lisinopril
- Allergies: none
- Coexisting medication conditions: Diabetes x 1 year









- a) pseudoephedrine
- b) combination product
- c) oxymetazoline



OTC Option 1: Pseudoephedrine

mportant: Read all product information before using. Geep this box for important information.	Drug Facts (con	tinued)	
Drug Facts	Directions adults and children 12 years and over	■ take 2 tablets every 4 to 6 hours ■ do not take more than 8 tablets in 24 hours	
Active ingredient (in each tablet) Purpose Pseudoephedrine HCI 30 mgNasal de conge stant	children ages 6 to 11 years	 take 1 tablet every 4 to 6 hours do not take more than 4 tablets in 24 hours 	
Uses temporarily relieves sinus congestion and pressure	children under 6 years	do not use this product in children under 6 years of age	
temporarily relieves nasal congestion due to the common cold, hay fever or other upper respiratory allergies	Other informati		
Warnings Do not use ifyou are now taking a prescription monoamine oxidase	 do notuse if carton is opened or if blister unit is broken see side panel for lot number and expiration date 		
Inhibitor (MAOI) (certain drugs for depression, psychiatric or emotional conditions, or Parkinson's disease), or for 2 weeks after stopping the MAOIdrug. If you do not know if your prescription drug contains an MAOI, ask a doctor or pharmacist before taking this product.	Inactive ingredients carnaubawax, coloidai silicon dioxida yeliow no. 10 duminum lake, FD&C red no. 40 aluminum lake, FD&C no. 6 aluminum lake iron oxide, magnesium stearab, microcrystallin cellulose, polyethylene glycd, polyvinyl alcohol, pregelatinized starc stellac, sodum starch glycdab, tac, titarium dioxide Questions or comments? call 1-888-217-2117 (tol-free) or 215-273-8755 (colle ct)		
Ask a doctor before use if you have ■ heart disease ■ high blood pressure			
It fryoid dise ase in diabetes It rouble unin ating due to an enlarge d prostate gland			
When using this product do not exceed recommended dose	11001 0		
Stop use and ask a doctor if nervousness, dizziness, or sleeplessness occur symptoms do not improve within 7 days or occur with a fever			
If pregnant or breast-feeding, ask a health professional before use. Keep out of reach of children. In case of overdose, get medical help or contact a Poison Control Center right away. (1-800-222-1222)	7.01	081-0865-24 1	

MOA

- Adrenergic agonist
- Vasoconstriction via release of catecholamines

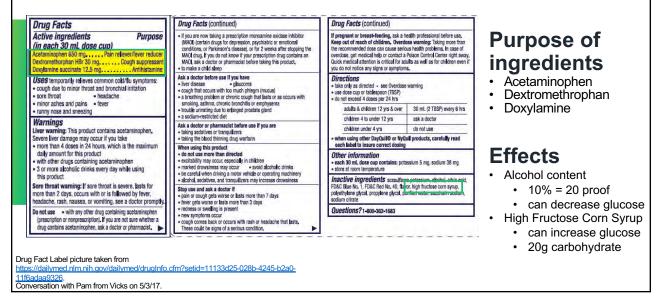
Effects

- Increased blood glucose
- Increased blood pressure

Drug Fact Label picture taken from https://dailymed.nlm.nih.gov/dailymed/drugInfo.cfm?

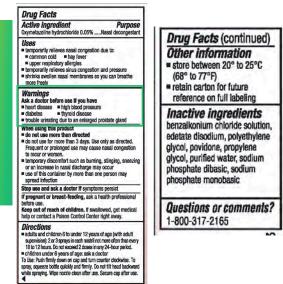
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OTC Option 2: Combination product



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OTC Option 3: Oxymetazoline



MOA

- Adrenergic agonist
- Vasoconstriction via release of catecholamines

Administration

· Topical, so minimal systemic absorption

Effects

- Minimal on blood glucose
- Minimal on blood pressure

Drug Fact Label picture taken from https://dailymed.nlm.nih.gov/dailymed/drugInfo.cfm?setid=89c165ba-3ad5-49b5-a5bb-423dc8e15bad.



Consider this. . .

• How can Pharmacy Technicians collect patient information related to this OTC case so they can assess the patient in workflow or at the prescription pick up/appointment and provide a plan?

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• What can Pharmacy Technicians do to help monitor the Pharmacist's recommendation after the pick-up?



