**High Risk Patient Pathway: Interim Pharmacy Referral Process**

Process for referring patients for a Pharmacy review is outlined below.

**Identify patient at risk if medicines related harm or readmission**

Consider the following and use clinical judgement:

**Medication**

7 or more regular medicines

Recent change to medicine

i.e. started, stopped, dose change

New high risk medicine

e.g. Insulin, anticoagulant, lithium, DMARD, digoxin, opioids

**Support/Adherence**

Self-medicates (no support with taking medicines)

On monitored dosage system

Any other concerns about taking medicines

**Falls assessment**

At risk of falls

**End of Life/ Advanced Care Plan medication review needed**

Is patient taking inappropriate/unnecessary medicines?

**Options**

1. Contact pharmacist for advice (email or telephone)
2. Pharmacy referral for review (see referral form overleaf)

Pharmacist will make contact with patient within 72 hours. Pharmacist may contact practice for further information prior to contacting patient.

Following the medication review, pharmacist will send (letter or email) a summary of the review with a list of recommendations/ actions.

**Contact Details**

Telephone: 07770967983

Secure NHS Email: [nhc-tr.FEPPharmacy@nhs.net](mailto:nhc-tr.FEPPharmacy@nhs.net)

|  |  |
| --- | --- |
| **Patient Details**  (including phone number)  LEAVE BLANK IF ALREADY PROVIDED ON SUMMARY PRINT OUT | **Referral from**  Name:  Role:  Address:  GP (if different):  Telephone: |

Reason for referral/ useful information

Along with this referral, please send a patient summary report. Patient summary should include:

* Medicines (current and past)
* Allergies
* Problems (current and past)
* Recent values (e.g. bloods, BPs, weight, etc.)

Contact Details of staff member who can supply additional information (e.g. receptionist or prescription team).

**Pharmacy Use Only**

Form received date:

Contacted: practice/referrer ⬜ patient/family ⬜

Appt date: