

Instructions to Evaluators

Case developers were solicited to design cases specifically for the CSC. These authors were also asked to develop an “answer key” and scoring supplement that reflects what they would expect a student to produce during the competition. The purpose of the key is to facilitate more objective evaluation and promote consistency among scoring. Cases and answers have been peer reviewed, but no case is perfect. This “key” is meant to serve as a guide.

In scoring the forms against the answer key, you may choose to give additional points for items identified that are not included in the answer key. You may not agree with the recommendations made. There are often many approaches possible to improve therapy, particularly when there are multiple drugs available.

Evaluators should decide in advance how to handle scoring problems. If students miss a critical problem on the care plan, will it hurt them throughout the care plan? What if something is written in the care plan, but not mentioned in the case presentation or vice versa? Whatever method you choose, it is important that you be consistent in evaluating all teams.

NOTE: Please provide forms to students in advance of the competition.

Explanation of Forms

The following is a guide for completing the Clinical Skills Competition forms. Students may familiarize themselves with the competition format by reviewing the forms and completing the practice case prior to the competition.

Pharmacist’s Patient Data Base Form

This form contains the patient’s demographic, administrative, medical, laboratory, drug therapy, behavioral/lifestyle and social/economic information. This is the information you will need to make patient-specific drug therapy decisions that reflect pharmaceutical care. This is to be determined and documented by you, the pharmacist, on the Pharmacist’s Care Plan.

Review the History of Present Illness and the Past Medical History/Surgery sections of the Patient Data Base Form. These sections will tell you what the current illnesses are and what current medical problems may result from such histories. Review the laboratory data, looking for fluctuations and abnormal values. Remember to consider the patient’s demographics when interpreting the laboratory data. Reviewing the Current Drug Therapy section should alert you to problems currently being treated.

Some of the medical problems may be caused by inappropriate drug therapy, but others may be due to the environment, disease states, or chronic conditions. For example, the medical problem may be a headache; therefore, the drug therapy problem could be anything from a drug interaction to the absence of drug therapy. Remember, the Patient Data Base Form may not explicitly state all of the acute and chronic medical problems. You may need to analyze laboratory data or refer to the progress notes.

ASHP CLINICAL SKILLS COMPETITION
PHARMACIST'S PATIENT DATA BASE FORM

Current Drug Therapy			
Drug Name/Dose/Strength/Route	Prescribed Schedule	Duration Start-Stop Dates	Compliance/Dosing Issue
1.			
2.			
3.			
4.			
5.			
6.			
7.			
8.			
9.			
10.			

Medications PTA	
1.	6.
2.	7.
3.	8.
4.	9.
5.	10.

Allergies/Intolerances	
<input type="checkbox"/> No known drug allergies	
Allergen	Reaction

Social Drug Use
Alcohol
Caffeine
Tobacco

Cost of Meds/month
\$
Insurance: <input type="checkbox"/> Yes <input type="checkbox"/> No
Copay
Medicaid
Annual Income
\$

Notes

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Drug Therapy Assessment Worksheet (DTAW)

The Drug Therapy Assessment Worksheet (DTAW) will serve as a guide to identify any drug-related problems that your patient may have. You may make notes on the DTAW. **However, the Drug Therapy Assessment Worksheet will not be scored.** As you proceed through all the questions on the DTAW, you will accumulate a list of drug therapy problems. All of these problems should be assessed on your Pharmacist's Care Plan. Drug-related problems may be listed as separate items on your Pharmacist's Care Plan or addressed in your recommendations for therapy of the acute or chronic disease states that the medicines are being used to treat. Teams will be evaluated on identifying and making appropriate recommendations for drug-related problems in the following areas below:

1. Correlation between drug therapy and medical problems
2. Appropriate drug selection
3. Drug regimen
4. Therapeutic duplication
5. Drug allergy or intolerance
6. Adverse drug events
7. Interactions: drug–drug, drug–disease, drug–nutrient, and drug–laboratory test
8. Social or recreational drug use
9. Failure to receive therapy
10. Financial impact
11. Patient knowledge of drug therapy

ASHP CLINICAL SKILLS COMPETITION DRUG THERAPY ASSESSMENT WORKSHEET (DTAW)

