

Primary Health Care Initiatives (PHCI) Project
Contract No. 278-C-00-99-00059-00
Abt. Associates Inc.

MEDICATION COUNSELING and PATIENT EDUCATION

LEARNING OBJECTIVES

- Describe important questions to ask a patient about their medication
- Enhance communication skills needed to verify patient understanding
- Create ways to improve patient counseling
- Evaluate ability to perform effective patient medication counseling

TEACHING STRATEGIES

- Observe patient counseling through video and/or instructor role-play
- Role-play to demonstrate understanding and effectiveness of patient counseling
- Develop a medication “taste-tasting” area to sample liquid medications and create ways to improve patient counseling based on that experience
- Small group discussion to share difficult experiences in getting patients to take medication and how to manage them

MATERIALS AND EQUIPMENT NEEDED

- Overhead projector and transparencies
- White board and markers
- TV and VCR
- Liquid medications (amoxicillin, ampicillin, cotrimoxazole, albuterol, cough medications, etc)
- Dixie cups and toothpicks

LEARNING POINTS

- Important to ask open-ended questions
- Important to verify patient understanding
- Important to correct misunderstood information in a non-threatening way
- **Questions to ask patient before prescribing or dispensing medication**
 - What type of symptoms are you having? How severe are the symptoms? Has anything made the symptoms better or worse?
 - What other medications are you currently taking?
 - What herbal or natural remedies might you be using?
 - Are you allergic to any medications?
 - Are you pregnant or breast-feeding?
 - What other medical conditions do you have?
 - Have you had any problems with certain medicines in the past (allergic reaction, rash, significant side effects)?
- **Questions to ask patient when dispensing the medication**

- What did the doctor tell you this medication is for?
- How did the doctor tell you to take this medication?
- What did the doctor tell you to expect from this medication?
- To be sure I didn't miss anything, can you repeat back to me how you will take this medication?

These questions can be expanded further:

- **What did the doctor tell you this medication is for?**
 - What problem or symptom is it supposed to help?
 - What is it suppose to do?
- **How did the doctor tell you to take the medication?**
 - How often did your doctor say to take it?
 - How much are you supposed to take?
 - How long are you to continue taking it?
 - What did your doctor say to do when you miss a dose?
 - How should you store this medication?
 - What does 3 times a day mean to you?
- **What did your doctor tell you to expect?**
 - What good effects are you supposed to expect?
 - What bad effects did your doctor tell you to watch for?
 - How will you know if the medication is working?
 - How will you know if the medication is not working?
 - What should you do if a bad reaction occurs?
 - What precautions are you to take while on this medication?
 - What are you to do if the medication doesn't work?
- **To be sure I didn't miss anything, can you repeat back to me how will you take this medication?**
 - Verify that patient has understood you correctly
 - Answer any other questions patient may have about medication

SUMMARY

- For each and every medication, patient should understand (and be able to repeat back to you):
 - **Reason for taking** the medication (ie, antibiotic for infection, cough syrup for cough suppression)
 - **How to properly take** medication (dosage, # of times per day, how long)
 - **What to expect** from the medication
 - **Potential, common side effects** of medicine (not entire list of side effects, but those that are more likely to be noticed) AND what to do about side effects:
 - o *Example:* Continue amoxicillin if mild diarrhea develops, stop it diarrhea is frequent and/or severe
 - o *Example:* Avoid driving dangerous machinery when taking an anti-histamine (chlorpheniramine) that can cause sleepiness
 - o *Example:* If anti-inflammatory (diclofenac – Diclogesic) medication causes mild stomach burning, take an antacid like Mylanta; inform the doctor if this does not relieve the pain
 - **Serious or severe potential side effects** to watch for - for example:

- o swelling or pain in legs or severe chest pain with combined oral contraceptives (could be a blood clot)
- o significant dizziness with anti-hypertensive medications (may be due to excessively low blood pressure)
- o severe rash or swelling of the face with antibiotics (could be allergic reaction)
- o tiredness or weakness after taking diuretic like hydrochlorothiazide (may be due to decreased potassium in the blood)
- **Potential significant interactions** with other medications
 - o Example: reduce dose of theophylline if erythromycin started
 - o Example: in a woman taking combined oral contraceptive, use an additional barrier method of contraception for the month while taking an antibiotic (antibiotic can reduce effectiveness of oral contraceptive)

GROUP ACTIVITIES

- Taste-testing (may use this experience to create role-play scenario; ie. be able to tell patient what to expect in terms of taste, appearance, etc.)
 - Role-play (Participants may need to refer to table on medication effects and side effects before participating in role play)
1. Abu-Ahmad is a 65 year old man with diabetes, hypertension, and difficulty sleeping at night. He has just been seen by the doctor, and has been prescribed the following medicines:
 - a. Glibenclamide (Daonil) 5 mg every morning
 - b. Hydrochlorothiazide 25 mg every morning
 - c. Enalapril 10 mg every morning
 - d. Promethazine 25 mg at bedtime

In a role play, follow the above guidelines in counseling Abu-Ahmad about these medicines.
 2. A young mother stops to pick up a prescription for her 2 year old son, who has just been complaining of ear pain with a fever. The prescriptions are as follows:
 - a. Amoxicillin 250 mg 3 times daily for 7 days
 - b. Paracetamol 120 mg every 4 hours for fever and pain

She says that she also has some medicine at home left over from treating an ear infection of an older child, and wonders if she can give that to her son in addition. In a role-play, what should you tell this mother as you give her the medicines?
 3. Dana is a 35 year old woman with 3 children who is taking a combined oral contraceptive in a 28 day package. Following the above guidelines, what instructions do you give to her as you give her the medicine?

CRITICAL ELEMENTS FOR PHARMACIST REFERRAL TO PHYSICIAN

- Significant potential drug interactions
- History of significant allergies or side effects that are unknown to prescribing physician
- Patient does not understand the reason he/she is taking the medicine
- Patient shows dissatisfaction or unwillingness to take prescription
- Requested medication not currently available

CRITICAL ELEMENTS FOR EVALUATION OF COMPETENCE

- Describe the important elements of patient counseling for each medication

TASTE EXERCISE

Taste the following medication. Comment on flavor, texture, after-taste, and smell. If you are allergic to any medication, please do not try it.

	Flavor, texture, after-taste, smell
Amoxicillin	
Ampicillin	
Cotrimoxazole	
Cough medications	
Albuterol	

**INTERACTIVE PATIENT COUNSELING TECHNIQUE EVALUATION
FORM**

A. Setting the Stage

- | | | | |
|---|-----|----|-----|
| 1. Did the pharmacist/provider identify the patient? | YES | NO | N/A |
| 2. Did the pharmacist/provider identify him/herself? | YES | NO | N/A |
| 3. Were the physical/patient barriers identified/managed? | YES | NO | N/A |

B. Consultation Process

- | | | | |
|---|-----|----|-----|
| 1. Were open-ended questions used appropriately? | YES | NO | N/A |
| a. What did the doctor tell you the medication was for? | YES | NO | N/A |
| b. How did the doctor tell you to take this medication? | YES | NO | N/A |
| c. What did the doctor tell you to expect? | YES | NO | N/A |
| d. Were other open-ended questions used? | YES | NO | N/A |
| 2. Was dialogue for each question complete? | YES | NO | N/A |
| 3. Did the pharmacist talk continuously for > 60 seconds? | YES | NO | N/A |
| 4. Was the patient asked to demonstrate when possible? | YES | NO | N/A |

C. Closure

- | | | | |
|---|-----|----|-----|
| 1. Was the patient asked to verify overall understanding? | YES | NO | N/A |
| 2. Was an appropriate closure used? | YES | NO | N/A |