What immunizations do you provide besides influenza?

- a) Pneumococcal Vaccines
- b) Recombinant zoster vaccine (RZV)
- c) Hepatitis B
- d) Tdap
- e) More than one of the above or Other

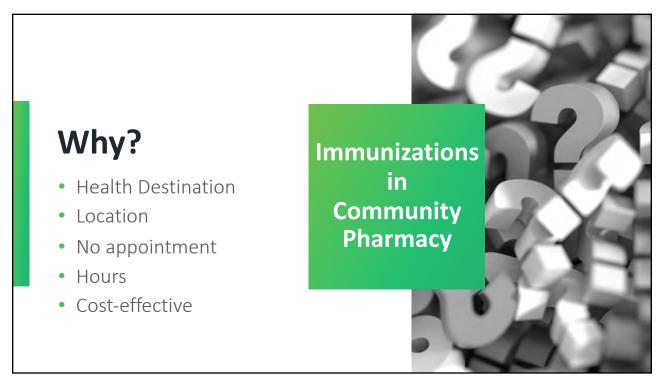


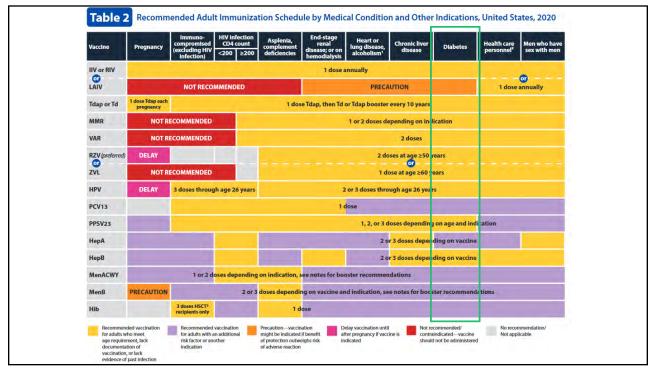
Case: Healthy Living with Diabetes

58-year-old male, Michael

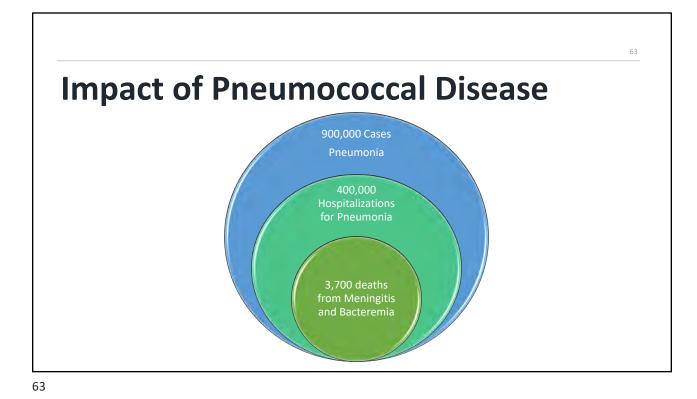
- History of Type 2 Diabetes
- Complains of cold symptoms; mainly a stuffy nose
- Presents to your pharmacy for help
- What Immunizations does Michael need?







		For adults age 65 years and older	PCV13 is g decision-m	iven at age 65 aking between	V23 at age 65. years based on the healthcare until 1 year aft	shared clinical provider and	
Medical	-		PCV13			PPSV23	
conditions	Risk Group	Underlying medical condition or other risk factor	Administer PCV13 doses needed to complete series to children through age 71 months	Administer 1 dose to PCV13-naïve children age 6 through 18 years	Administer 1 dose to PCV13-naïve adults age 19 years and older	Administer 1 dose of PP5V23 at age 2 through 64 years	Administer a second dose of PPSV23 5 years after first dose if age younger than 65 years
	Immuno-	Chronic heart disease3	x			x	
	competent	Chronic lung disease ⁴	x			x	
or	11	Diabetes mellitus	X			x	
		Cerebrospinal fluid leak	x	X	X	x	
other		Cochlear implant Alcoholism	X	x	X	x	
		Chronic liver disease,				x	
indications		Cigarette smoking (≥19 yrs)				x	
	or anatomic asplenia Immuno- compromised	Sickle cell disease/other hemoglobinopathy	x	х	x	x	x
for		Congenital or acquired asplenia	x	x	x	x	x
PCV13		Congenital or acquired immunodeficiency ⁵	x	x	x	x	x
PCVIS		HIV	×	x	x	x	x
		Chronic renal failure	X	X	X	x	X
&		Nephrotic syndrome	X	x	X	x	x
		Leukemia	x	X	x	x	x
		Hodgkin disease	x	x	x	x	x
PPSV23		Generalized malignancy	x	x	X	x	x
		latrogenic immunosuppression ⁶	x	x	x	x	x
		Solid organ transplant	x	x	x	x	x
ww.immunize.org/catg.d/p2019.pdf		Multiple myeloma	x	x	х	x	x



RISK19-64 years, High Risk (HR), total24.5igh Risk Patients19-64 years, HR, Caucasian24.9Children < 2 years old19-64 years, HR, Black22.619-64 years, HR, Hispanic23.0		and the second se	
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19-64 years, High Risk (HR), total24.5igh Risk Patients19-64 years, HR, Caucasian24.9Children < 2 years old19-64 years, HR, Black22.6Chronic health conditions19-64 years, HR, Hispanic23.0Immunocompromised23.219-64 years, total69.0	Risk	Category	Percent
Children < 2 years old19-64 years, HR, Black22.6Children < 2 years old		19-64 years, High Risk (HR), total	24.5
Children < 2 years old19-64 years, HR, Hispanic23.0Chronic health conditions19-64 years, HR, Asian23.2Immunocompromised≥ 65 years, total69.0	High Risk Patients	19-64 years, HR, Caucasian	24.9
19-64 years, HR, Hispanic 23.0 Chronic health conditions 19-64 years, HR, Asian 23.2 Immunocompromised ≥ 65 years, total 69.0	Children < 2 years old	19-64 years, HR, Black	22.6
Immunocompromised ≥ 65 years, total 69.0	,	19-64 years, HR, Hispanic	23.0
≥ 65 years, total 69.0	 Chronic health conditions 	19-64 years, HR, Asian	23.2
≥ 65 years, total 69.0	Immunocompromised		
Smokers ≥ 65 years, Caucasian 73.2		≥ 65 years, total	69.0
	Smokers	≥ 65 years, Caucasian	73.2
	ination Coverage among Adults in the Untied States, National Health view survey, 2017. Available at: <u>https://www.cdc.gov/vaccines/imz-</u>	≥ 65 years, Hispanic	51.0
/ survey, 2017. Available at: https://www.cdc.gov/vaccines/imz- ≥ 65 years, Hispanic 51.0	s/coverage/adultvaxview/pubs-resources/NHIS-2017.html. 9/21/20.	≥ 65 years, Asian	55.6



Prevnar 13 (PCV13)

- Adults 65 years of age and older (based on shared clinical decision making)
- Adults 19 64 years old with:
 - Certain conditions
 - Immunocompromised
 - Functional or anatomic asplenia
 - CSF leaks/Cochlear implants

Huang S, eta al. 2011, (Center for Disease Control)

Pneumovax 23 (PPSV23)

65

66

- Adults 65 years of age and older
- Adults 19 64 years of age with:
 - Heart disease
 - Liver disease
 - Alcoholism
 - Diabetes
 - COPD/emphysema, asthma
 - Smokers
 - Other conditions

Herpes Zoster

Risk

- Shingles will develop in 1 of 3 people
- 1 Million cases annually
- High Risk
 - Immunocompromised
 - Older adults

Immunization Rates

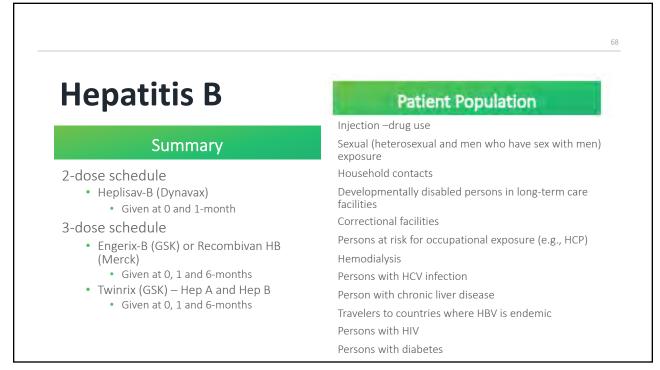
Category	Percent
≥ 60 years, Total	34.9
≥ 60 years, Caucasian	39.3
≥ 60 years, Black	17.1
≥ 60 years, Hispanic	19.9
≥ 60 years, Asian	31.9

Vaccination Coverage among Adults in the Untied States, National Health Interview survey, 2017. Available at: https://www.cdc.gov/vaccines/imz-managers/coverage/adultvaxview/pubs-resources/NHIS-2017.html. Accessed 9/21/20.

