

Medication Basics for Patient Advocates

The Patient Advocate's Role

Stacie Lampkin, PharmD, BCPPS, BCPA, CA



Course Objectives

- Define the role of a patient advocate when working with patients who are taking medications.
- Describe basic terminology, fundamental information, and use considerations related to medications.
- Identify pediatric specific medication use considerations.
- Establish ways to advocate for patients who have cost barriers related to medications.

Objective

- Define the role of a patient advocate when working with patients (clients) who are taking medications.

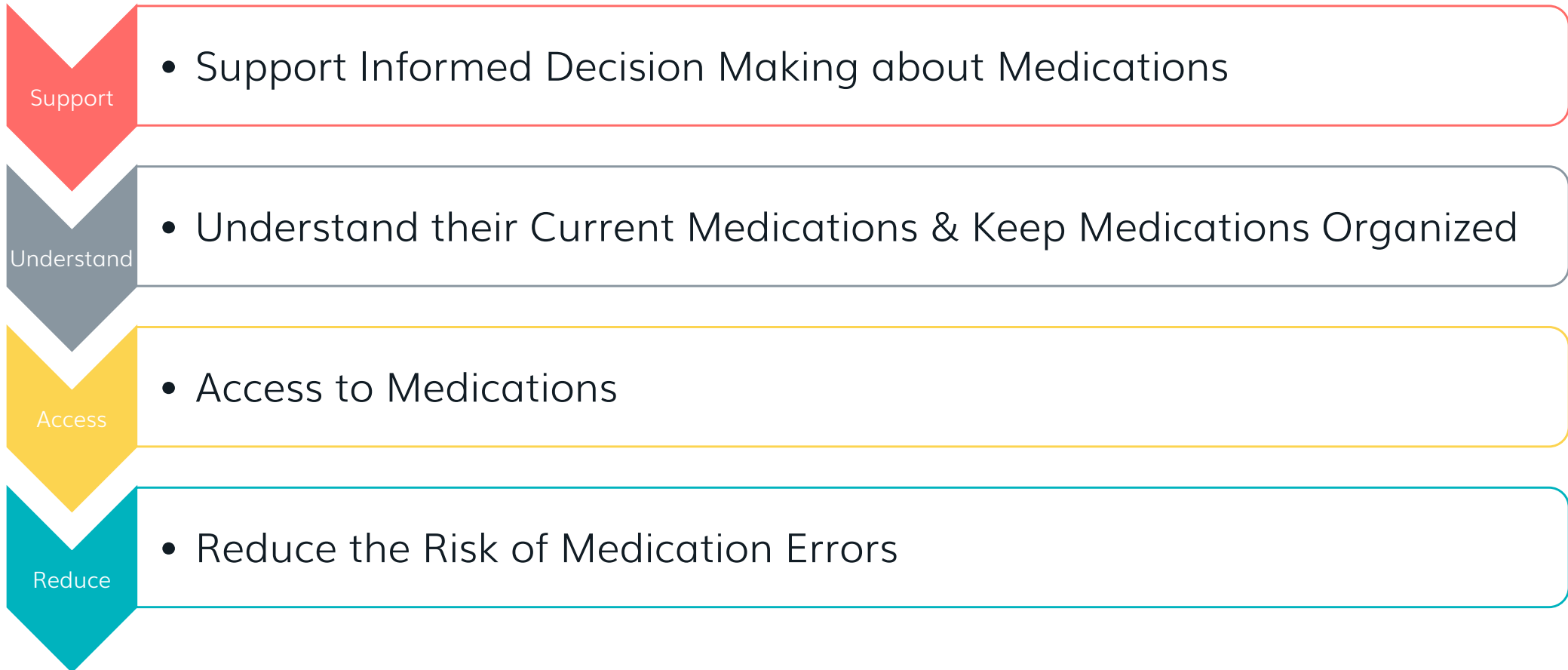
BCPA Ethical Standards

- Advocates:
 - Help clients and client communities make informed choices and access resources
 - Ensure their clients are aware of and understand treatment options:
 - Potential risks
 - Benefits
 - Available alternatives (Western, traditional, alternative, complementary, integrative or others)
 - Attempt to provide clients with complete information to facilitate informed decision making

BCPA Ethical Standards

- Advocates:
 - Have a responsibility to inform clients of their specific areas of proficiency
 - Only to assist clients within those areas in which they have demonstrated expertise
 - Refer the client to the appropriate system or resource for assistance if an advocate does not have sufficient knowledge or training in an area

What is the advocates role when clients are taking medications?



