Pharmacy Orders Process

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Where Are We?

• Prior to 2014
  • Pharmacist created entire order including
    – Nursing assessments and considerations
    – Supportive care
    – Dosing and administration
    – Prohibited concomitant meds
    – Study related assessments performed in clinic

• Now
  • Multidisciplinary committees develop orders based on role
    – Pharmacist
      • Supportive care
        – Pre-medications
        – Home medications
      • Dosing and administration
      • Prohibited concomitant meds
      • Document control
    – Nursing
      • Nursing considerations and treatment parameters
    – Working group
      • Study related assessments performed in clinic
What have we done well?

- Orders created in multidisciplinary manner
- Feedback from team and nursing in a single forum
- Set timeline with dedicated meetings for review of orders
- Central contact for orders
  – Sandy Middleton
What are the challenges?

• Time of all involved to develop and review
  – 3-4 orders reviewed every 2 weeks
• Pharmacy manpower
  – Clinical specialist FTE cut from
    • 2 EUH + 6 WCI
    • 2 EUH + ~3 WCI
• Feedback and approval from PI
• Amendments remain a challenge
What is the plan to address?

• In progress
  – Lower complexity trials bypass committee?
  – Support for additional personnel?

• Triage of orders
  – Currently first come first served unless cooperative group

• Set deadlines for PI response
How will progress be measured? (Metrics)

- Time from CTRC approval to order draft available for review
- Number of orders created
- Qualitative feedback from working group, nursing