Recombinant zoster vaccine (RZV)

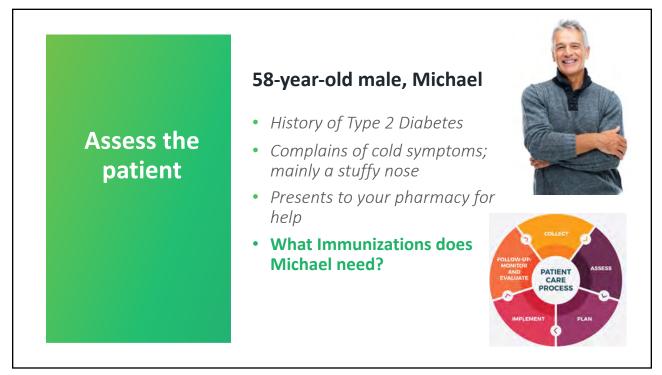
- ACIP preferred vaccine
- Indicated for adults 50 years of age and older
 - Those who previously received zoster vaccine live should be vaccinated
- 2-doses administered 2 to 6 months apart
- Delay vaccine
 - Immunocompromised
 - Pregnant
 - Current acute shingles episode

Huang S, eta al. 2011, (Center for Disease Control)

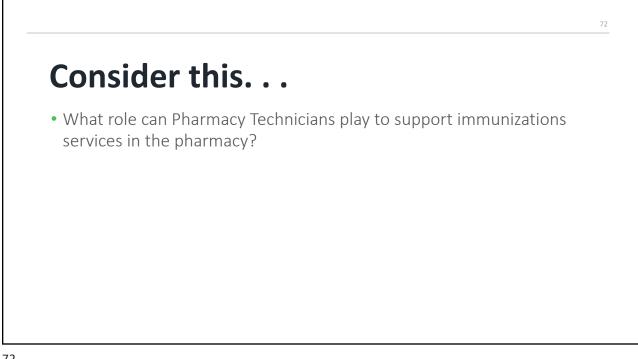


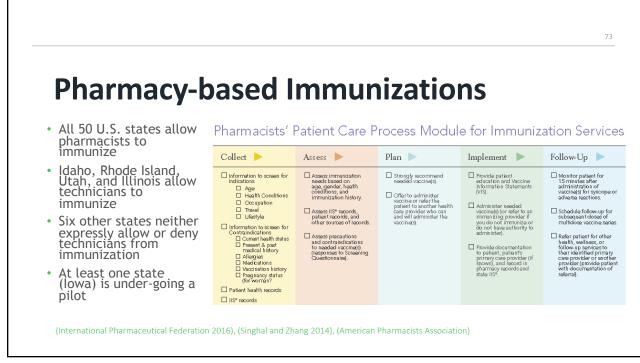
Tetanus, Diphtheria, Pertussis (Tdap)

Summary	Administration
 Protects from 3 diseases Tetanus Diphtheria Pertussis 	 Routine, 1-dose at 11-12 years then Td/Tdap booster every 10 years Catch-up, 1-dose anyone greater than 11 years then Td/Tdap booster every 10 years Pregnancy, 1-dose during each pregnancy preferably weeks 27-36 of gestation
	 Td or Tdap can be used for decennial Td booster, wound management and catch-up immunization schedule

