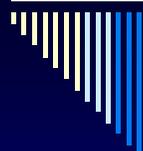


# The Emergency Pharmacist (EPH): A Safety Measure in Emergency Medicine

## Part III: Implementation

Prepared by the Emergency Pharmacist Research Team, University of Rochester Department of Emergency Medicine  
Rollin J. (Terry) Fairbanks, Principal Investigator; Karen E. Kolstee, Project Coordinator; Daniel P. Hays, Lead Pharmacist  
[www.EmergencyPharmacist.org](http://www.EmergencyPharmacist.org)

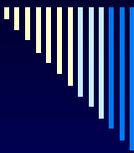
Supported by The Agency for Healthcare Research and Quality,  
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## National Implementation

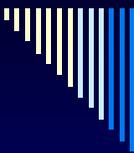
- Nationally, an estimated 3-5% of ED's have a clinical pharmacist in the ED
- 30.1% plan to request funding
- 18.3% have attempted to gain funding for a pharmacist position
  - Funding primarily done through department of pharmacy
- The demand for an EPH is increasing

Thomasset and Faris, *Am J Health-Syst Pharm*, Aug 2003; 60



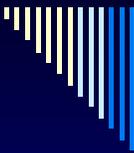
## The Plan

ED's across the country are in need of dedicated pharmacists – come in with a plan and they will welcome you with open arms...



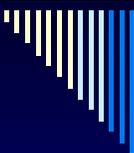
## Step I: Assess Individual ED Environment

- Size of hospital
- Academic center vs. non-academic
- Urban vs. rural
- Patient demographics
- Number of patients seen
- Trauma center or not
- Have a potential EPh candidate shadow medical staff to determine needs and role



## Step 2: Recruitment

- Finding a full time dedicated EPh
  - Education
    - Pharm D.
      - Residency – accredited emergency pharmacist program
      - ACLS, PALS, ATLS certification
      - Preceptor – through central pharmacy
    - Experience
      - Critical/acute care
      - Emergency Medicine



## What to Look for

- Characteristics
  - Proactive – continually offer assistance
  - Actively seeking out medical team
  - Build relationships with all medical staff
  - Actively seeking out patients that can benefit from EPh intervention
  - Ability to appear helpful and not confrontational



## Step 3: Overcoming Challenges

- Financial
- Staff Resistance\*
- National Pharmacist Shortage

\* Probably not a problem! See: Fairbanks RJ, Hildebrand JM, Kolstee KE, Schneider SM, Shah MN. *Medical and nursing staff value and utilize clinical pharmacists in the Emergency Department.* [Emergency Medicine Journal](#) (in press).



## Financial

- Important to demonstrate that there is return on investment for the EPh salary
  - EPh will save \$\$\$ in an ED
    - By recommending lower cost medications with equal or better efficacy for particular treatments
    - By reducing adverse drug events
  - 4 month study – 2150 interventions
  - 1393 directly related to ADE's
  - Cost avoidance of \$1,029,776
- Use existing pharmacists to participate in clinical decision making, even if a full time position is not an option

Lada, P. et al. [Am J Health-Syst Pharm](#), Jan 2007; 61(4)

## An Office is Not Necessary

- Provide EPh with necessary equipment in ED (lap top, portable phone, pager, reference guides)

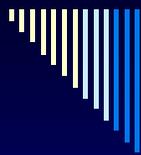


The University of Rochester's EPh in his "office" in the trauma bay.

## Staff Resistance to EPh

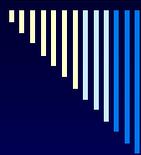
- Minimize the potential for resistance
  - Stress importance of teamwork in order to improve quality of care
  - Differences in opinion should be settled away from patient's bedside
  - Ensure consistency with EPh services – Reliability
- Success with EPh at the University of Rochester Medical Center
  - 99% feel EPh improves quality of care
  - 96 % felt EPh was an integral part of ED team
  - 95% indicated they had consulted with EPh at least a few times during last 5 shifts

Hildebrand, JM; et al. *Academic Emergency Medicine* (In Press)



## National Shortage of Pharmacists

- Opportunities for existing pharmacists
  - Participate in clinical decision making
  - Specialty/critical care needs
  - Utilize pharmacist for high risk medications
  - Utilize pharmacist for high risk patients
  - Coverage during identified high volume or peak hours



## Step 4: Creating a National Norm

- Increase awareness to encourage hospitals to initiate EPh programs
  - Print and broadcast media
  - ASHP / ACCP involvement
  - National EM/CC society involvement
  - Publications
  - AHRQ and other funding to study program outcomes
  - There is a need for a formal cost analysis study