Type of Problem	Assessment	Presence of Drug-Related Problem	Comments/Notes
Correlation between Drug Therapy and Medical Problems	<p>Are there drugs without a medical indication?</p> <p>Are any medications unidentified (are any unlabeled or are any—prior to admission/clinic visit—unknown)?</p> <p>Are there untreated medical conditions? Do they require drug therapy?</p>	<ol style="list-style-type: none"> 1. A problem exists. 2. More information is needed for a determination. 3. No problem exists or an intervention is not needed. 	
Appropriate Drug Selection	<p>What is the comparative efficacy of the chosen medication(s)?</p> <p>What is the relative safety of the chosen medication(s)?</p> <p>Has the therapy been tailored to this individual patient?</p>	<ol style="list-style-type: none"> 1. A problem exists. 2. More information is needed for a determination. 3. No problem exists or an intervention is not needed. 	
Drug Regimen	<p>Are the prescribed dose and dosing frequency appropriate—within the usual therapeutic range and/or modified for patient factors?</p> <p>Is pm use appropriate for those medications either prescribed or taken that way?</p> <p>Is the route/dosage form/mode of administration appropriate, considering efficacy, safety, convenience, patient limitations, and cost?</p> <p>Are doses scheduled to maximize therapeutic effect and compliance and to minimize adverse effects, drug interactions, and regimen complexity?</p> <p>Is the length or course of therapy appropriate?</p>	<ol style="list-style-type: none"> 1. A problem exists. 2. More information is needed for a determination. 3. No problem exists or an intervention is not needed. 	
Therapeutic Duplication	<p>Are there any therapeutic duplications?</p>	<ol style="list-style-type: none"> 1. A problem exists. 2. More information is needed for a determination. 3. No problem exists or an intervention is not needed. 	
Drug Allergy or Intolerance	<p>Is the patient allergic to or intolerant of any medicines (or chemically related medications) currently being taken?</p> <p>Is the patient using any method to alert health care providers of the allergy/intolerance (or serious medical problem)?</p>	<ol style="list-style-type: none"> 1. A problem exists. 2. More information is needed for a determination. 3. No problem exists or an intervention is not needed. 	

ASHP CLINICAL SKILLS COMPETITION DRUG THERAPY ASSESSMENT WORKSHEET (DTAW)

Type of Problem	Assessment	Presence of Drug-Related Problem	Comments/Notes
Adverse Drug Events	Are there symptoms or medical problems that may be drug induced? What is the likelihood that the problem is drug related?	<ol style="list-style-type: none"> 1. A problem exists. 2. More information is needed for a determination. 3. No problem exists or an intervention is not needed. 	
Interactions: Drug-Drug, Drug-Disease, Drug-Nutrient, and Drug-Laboratory Test	<p>Are there drug-drug interactions? Are they clinically significant?</p> <p>Are any medications contraindicated (relatively or absolutely) given patient characteristics and current/past disease states?</p> <p>Are there drug-nutrient interactions? Are they clinically significant?</p> <p>Are there drug-laboratory test interactions? Are they clinically significant?</p>	<ol style="list-style-type: none"> 1. A problem exists. 2. More information is needed for a determination. 3. No problem exists or an intervention is not needed. 	
Social or Recreational Drug Use	<p>Is the patient's current use of social drugs problematic?</p> <p>Could the sudden decrease or discontinuation of social drugs be related to patient symptoms (e.g., withdrawal)?</p>	<ol style="list-style-type: none"> 1. A problem exists. 2. More information is needed for a determination. 3. No problem exists or an intervention is not needed. 	
Failure to Receive Therapy	<p>Has the patient failed to receive a medication due to system error or noncompliance:</p> <p>Are there factors hindering the achievement of therapeutic efficacy?</p>	<ol style="list-style-type: none"> 1. A problem exists. 2. More information is needed for a determination. 3. No problem exists or an intervention is not needed. 	
Financial Impact	<p>Is the chosen medication(s) cost effective?</p> <p>Does the cost of drug therapy represent a financial hardship for the patient?</p>	<ol style="list-style-type: none"> 1. A problem exists. 2. More information is needed for a determination. 3. No problem exists or an intervention is not needed. 	
Patient Knowledge of Drug Therapy	<p>Does the patient understand the purpose of his or her medication(s), how to take it, and the potential side effects of therapy?</p> <p>Would the patient benefit from education tools (e.g., written patient education sheets, wallet cards, and reminder packaging)?</p>	<ol style="list-style-type: none"> 1. A problem exists. 2. More information is needed for a determination. 3. No problem exists or an intervention is not needed. 	

