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**Sample List of Potential Pharmacy Public Health Roles at the Local or State Levels\***

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| **Preparation Category** | **Prepare for** | **Cause** | **Issues** |
| Patient Care |
|  | Patient/visitor surge | Patients may seek other sources of care and information if local hospitals closed or under quarantine | -Adjust staffing to handle increased traffic, phone calls, and other electronic communications (e.g., social media)-Manage staff to accommodate revised or expanded responsibilities with appropriate sleep/rest cycles-Prepare information for patients/visitors for education and awareness programs-Report patient surges to key facility staff and public health officials |
|  | Sicker patients | Patients may be sicker than usual but barred from hospitals | -Review latest CDC information for education and awareness programs-Help triage patients in accordance with institution emergency preparedness plan -Inform key facility staff and contact local/state health departments for latest guidance and instructions (e.g., home quarantine) |
|  | Worried well | Patients who have respiratory symptoms but no history of exposure  | -Provide information and reassurance through education and awareness programs-Remind patients to get influenza vaccine for the 2019-2020 season if they have not already |
|  | Requests for ineffective prevention and treatment options | Remedies for self-treating COVID-19 may be requested by patients even though they are not effective | Provide patients with most current treatment and prevention information. |
|  | Team-based care | Interprofessional expertise needed | -Collaborate with key players (e.g., microbiologist) and communicate on interprofessional issues needed to optimize patient care-Be proactive and flexible in assuming new responsibilities within a pharmacists scope of practice |
| **Preparation Category** | **Prepare for** | **Cause** | **Issues** |
| Communication and Information |
|  | Requests for ineffective prevention and treatment options | Remedies for self-treating COVID-19 may be requested by patients even though they are not effective | Provide patients with most current treatment and prevention information |
|  | Visitors and family members | Concerned and anxious due to fear of unknown | Prepare for increased phone calls and directing of family members that come to the facility to visit |
|  | Poor communication or information | Health officials may update information frequently to adjust to evolving situation | -Communicate, and collaborate with institution, local, and/or state Incident Command Centers for coordinated and informed response-Seek reliable information sources-Seek local information for current quarantine/treatment recommendations-Be an advocate for local citizens and be vigilant for emerging issues-Keep staff well informed through frequent communication via various channels and provide a forum to address questions and concerns |
|  | Pharmacy workforce | Information sharing to ensure a ready and engaged workforce | - Stay up to date on the latest information about signs and symptoms, diagnostic testing, and case definitions for COVID-19-Share information with pharmacists at other institutions experiencing the same crisis-Use network groups to keep colleagues at other institutions abreast of new information, guidelines, and issues-Perform literature searches and communicate with drug manufacturers to obtain unpublished information on file for emerging and investigational regimens  |
| **Preparation Category** | **Prepare for** | **Cause** | **Issues** |
| **Supply Chain Management** |
|  | Challenges securing anticipated stocks of medications and supplies | Supply chain disruption | -Report unusual sales volumes for medications or patient complaints-Determine mechanisms for obtaining drugs not available on market (e.g., emerging investigational therapies) during regular and off-hours-Report supply chain issues (e.g., drug shortages, PPE) to key facility staff and contact local/state health departments |
|  | Requests to dispose of potentially contaminated medications | Family members of potential Coronavirus cases may have unused medications they want to throw away | Determine local/state health department recommendations for disposing of unused medication products that had been dispensed to a COVID-19 infected patient |
| **Preparation Category** | **Prepare for** | **Cause** | **Issues** |
| **Pharmacy Operations** |
|  | Rapid response kits | Timely access to treatment | -For supportive care and as investigational therapies emerge, prepare rapid response kits containing information such as management algorithms, drug dosing and administration guidelines, and pharmacist contact numbers-Make kits available in relevant patient care units such as emergency departments and intensive care units |
|  | Leadership in medication use and safety | Safe patient care | Ensure that appropriate education and drug administration and dosing guidelines are available to guide medical, nursing, and pharmacy staff |
|  | Revenue cycle management | Fiscal solvency | Drug waste tracked and reported to finance department to be considered for reimbursement by government (e.g., unused drug taken into isolation room discarded in a biohazard container) |
| **Preparation Category** | **Prepare for** | **Cause** | **Issues** |
| **Infection Prevention and Control** |
|  | Requests to dispose of potentially contaminated medications and supplies | Family members of potential COVID-19 cases may have unused medications they want to throw away | Determine local health department recommendations for disposing of unused medication products and supplies that have been dispensed to a COVID-19 patient (NOTE: The coronavirus is known to live on surfaces for hours or days,but it is also effectively killed by available disinfectants when properly used.)  |
|  | Policies and procedures | Integrity of drug supply | Develop or revise policies and procedures pertaining to drug delivery to meet infection control precautions |
|  | Protecting workforce from exposure | -Healthcare workers are highly likely to become infected if they work closely with a COVID-19 patient-Limiting exposure time and closeness can help prevent infection | -Orient and education workforce regarding infection control precautions-Use standard and respiratory precautions-Handle items associated with potentially exposed COVID-19 patients while wearing gloves-Frequent hand washing-Use face masks if counseling coughing or feverish patients- Ensure that appropriate pharmacy staff have been medically cleared, fit-tested, and trained for respirator use.-Use telephone for counseling-Drop off prescriptions at home-Bill via credit card to avoid handling checks or money |
|  | Monitoring pharmacy staff | -Fever, cough, and shortness of breath are early signs and symptoms of COVID-19.  | -Be prepared to take temperature of workers once a shift-If fever, cough, and shortness of breath are present, send worker to designated COVID-19 clinic site-If a family member is sick, put employee on sick leave-Notify occupational health services |

\*Source: Adapted from Tables 3.5 and 3.6 (ASHP Pharmacy in Public Health: Basics and Beyond)

**References:**

CDC 2019 Novel Coronavirus resources: [www.cdc.gov/coronavirus/2019-ncov/index.html](http://www.cdc.gov/coronavirus/2019-ncov/index.html)

WHO: [www.who.int/emergencies/diseases/novel-coronavirus-2019](http://www.who.int/emergencies/diseases/novel-coronavirus-2019)

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