Advocate's Role



Support Informed Decision Making about Medications

Advocate's Role: Do's and Don'ts

Advocates do NOT

- have to provide medication education
- have to interpret information about medications

Advocates do

ts

- have to help clients learn about medications and treatment options
- have to help clients get medication information
- have to know their boundaries

Assess:

What does a client already know?

- Do you know...
 - What options you have?
 - What medications are being recommended?
 - What the risks and benefits of the medication are?
 - How long you will need to take the medication?
 - How to monitor efficacy and safety?

Assess: What information does the client still need or want?



Assess: What information does the client still need or want?

- Information overwhelm
 - At what point does information prevent a decision from being made?
- Monitor biases
 - Information should be neutral and not instill confirmation bias
 - People have varying attitudes and beliefs about medications
 - Do not to create fear around medication use
 - Do not pill shame

Where to get information about medications?

Work with the client's healthcare team...

- Providers at the office
- Community Pharmacists

Medication Resources/Databases

- Lexicomp, Micromedex, Clinical Pharmacology
- Package Inserts

"The Internet"

- Medline, drugs.com
- Organizations, Non-profits, Healthcare Institutions

Guidelines and Literature Searches

Pitfalls of Generalized Medication Information

- Off-label medication use
- Information not tailored to patient specific factors
- Lists of information
 - Side effects without knowing how to monitor
 - Drug interactions without clinical interpretation

Advocate's Role

Understand their Current Medications
& Keep Medications Organized



Understand Current Medications

- Assess don't assume!
 - What is each medication for?
 - Who is the prescriber managing a medication?
 - When should the medication be taken?
 - How should the medication be taken?
 - How are efficacy and side effects being monitored?

Keep Organized: Medication Lists

- Information about medications
 - Date started
 - Prescribing provider
 - Medication name
 - Strength
 - Instructions for use
 - Duration of therapy
- Why a medication is discontinued
 - Include if there is an alternative medication its place
- Vitamins, minerals, herbal supplements, etc.



Keep Organized: Tracking Systems

Keeping Track of Medications

Calendars

Pill cases

Tooktake labels

Remembering to Take Medications

Phone alarms

Reminder apps

Medication Administration Calendars

Medication Name

1/1	8 AM	8 PM
1/2	8 AM	8 PM
1/3	8 AM	8 PM
1/4	8 AM	8 PM
1/5	8 AM	8 PM
1/6	8 AM	8 PM
1/7	8 AM	8 PM
1/8	8 AM	8 PM
1/9	8 AM	8 PM
1/10	8 AM	8 PM

Medication Name			
8 AM ¹ 8 PM	8 AM ² 8 PM	8 AM ³ 8 PM	8 AM ⁴ 8 PM
8 AM ⁵ 8 PM	8 AM ⁶ 8 PM	8 AM ⁷ 8 PM	8 AM ⁸ 8 PM
8 AM ⁹ 8 PM	8 AM ¹⁰ 8 PM	11	12

		1/1	1/2	1/3
Medication Name	8AM	X	X	
	8PM	X		

Keeping Track of Medication Administration

tooktake



<https://tooktake.com/>

Advocate's Role

Access to Medications



Advocate Role: Access to Medications

Figure 2. Common Barriers Across the Conceptual Framework*



*Includes only common barriers as determined by the Roundtable

Used with permission: PQA. "Access to Care: Development of a Medication Access Conceptual Framework." March 2019. <https://www.pqaalliance.org/assets/Research/PQA-Access-to-Care-Report.pdf>

Advocate's Role: Obtaining Medications from the Pharmacy

- Access to a Pharmacy
 - Mail order/delivery from pharmacy
 - Restricted medications - Specialty pharmacy only medications
 - Compounded medications
- Refill Requests
 - Automatic refills
- Drug shortages
 - [Drug Shortages | FDA](#)

Advocate's Role

Reduce the Risk of Medication errors



Medication Errors

Ordering/prescribing

- Wrong product chosen
- Missing warnings, interactions, dose adjustments, allergies

Documenting

- Medication history

Transcribing/Dispensing

- Wrong product chosen

Administering

Monitoring

Medication Errors



Miscommunication



Incomplete
Information



Transitions of Care



Medication
Education

Summary Patient Advocate's Role

- Support Informed Decision Making about Medications
 - You are not responsible for medication education.
- Understand their Current Medications and Keep Medications Organized
 - Assess don't assume.
 - Provide strategies to keep track of medications.
- Access Medications
 - Numerous barriers at different points in care where medications would be discussed or acquired.
- Reduce the Risk of Medication Errors
 - Always double check!

