

Advance Care Pharmacy

Winter , 2018 Newsletter

Maryam Sharafsaleh, Pharm.D.
Angela Forcucci, Pharm.D.

Flu Season

This flu season has been more severe than in years past, resulting in increased physician visits and hospitalizations. Health officials agree the best way to prevent the flu is to get the vaccination. Although October is the best time to receive the shot, it is not too late to get it. The vaccine may be less effective against some strains of the influenza virus (H3N2), but it will help those who receive it from getting sicker and, possibly, reduce the duration of illness. As health care providers, it is important to wash your hands frequently, eat a well-balanced diet, get plenty of sleep, and avoid close contact with people who are coughing or sneezing. Those infected with the flu can usually treat their symptoms with acetaminophen and other over the counter medications, fluids, and rest. The prescription medication, Tamiflu, is only beneficial if started within the first 48 hours of exposure. It will not prevent the flu, but may lessen the severity of symptoms and shorten the course of the flu. Tamiflu is in limited supply, as a result of the increased number of prescriptions for it. Currently, Advance Care Pharmacy has stock of the influenza vaccine and Tamiflu for hospice and long term care patients. **Additionally, we are taking pre-orders now through April, for next year's vaccine, which will secure your supply and guarantee best pricing.**

New Admissions

Admission nurses calling in new patients should be prepared before they call the pharmacy. Often, the pharmacist must wait while the caller gathers patient information. This results in delays for the pharmacist to take other calls and fill orders. Please have the following ready when admitting a new patient:

1. Patient's name
2. Date of birth
3. Diagnosis
4. Allergies
5. Address and phone number
6. ID, SSN, or MRN (SSN needed to bill non-hospice covered medications)
7. Medications, including dose, route, frequency

Cost Saving Tips

Medication costs change frequently due to supply and demand. Advance Care Pharmacy makes every effort to identify price increases and recommend alternatives that provide a cost savings to your organization. Currently, some tips to avoid higher medication costs are to prescribe:

- **Lidocaine OTC 4% patch**, rather than lidocaine Rx 5% patch.
- **Aspercreme w/lidocaine 4% cream OTC**, instead of Voltaren topical gel.
- Avoid **olmesartan** (Benicar) and **olmesartan/HCTZ** (Benicar HCT), all strengths.
- **Valsartan** (Diovan) is now formulary and inexpensive.
- Use **ranitidine** (Zantac), not cimetidine (Tagamet).
- Use **pantoprazole** (Protonix), rather than lansoprazole (Prevacid) or esomeprazole (Nexium).
- For **Augmentin 250mg**, use ½ of 500mg tablet.
- For **Augmentin 875mg liquid dose**, use 11ml of 400mg/5ml strength.
- Instead of using **hyoscyamine** (Levin) drops, dissolve tablet in 0.5ml water and draw up into an oral syringe.
- Use **triamcinolone 1% cream/ointment** and avoid other strengths.
- **Celecoxib** (Celebrex) is now available at a lower price. 100mg #30 costs about \$25, and 200mg #30, about \$29. Recommend a week trial to determine efficacy.
- For severe diaper rash, use **clotrimazole and hydrocortisone** creams together, instead of nystatin.

© Randy Glasbergen
glasbergen.com



"Right now I take a blue pill, a purple pill, an orange pill, a white pill, and a yellow pill. I need you to prescribe a green pill to complete my collection."

CII Non-Emergency Dispensing

For terminally ill patients, the pharmacy can dispense an “emergency supply” of CII medications without a signed, written prescription. Refills of these medications will require a prescriber’s signature prior to dispensing. It is important for the pharmacy to have a non-emergency prescription on file for all CII’s that are anticipated to continue. ACP faxes these prescriptions for prescriber’s signatures and requests them to be returned promptly to the pharmacy. When non-emergency prescriptions are not on file, it results in increased labor by the pharmacy and nursing staff, multiple deliveries, and increased delivery costs. Furthermore, each emergency fill requires a prescriber signature, rather than one signature for a non-emergency prescription authorizing up to a 60 day supply. Each time a prescription is processed (emergency fill) it is reported to CURES, and physician prescribing habits are noted. The DEA guidelines for dispensing narcotics to terminally ill patients advises against repeated emergency fills for medications that will be continued. Patients and caregivers become anxious when the quantity of pain medications is low, resulting in frequent calls to hospice and the pharmacy. Non-emergency prescriptions for CII medications will assure the continuity of care for your patients.

Out for Delivery

Advance Care Pharmacy understands the urgent need and timely delivery of medications for your hospice patients. We want to keep delivery charges at minimum, but recognize that gasoline prices, insurance premiums, and driver’s wages increase the cost to provide this service. Furthermore, it is difficult for us to compete for quality drivers with Amazon and Uber, who can afford to pay larger salaries. In order to keep our delivery fees low, we need the immediate help of hospice staff. The following are ways to help decrease costs:

- Check refills for ALL medications and call them in at the same time. Also, when calling in new orders, order refills, if the patient will need them soon.
- Call in medications for patients that reside at the same facility at one time.
- Order a 30 day supply for routine medications, if appropriate.
- Audit medications for facility patients more often and try to put them on a cycle.
- Order medications in a timely manner and ask for next day delivery. Avoid STAT deliveries.
- Have prescribers sign for non-emergency fills of CII medications. This allows for a larger quantity to be dispensed, rather than an “emergency supply”.

