Pharmacist Clinical Service in an Orthopedic Rehabilitation Ward in Tuen Mun Hospital
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Introduction
Tuen Mun Hospital has started a 4 week pilot study of pharmacist clinical service in two orthopedic rehabilitation wards in early 2016.

Objectives
This study aims to evaluate the extent and impact of pharmacists’ intervention, to evaluate the clinical significance of drug related problems (DRPs) identified and to evaluate doctor’s acceptance rate of interventions made by pharmacist.

Methodology
A prospective study design was applied. DRPs identified were classified according to the PCNE Classification V6.2. Three independent clinical pharmacists were responsible for evaluating the clinical significance of individual DRPs. Potential risk factors leading to the occurrence of a DRP were also analyzed.

Result
A total of 144 patients were included in this study. DRPs were identified in 44 (30.6%) patients. The most common DRPs were categorized as “Treatment effectiveness” (44.1%) and “Adverse reactions” (39%). Common causes of DRPs were “Drug selection” (39%), “Logistics” (15.3%) and “Dose selection” (13.6%). There were 109 interventions performed at prescriber, patient/caretaker and drug levels. The acceptance rate was found to be 93.9%. Majority (93.2%) of DRPs were somewhat significant (Outcome rarely lead to harm) to very significant (Outcome may lead to severe result). Eleven cases were rated as very significant (18.6%). Significant relationships were found between occurrence of a DRP and total medications of 9 or more (p=0.029) or regular medications of 5 or more (p=0.033). No statistical relationship between DRP occurrence and gender or age was found.

The pharmacist intervention was shown to be beneficial to patients as pharmacist was
able to identify drug related problems to optimize drug therapy as a whole. With limited resources, the target patients should be those with more than 5 regular medication or 9 total medications.