Pharmacist's Care Plan

Using the patient's data and the DTAW, you will be able to develop an effective care plan for your patient. Clearly define the health care needs. Health care needs include treatment of all acute and chronic medical problems, resolution of all actual or potential drug-related problems, and identification of any other health care services from which your patient may benefit.

Remember to think about potential medical problems for which your patient may be at risk and disease prevention and disease screening activities that may be appropriate to recommend. Also, don't forget to consider specific patient factors that may influence your goals and recommendations for therapy (e.g., physical, psychological, spiritual, social, economic, cultural, and environmental).

To complete your care plan, specify drug therapy monitoring parameters, desired endpoints, and frequency in order to optimize therapeutic effectiveness and minimize or avoid adverse effects. Your desired endpoints should be measurable by clinical, laboratory, quality of life, and/or other defined parameters (e.g., demonstration of understanding). Frequency of follow-up should provide adequate time necessary to see some results as well as be convenient to your patients.

Finally, prioritize each health care need by acuity. Use the following designations to identify acuity: Most Clinically Significant, Major Clinical Significance, Less Clinically Significant. This relative ranking will indicate the order in which you want to take care of each patient care issue.

Patient _____ Pharmacist _____
 Location/Room _____ Date _____

ASHP CLINICAL SKILLS COMPETITION
PHARMACIST'S CARE PLAN

Evaluated
for Competition

Clinical Significance*	Health Care Need**	Pharmacotherapeutic Goals	Recommendations for Therapy	Monitoring Parameter(s)	Desired Endpoint(s)	Monitoring Frequency

*Indicate "most clinically significant problem," health care needs of "major clinical significance," and those that are "less clinically significant."

**Health care needs include actual and potential medical problems and drug-related problems as well as any other health care services from which your patient may benefit.

Guidelines for Evaluation Criteria*

Written Pharmacist's Care Plan: 90 Points + 10 possible bonus points

Oral Patient Case Presentation: 90 Points + 10 possible bonus points

Maximum Total: 200 Points

*Please refer to page 20 for the Evaluator Scoresheet to be used in competition.

Evaluation and Scoring of Pharmacist's Care Plan (100 Points)

Evaluators will determine if the information given is complete, appropriate, and accurate in the following areas:

Priority Ranking (Maximum Points = 13)

- Each health care need is appropriately prioritized by acuity relative to the others
- Health care needs are to be prioritized by the categories of: most clinically significant (only one), major clinical significance (more than one), less clinically significant (more than one), as opposed to ranking each health care need in order (e.g., 1,2,3,4 . . .)

Health care Needs (Maximum Points = 18 + 5 possible bonus points)

- All actual and potential medical problems and drug-related problems as well as any other health care services from which the patient may benefit are identified

Therapeutic Goals (Maximum Points = 14)

- Goals are individualized and realistic

Recommendations (Maximum Points = 24 + 5 possible bonus points)

- Recommendations are individualized, realistic, and consistent with medical standards and principles of evidence-based medicine

Monitoring Parameters (Maximum Points = 13)

- Parameters are practical and effective measures of the desired endpoint

Desired Endpoints (Maximum Points = 4)

- Endpoints are reasonable and appropriate choices for the patient

Frequency (Maximum Points = 4)

- Frequency is reasonable for the plan and appropriate for the patient

Evaluation and Scoring of Oral Case Presentation (100 Points)

Teams will have a maximum of 5 minutes to present their Pharmacist's Care Plan. The presentation will be followed by a 5-minute question-and-answer period. Assume the audience is a multidisciplinary group of health care professionals who are familiar with your patient. **Do not present background information on your patient.** Present the health care needs that your team identified along with your goals, recommendations, and rationale. Include desired endpoints, monitoring parameters, and frequency of follow-up for issues of key importance. Present your recommendations starting with the problem of highest acuity and ending with the problem of lowest acuity. Either or both team members may present and respond to questions.

Presentation Skills (Maximum Points = 20)

- Verbal—clear, coherent, concise, complete, organized, confident, convincing
- Nonverbal—eye contact, facial expressions, body language, voice, demeanor, presence
- Interpersonal—warmth, compassion, manners/tact, professionalism

Pharmacotherapy Knowledge (Maximum Points = 20)

- Accuracy and understanding

Clinical Judgment (Maximum Points = 25)

- Problem-solving and decision-making
- Application of pharmacotherapy knowledge to the individual patient

Defense of Recommendations (Maximum Points = 25)

- Therapeutic rationale
- Support (evidence-based medicine)

Up to 10 Bonus Points may be given at the judge's discretion.