Medication Basics for Patient Advocates

Medication Basics and Terminology

Stacie Lampkin, PharmD, BCPPS, BCPA, CA



Objective

- Describe basic terminology, fundamental information, and use considerations related to medications.
- Specifically focusing on over-the-counter (OTC) and prescription drugs.
 - The Food and Drug Administration (FDA) defines a drug as a substance intended for use in the diagnosis, cure, mitigation, treatment, or prevention of disease.

Brand vs Generic

Brand

- A drug marketed under a proprietary, trademark-protected name.

Generic

- Drug that has therapeutic equivalence to a brand name drug.

Branded-Generic

- Generic drugs that have a brand name.

Therapeutic Equivalence

- Drug products are therapeutically equivalent if they:
 1. Meet scientific standards
 2. Are pharmaceutically equivalent
 - Contain the same active ingredient(s)
 - Have the same dosage form and route of administration
 - Are identical in strength or concentration
 3. Fulfill additional FDA legislative criteria

Pharmaceutical Equivalents: Differences

- Equivalent drug products may differ in:
 - Shape
 - Release mechanism
 - Labeling (to some extent)
 - Scoring
 - Excipients (including colors, flavors, preservatives)

Generic Substitution

- Drug products evaluated as “therapeutic equivalents” can be expected to have the same clinical effect and safety profile as the brand name product.
- Drug products classified as therapeutically equivalent can be substituted.
 - State pharmacy laws dictate regulations for generic substitution at a pharmacy.

Drug Names

- Brand vs generic drug names
- Pay attention to the entire name
 - XR, ER and other letters after a name
 - Example: Mixed amphetamine salts vs Mixed amphetamine salts XR
 - Salt forms of drugs
 - Example: metoprolol succinate vs metoprolol tartrate
- Medications with the same drug name can have differences in appearance

Dosing Considerations

Starting doses vs
maintenance doses

Prescription vs OTC

Dose adjustments

- Renal, liver,
pharmacogenomics

Daily vs as needed

Switching
medications

- Medication strengths are
not the same even in
medications that are
similar or in the same

Discontinuing
medications

Medication Administration

- Route of administration
 - Intravenous
 - Intramuscular
 - Oral
 - Gastrostomy Tube
 - Sublingual
 - Rectal
 - Inhaled
 - Intranasal
 - Eye and Ear drops
- Dosage forms
 - Pills, capsules, liquids, gummies, etc.
 - Patches
 - Inhalers
 - Nasal Sprays
 - Drops
 - Suppositories
 - Compounded medications

Side Effects



- OTCs can have side effects too
- Monitoring
- Determining association of medication to side effect
 - Medicine or medical condition
 - Onset of side effect
 - Literature to support side effect
- Risks of side effect vs benefit of medication
- Using medications for a common side effect

Interactions

- OTCs have interactions too
- Some medications can be taken together even with interactions
- Medications can interact with
 - Food, herbal products, vitamins, minerals, etc.





Drug Disposal

- Needles and syringes need to be disposed of in a sharps disposal container
- The best way to dispose of medications is by taking them to a drug take back site, location, or program



Drug Disposal at Home

- Some medications should be flushed if they have high risk of misuse and/or abuse potential and can result in death from one dose if inappropriately taken.
 - [Drug Disposal: FDA's Flush List for Certain Medicines | FDA](#)
- All others
 - Mix medicines with an unappealing substance such as dirt, cat litter, or used coffee grounds
 - Place the mixture in a sealed bag or container
 - Throw away the container in your trash at home
 - Delete all personal information from empty medicine containers and recycle or throw out

**Summary:
There will
always be
caveats and
exceptions.**



Medication Basics for Patient Advocates

Pediatric Specific Medication Considerations

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Objective

- Identify pediatric specific medication use considerations.