Compounding

Recent changes to compounding regulations by the Board of Pharmacy have restricted what can be compounded by the pharmacy. ACP will no longer offer prochlorperazine (Compazine) 20mg suppositories. Please consider the commercially available prochlorperazine 25mg suppository, or ondansetron (Zofran) 4mg and 8mg suppository, as a substitute. Ondansetron suppositories will be prepared by the pharmacy, following prescriber order. The cost for ondansetron 4mg is \$4 each and 8mg is \$5 each.

ACP will continue to compound the following medications for individual patients when ordered by the prescriber. In order to expedite preparation and delivery, please refer to these common formulas when ordering:

Topical

ABHR 0.5/12.5/0.5/5 (mg/ml) - half strength
ABHR 1/25/1/10 (mg/ml) - full strength
ABH (Ativan/Benadryl/Haldol) 1/25/1 (mg/ml)
lorazepam 1mg/ml
haloperidol 0.5mg/ml and 1mg/ml
prochlorperazine 10mg/ml
ketoprofen 10%
ketoprofen 10%/ketamine 10%

Suppository

ABHR 1/25/1/0
chlorpromazine 25mg
levetiracetam 500mg, 750mg
phenobarbital 30mg, 60mg
phenytoin 100mg, 200mg
diazepam 5mg, 10mg

Please be advised that **COMPOUNDS CANNOT BE REQUESTED STAT OR AFTER HOURS**. Compounds are prepared for individual patients upon receipt of a valid order/prescription. Since compounds are not stocked, they require time to formulate.

Atropine 1% Sublingual Drops Compound is Back!

ACP will resume the availability of atropine 1% compounded solution for *sublingual* use. Atropine 1% drops will only be prepared by the pharmacy for individual patients, following receipt of a prescription. They will not be included in any hospice comfort kits. Volumes of 5ml will be dispensed and will cost \$25. This is less than half the cost of the commercially available ophthalmic product that is currently used, orally, for excessive salivation/secretions. Additionally, by compounding the solution, following an approved formula, we can flavor the drops to make them more palatable for patients.

Drug Shortages

Many of you may be aware of the nationwide shortage of **IV saline products**. The devastating damage caused by Hurricane Maria, in Puerto Rico, completely destroyed some of the major manufacturing sites for IV saline. This, coupled with the severity of the flu season, has decreased the saline supply. The lack of availability has impacted orders for hydration, as well as small volume parenterals (i.e., PCAs, IV antibiotics). We currently have a limited supply of 0.9% sodium chloride (NS), but anticipate recovery of stock in the near future.

Additionally, the following drugs are not available at this time:

- **Fentanyl injection** for PCA. Consider morphine or hydromorphone in equianalgesic dose, if appropriate.
- **Procalamine and some parenteral nutrition formulas (TPN)**. Please call the pharmacy to find out what is available, if needed.

Employee Prescriptions

Just a reminder that ACP **CAN NO LONGER** fill hospice employee prescriptions and bill to third party insurance. This is due to the special contract pricing that we get from our drug wholesaler, which limits our dispensing and insurance billing to hospice and long term care (LTC) patients only. As a closed door pharmacy, we are prohibited from selling medications to patients that are not hospice or LTC. This also affects patients that are discharged from hospice. Please refer these patients to a local retail pharmacy for the furnishing of their medications.



New Formulary books will be released in 2019 with updated drug information!

After Hours Calls

Advance Care Pharmacy uses an after hour call service that will take messages and contact the pharmacist, if necessary. Not all calls, after hours, require the assistance of a pharmacist. For example, delivery related questions can be handled by technical staff. Please be patient when calling and only call back if no one has returned your phone call within 15 minutes. Repeated phone calls only delay the response time because the service must continue to handle these duplicate calls. If your call is **NOT URGENT**, use option 1 to leave a message. If option 2 is selected, a pharmacist is automatically notified. Option 2 should not be used for refills or to report a patient's death. Please use option 1 for all calls that can be addressed the following day.

When **reporting deaths or discharges after hours**, please notify the pharmacy by leaving a message, using tiger text, or sending an e-mail or fax. The message line is checked promptly **EVERY DAY** at 9am and frequently throughout the day. It is costly to page the pharmacist after hours for non-urgent communication.

Welcome New Hospices

Advance Care Pharmacy provides pharmacy services to over 150 hospice organizations throughout Southern California. We would like to extend a warm welcome to several new hospices that have joined us recently:

Angelino Hospice Care	Oxford Hospice
Athena Hospice	Pacific Point Hospice
Beacon Hospice	Physicians Choice
Brenton Hospice	Prompt Hospice
Bright Sky Hospice	Salus San Diego Hospice
Caring Angels Hospice	San Bernardino Hospice
Embrace Hospice	Serenity Hospice
Fellowship Hospice	Starlight Hospice
GMC Hospice	Supportive Care
Good Heart	Talna Hospice
GSR Hospice	Tranquility Hospice
Hospice Care Coast	We Care Hospice
Love, Trust, Peace	

Advance Care Pharmacy

Specializing in Hospice and Long Term Care

With TWO locations serving all of Southern California:

528 North Broadway
Escondido, CA 92025

(760) 489-7077

FAX : (760) 489-7040

acphospice@advcarerx.com

Hours: 9:00am-1:00am

24 hours on call service

320 Bonnie Circle
Corona, CA 92880

(951) 256-8800

FAX: (951) 284-4594

info@advcarerx.com

Hours: 9:00am-9:00pm

24 hour on call service

Quality Assurance: Lisa Leon (760) 489-7077 x 323

Accounting/Billing: Amy Leichtfuss (760) 489-7077 x 325

NDC Reporting: Jordan Hocsan (760) 489-7077 x 330

CII Fax Questions: Monique (Escondido)

Matthew (Corona)