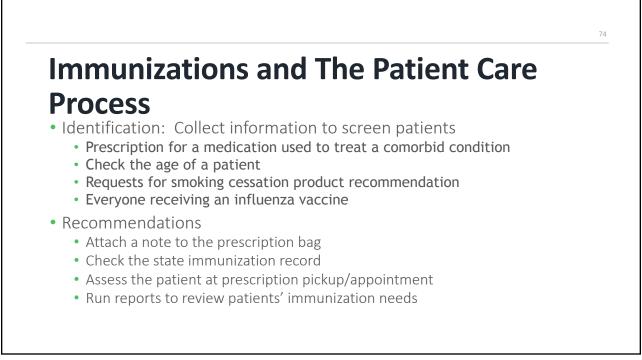


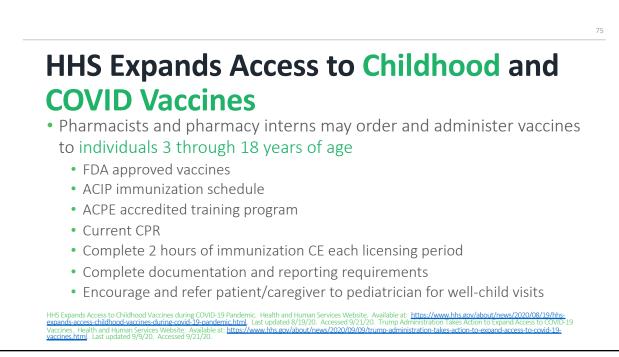












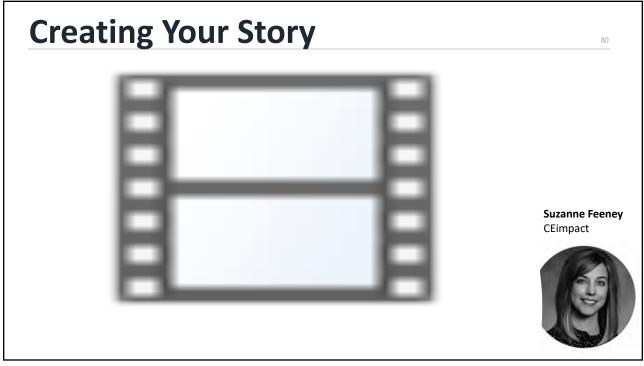


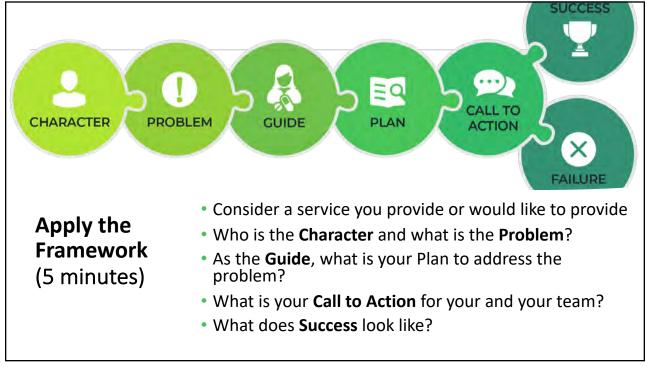
Engaging Patients Changing the focus of your pa	atient communication
Provider-Centered	Patient-Centered
I am the expert	l am your partner
Here's the advice you need to hear	Asking rather than telling
You NEED to lose weight, stop smoking, start taking all your meds on time, exercise	What is the patient willing to do? What does the patient want and need?

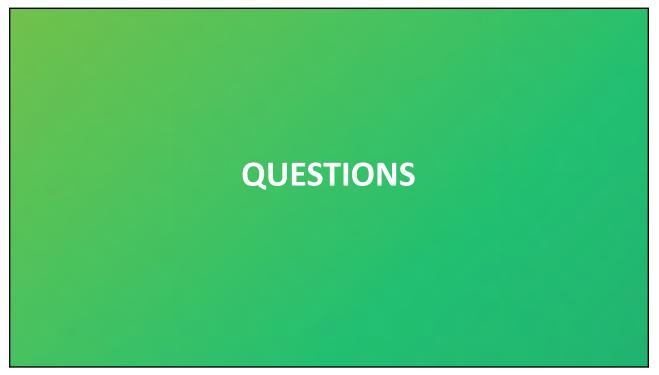
Open- vs. Closed-Ended Questions

OPEN	CLOSED
What concerns to you have about your medication?	Are you concerned about your medication?
Tell me about how the past month has gone with taking your medication	Did you remember to take your medication the past month?
What are you willing to do with regards to exercise?	Are you willing to exercise for 30 minutes each day?
What would it mean to you to make this happen?	Would it make you happy if this happened?









CREATE YOUR STORY

STEP 1: Select a service you'd like to maximize

Write your service here: _____

STEP 2: Using the Framework reviewed, create your story by filling in the blanks

below.



STEP 3: Once you have this complete, put your story into paragraph form.