Medication Use Considerations

- Defining pediatric patients
 - Neonates, infant, toddler, child, adolescent
- Off-label or unlicensed medication use
- Medication dosing, side effects, and other drug properties can be different when used in kids compared to adults
 - Pharmacokinetic differences
- Lack of data and research
- Limited guidelines or protocols

Medication Use Considerations

Off-label drug use is when a drug is used for an unapproved reason:

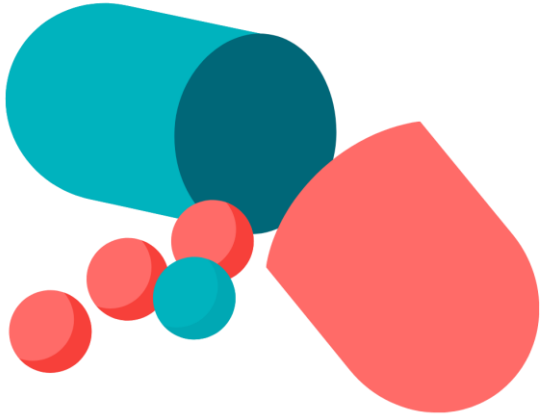
- Dose
- Age
- Indication
- Route of administration
- Contraindications

Unlicensed medicines are used when there is no commercially available formulation:

- Extemporaneous compounding
- Importation
- Use of chemicals

Dosing and Frequency of Administration

- Dosing is usually based on age and weight
 - Important to know exact weight
 - Pharmacies often don't know a child's weight
 - Calculation errors common
- Follow the directions on OTC labels, unless a provider tells the client otherwise
- Dosing and frequency can vary based on what adults are typically prescribed



Medication Administration

- Pediatric friendly dosage forms may not be available
 - Compounding
 - Finding alternative
 - Liquid
 - Tablets that can be crushed
 - Capsules that can be opened



Medication Administration

- Flavoring Medications
 - Request the pharmacy to flavor
 - Add sweeteners such as chocolate syrup, strawberry syrup, maple syrup, or sweetened soft-drink mix when giving each dose
 - Bitter mask with chocolate flavors
 - Sour mask with citrus
 - Salty mask with peanut butter, cinnamon, or butterscotch

Tips for Administering Liquids

Squirt medication to side of mouth away from tongue

Numb taste buds before and after medication with a cold treat

Considerations

- When mix with food or flavor make sure to administer to child immediately
- Caution when mixing with food for regular diet as may lead to food aversion
- Not recommended to mix with large volumes as child may not get entire dose
- Use small volume and put in nipple of bottle for infants

Safety

- Side Effects
 - Kids are at higher risk for certain side effect for some medications
- KIDS List
 - Compilation of drugs and excipients that are potentially inappropriate for prescribing in all or in a select subgroup of pediatric patients.
 - The list focused on safety - higher risk of safety concerns in children than in adults when used appropriately.
 - A clinical tool and is not meant to replace clinical judgment or be used in a punitive manner.

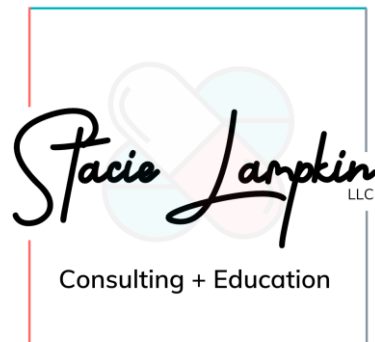


Kids are not small
adults!

Medication Basics for Patient Advocates

Overcoming Medication Cost Barriers

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Objective

- Establish ways to advocate for patients who have cost barriers related to medications.

Medication Costs

Don't blame the doctors or pharmacists

Costs are influenced by

- Drug companies
 - Research and marketing
- Insurance companies
- Legislation

Determining Cost of Medications

- Doctor's offices often do not know the cost of drugs or if a medication is covered by insurance
- Pharmacies
 - Can tell you a cash price without a prescription
 - Can tell you the insurance price WITH a prescription
- Insurance companies
 - Can tell you if a drug is on formulary but not necessarily the price
- Additional Considerations
 - Cash vs Insurance
 - OTC vs Prescription

Overcoming Costs

Prior authorization or letter of medical necessity

- Doctor's office does the prior authorization
- If denied, appeals process is done by the

Samples from a provider

Local foundations

- Check in with social workers or hospital discharge planners

Overcoming Costs

Manufacturer Coupons

Cash pay
("Shopping around")

- Discounts from the pharmacy
 - Coupons
 - Independent Pharmacies
 - Online Pharmacies
- GoodRx



**Patient Advocates play
a huge role in helping
patients access their
medications!**

Medication Basics for Patient Advocates

Thank You !! 😊

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