



PERSONA #1.6

French Fry

Establishing the Pharmacist's Value with Ongoing Medication Management Services



DATE OF BIRTH: January 13, 1979

RACE: White

GENDER: Male

OCCUPATION: College Professor

ADDRESS: 241 Cheeseburger Hwy, Pickle Junction, OH 00000

PROBLEM LIST: Hypertension. Overweight (calculated BMI = 29.2)

HISTORY OF PRESENT ILLNESS

FF was diagnosed approximately one year ago with essential hypertension following complaints of headaches that persisted for several days. **During your follow-up call with FF, he informs you that he is having trouble with increase swelling in his lower legs. The swelling in his ankles and feet make him uncomfortable and he has not been able to walk/exercise in the past couple of weeks. He informs you that the swelling started within a week that he increased his amlodipine from 5 to 10 mg QD.**

PAST MEDICAL HISTORY

Right ankle—torn ligaments—multiple episodes,
Left knee—torn meniscus X 3, hypokalemic

ACTIVE MEDICATIONS

Amlodipine 10 mg every morning, Lisinopril/HCTZ 20/12.5—2 tablets every morning, Potassium Chloride 20 mEq—2 tablets every morning, Calcium 500 mg/Magnesium 500 mg/Potassium 99 mg Combined Supplement—1 tablet every morning

Prescriber: Coach Wellness, MD

FILL HISTORY

All medications were synchronized and filled on the same day for a 30 day supply with a start day of 10/15/19. Even though previously nonadherent, FF continues to be adherent. **Amlopidine 5 mg changed to amlodipine 10 mg on 2/10/20.**

ALLERGIES

- Penicillin

SOCIAL HISTORY

FF works as a college professor. He has never smoked and, on average, has 2 alcoholic drinks/week. FF has continued to eat healthier. **He has not been walking due to swelling in ankles and feet. Weight remains at 192 lbs as of 3/6/20.**

VITAL SIGNS AND LABS

■ Vital signs:

Patient Reported BP (3/1/20): 134/80 mmHg; (3/2/20): 134/82 mmHg; (3/3/20): 132/78 mmHg
Pharmacy-Reported BP (2/6/20): 158/88 mmHg
Patient-Reported BP (2/6/20): 162/92 mmHg
(average reading for a week)
Provider-Reported BP (1/10/20): 144/90 mmHg
Pharmacy-Reported BP (12/16/19): 128/84 mmHg

- **Renal:** Blood work was completed, but not requested so unaware of lab results

- **Basic metabolic panel:** Completed (pharmacist unaware of results)

MEDICATION RELATED PROBLEM(S)

Based on FF's HPI, does FF have a medication-related problem? If so, what is it?

INTERVENTION(S) AND EDUCATION (RECOMMENDATIONS)

If FF does have a medication-related problem, document your clinical recommendation(s)/education to help FF optimize his medications.

CARE COORDINATION NOTES

Document any care coordination notes that you communicated with Dr. Wellness's office.

GOALS

Has FF's goals for his therapy changed? If so, what are his goals now?

MONITORING PLAN AND FOLLOW-UP

What is your follow-up and ongoing monitoring plan for FF?

Sample Care Plan Case

Encounter Reason (mm/dd/yyyy): _____

Encounter Reason (2/6/20): Hypertension medication review (SNOMED CT: 473225006)

Encounter Reason (1/10/20): Medication monitoring

Encounter Reason (12/16/19): Taking patient vital signs

Patient Demographics:

Patient First Name: French

Patient Last Name: Fry

Patient DOB: 1/13/79

Address: 241 Cheeseburger Hwy

City: Pickle Junction

State: OH

Zip: 00000

Phone: 919-555-5555

Allergies: Penicillin

Prescriber Information:

Name: Coach Wellness, MD

Address: 222 Healthy Shores Ln, Pickle Junction, OH 00000

Phone: 999-999-9999

NPI Number: 1234567890

Active Medication List:

Medication Name	Directions	Prescriber
Lisinopril/HCTZ 20/12.5 mg	2 tablets every morning	Coach Wellness, MD
Amlodipine 10 mg	1 tablet every morning	Coach Wellness, MD
Potassium Chloride 20 mEq	2 tablets every morning	Coach Wellness, MD
Calcium 500 mg/Magnesium 500 mg/ Potassium 99 mg Combined Supplement	1 tablet every morning	Self

Medication Related Problems (MRPs) and Interventions:

- **MRP (10/15/19):** Noncompliance with medication regimen (SNOMED CT: 129834002) - (Status: COMPLETE)
 - **MRP Note:** Patient is about 15 days late filling lisinopril/hctz 20/12.5 mg. Amlodipine and potassium are filled on different days. FF doesn't seem to be consistent with timing and frequency of refills.
- **Intervention (10/15/19):** Medication synchronization/synchronization of repeat medication (SNOMED CT: 415693003) - (Status: COMPLETE)
 - **Intervention Note:** FF is being enrolled into our sync program and we will be aligning his medication fills on the same day each month with follow-up calls at least 5 days prior to next refills.
- **MRP (11/11/19):** Deficient knowledge of disease process (SNOMED CT: 129864005) - (Status: COMPLETE)
 - **MRP Note:** FF states that he does not know what his blood pressure (BP) goal is, and FF has not been monitoring his BP at home because he does not have a device.
- **Intervention (11/11/19):** Recommendation to monitor physiologic parameters (SNOMED CT: 432371000124100) (Status: COMPLETE)
 - **Intervention Note:** FF likes the idea of self-monitoring his blood pressure at home after further discussion and education. FF states he wants to purchase a blood pressure monitoring device and wants it delivered with his medications. The pharmacist asked if he would be willing to come into the pharmacy to get his blood pressure checked, but he says he doesn't have time this month. FF states that he will come into the pharmacy next month to get his blood pressure measured when he picks up his December medication fills and bring in his blood pressure log from November.

- **Intervention (12/16/19):** Blood Pressure Taking (SNOMED CT: 46973005) - (Status: COMPLETE)
- **MRP (1/10/20):** On examination - blood pressure reading raised (SNOMED CT: 163027005) - (Status: COMPLETE)
- **MRP (2/6/20):** Medication not effective (SNOMED CT: 435501000124106) - (Status: COMPLETE)
 - **MRP Note:** Amlodipine 5 mg one time daily is not effective dose for FF
- **Interventions (2/6/20):** Medication dose increased (SNOMED CT: 432761000124108) - (Status: COMPLETE)
 - **Intervention Note:** Based upon FF's current medication therapy regimen and guidelines, recommendation is increase Amlodipine 5 mg one time daily to Amlodipine 10 mg one time daily
- **MRP (mm/dd/yyyy):** _____
- **Interventions (mm/dd/yyyy):** _____

Vital Sign(s):

- **Blood Pressure (3/3/20; patient-reported):** 132/78 mmHg
- **Blood Pressure (2/6/20; pharmacy-reported):** 158/88 mmHg
- **Blood Pressure (2/6/20; patient-reported average):** 162/92 mmHg
- **Blood Pressure (1/10/20):** 144/90 mmHg
- **Blood Pressure (12/16/19):** 128/84 mmHg

Care Coordination Notes:

- **(mm/dd/yyyy):** _____

- **2/6/20:** Sent the recommendation to Dr. Wellness on 2/6/20 to increase amlodipine 5 mg to amlodipine 10 mg. New prescription received and filled on 2/10/20.

Goals (Free-Text):

1. **Goal Note (10/16/19):** Set a reminder alarm on cell phone to take medications every day - (Status: COMPLETE)
2. **Goal Note (11/11/19):** Monitor BP at least 3 different times/week and record on provided paper. Overall goal is for readings to be <130/<90 mmHg - (Status: COMPLETE)
3. **Goal Note (1/10/20):** Over the next week, check blood pressure one time in the morning and one time in the evening. Document blood pressure and provide the updates to the pharmacy - (Status: COMPLETE)
4. **Goal Note (2/6/20):** Continue to monitor BP upon dose change. Document BP readings within BP Log. Maintain dietary changes and morning walks - (Status: COMPLETE)
5. **Goal Note (mm/dd/yyyy):** _____

