

**Clinical Prescribing Teaching
2011 – 2012**

Students Pack

Teaching Plan: Session 2

Learning objectives

By the end of this session, participants should be able to:

1. Prescribe controlled drugs legally
2. Undertake a full medication history
3. Know the importance of medicines reconciliation
4. Identify common causes of prescribing errors
5. Understand the importance of medication adherence

The Pharmacist leading the session will give you each a Drug Chart from this hospital, and discuss the issues above. This pack contains other resources you will need for the session. Printouts will be given as required at the session.

PLEASE BRING THE CHECK AND CORRECT FORMS WITH YOU THAT YOU HAVE USED WHEN CLERKING PATIENTS, having thought about the errors you have found.

Safe Prescribing Standards–Check and Correct–Report all deficiencies and ensure chart is up to standard

Date/...../.....	Person completing form	Ward or Unit														
	Number	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	
	Initials																
Safe Prescribing Standard																	
Patient name, DOB, hospital number, consultant, ward, and on front page	√ Yes X Not all																
Weight added	√ Yes X No																
All items are readily legible in black, clear and unambiguous – could the patient easily read and check the drug names?	√ Yes X Not all																
Drug allergy box completed?	√ Yes X No																
If any drugs prescribed in units other than “mg” is the unit written in longhand e.g. micrograms, not mcg, units not “U” for INSULIN and DALTEPARIN? (g is allowed)	√ Yes X Not all ---n/a																
For all ANTI-INFECTIVE AGENTS both a duration and indication are written?	√ Yes X Not all ---n/a																
All prescribed drug doses administered? (If not, why not? Was doctor informed? Should drug be stopped?)	√ Yes X No																
Use of approved generic names * e.g. dalteparin not Fragmin simvastatin not Zocor co-amoxiclav not Augmentin	√ Yes X No																
PRN drugs all have dose and where appropriate a maximum frequency e.g. morphine, paracetamol?	√ Yes X Not all -- n/a																
Has the doctor signed and dated each prescription	√ Yes X No																
Venous thromboprophylaxis data fully completed and most appropriate drug prescribed?	√ Yes X No																
Perfection?	√ Yes X No																
Count N° of Boxes with an “X”																	

Comments

* You may need help from a Pharmacist on generic names
Shaded boxes not relevant where there is electronic prescribing

Clinical Prescribing Teaching

Compulsory Attendance and Feedback Form Session 2

Name:

Site:

Number of students in Group:

Please complete this form at the end of the session and hand it to the Pharmacist before you leave. They will give it to the teaching co-ordinators.

Session Objectives:

1. Understanding how to prescribe controlled drugs legally
2. Undertaking a full medication history
3. To know the importance of medicines reconciliation
4. To identify common causes of prescribing errors
5. Understanding the importance of medication adherence

Did the session achieve the stated learning outcomes? Yes / No

Was there enough opportunity for questions? Yes / No

Was the length of training session Too long / too short / just right?

What is your evaluation of the session in relation to:

Clearly audible	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Mumbled
Explanations clear & understandable	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Incomprehensible
Lively/interesting presentations	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Monotonous
Stressed important material	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	All material seemed the same
I have learned a lot	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	I have learned nothing
Teaching methods appropriate	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Teaching methods not appropriate
The material will improve my practice	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	My practice will not improve

How would you rate the overall quality (including organisation) of the session out of 10: _____

How do you feel this session could be improved?

What else could be included in the session that you feel would be relevant?

Is there anything you would like to add?

All feedback is valuable, thank you very much.