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COMPLETED GRANT SYNOPSIS

Heart Failure Assessment at the Community Pharmacy Level –A Feasibility Pilot Study Barry E. Bleske, Pharm. D., Doug Cornelius, Jennifer K. Ward, Steve C. Burson, Kerry K. Pickworth, Pharm.D., Marialice S. Bennett, RPH, Heidi Diez, Pharm. D., Michael P. Dorsch, Pharm. D., John M. Nicklas, M.D.

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Objectives 1) To evaluate the need, effectiveness, and applicability of "The One Minute Clinic" in the community pharmacy setting. Methods	
Study endpoints	 Number of patients with worsening HF Time to complete Perception of value
	Results

A total of 121 unique patients were evaluated in 10 pharmacies in the upper Midwest over a 12 month period. The application of this clinical tool took between 1-5 minutes in over 80% of the interactions. Seventy five patients (62%) had one or more signs or symptoms of worsening HF since their last reported visit with their physician or last refill. The most common symptoms detected included edema (39%) and increased shortness of breath (17%). Self-reported weight gain > 5 pounds were seen in 19% of patients. In regard to perception of value, pharmacists rated TOM-C HF tool as somewhat valuable to highly valuable to the patient in over 90% of patient interactions.

Conclusion

In this pilot study, the TOM-C HF tool was used to identify patients in the community pharmacy setting that appear to be developing worsening HF in a time efficient manner. Inclusion of the community pharmacists as an early screen for HF decompensation may be an important link in disease management programs to help reduce hospital readmission rates. Future studies will need to address whether use of the TOM-C HF tool can favorably impact clinical outcomes.