

# PEBC PHARMACY TECHNICIAN QUALIFYING EXAMINATION – PART II (OSPE)

## SAMPLE STATION #8

Interactive Station (with a Standardized Patient)

**TITLE: Medication Reconciliation**

### OBJECTIVES

- To obtain and document a complete current medication history from a patient.
- To identify any discrepancies and the reason(s) for it / them.

### COMPETENCIES TESTED

#### Competency 2 Patient Care

**Unit 2.1 Develop a professional relationship with the patient.**

**2.2 Obtain information for the pharmacist to review.**

**2.3 Collaborate with the pharmacist to support care plan activities.**

#### Competency 3 Product Distribution

**Unit 3.1 Receive, interpret and process a prescription.**

#### Competency 7 Communication and Education

**Unit 7.1 Establish and maintain effective communication skills.**

**Unit 7.2 Use safe, effective and consistent communication systems.**

### CANDIDATE'S INSTRUCTIONS

You are a pharmacy technician working in a hospital pharmacy. A patient is waiting for you in the Emergency Department (station).

#### Your tasks are to:

1. Attach one barcode label to the Patient Medication Form provided on the desk / table.
2. Interview the patient to take a complete medication history.
3. Document your findings, including any discrepancies or issues that require follow-up, on the form provided.

When you are finished (or when the final buzzer / signal sounds), give the form to the assessor.

**Time Frame:** You have 6 minutes to complete this station.

## SCENARIO DESCRIPTION

A patient with COPD is in the Emergency Department with shortness of breath. The patient has been told that a pharmacy technician is going to ask him about his medications.

**Client:** Standardized Patient - Sydney Walsh, male, 60 years old

### **Patient Record Information (no patient record – patient gives this information on request):**

Name: Sydney Walsh  
Age: 60 years old  
Allergies: None

Relevant Medical History: COPD (diagnosed 5 years ago)  
Doctor's Name: Dr. Dunn (family doctor)  
Doctor's Address: 355 East 15<sup>th</sup> Street, City, Province  
Current Medications: Spiriva  
Ventolin  
Advair  
Vitamin C

### **Other information (to be given on request):**

History:

#### 5 years ago:

- You were diagnosed (by Dr. Dunn, your family doctor) with a lung disease called “C-O-P-D”.
- You started using Spiriva. (You inhaled one capsule daily, as prescribed.)
- Spiriva helped your breathing.
- You were shown how to use the inhaler at that time.
- You were also prescribed Ventolin to use 2 puffs every 4 hours when needed (when you got short of breath), but you rarely needed it.
- You finally quit smoking (smoked a pack a day for 40 years).

#### 2 months ago:

- You noticed you were short of breath more often (it happened gradually), and it did not always get better when you rested.
- You also noticed you had to use your Ventolin more frequently (once or twice per day).
- You went to Dr. Dunn, who prescribed Advair.
- You used the Advair (one puff, twice daily as prescribed).
- You started to feel better (less shortness of breath).
- Dr. Dunn told you to use the medications as prescribed.

#### Over the last month:

- The Advair still seemed to be working (you were not as short of breath), so you thought it would be okay to cut back on the Spiriva. (You did not discuss this with your doctor.)
- You started using the Spiriva once every other day.
- You were still using your Ventolin once or twice a day (2 puffs each time you used it).

#### Today:

- Earlier this morning, you used your Advair and took vitamin C, but did not use your Spiriva.
- Then you went for a walk and started to get very short of breath, so you used your Ventolin (2 puffs).
- You were still short of breath, so you went home and called a taxi to go to the Emergency Department.
- The doctor there gave you more Ventolin (two puffs) to inhale from a puffer.
- You are now breathing better.
- No one in the hospital has asked you yet about how you are taking your medications.
- You have been told that someone will be coming to ask you about your medications.

Other:

- You started taking vitamin C, 6 months ago, to prevent colds, and you haven't had a cold since. (Your doctor doesn't know you take it.)
- You also had a flu shot last November.
- You know how to use your inhalers.
- Your shortness of breath is sometimes triggered by physical activity (but you are not sure what else triggers it).
- You usually carry your Ventolin with you, but you did not think to take it (or other medications) with you to Emergency.
- Your regular pharmacy is ABC Pharmacy.

## **STANDARDIZED PATIENT (SP) INSTRUCTIONS**

### **Patient's Opening Line:**

*"I was told you would ask me about my medications."*

**By the 4 1/2-minute mark**, if candidate has not asked you about any medications, you must ask:

*"I was told you would ask me about my medications."*

Closing Line: *"Thank you."*

### **DIRECT RESPONSES:**

- 1) If the candidate asks how often the Spiriva inhaler is used, you must say:  
*"I'm supposed to use one (Spiriva) capsule daily. But I just use 1 capsule every other day."*
- 2) If the candidate asks why the Spiriva is not used daily or as prescribed / how Spiriva is used, you must say:  
*"The Advair seemed to be working."*
- 3) If the candidate wants to explore inhaler technique or wants to demonstrate how to use them, you must say:  
*"I know how to use my inhalers."*
- 4) If the candidate expresses concern that there might be a need for immediate medical attention, you must say:  
*"I just saw the doctor and I'm breathing better."*
- 5) If the candidate asks or mentions how much Ventolin is being used, you must say:  
*"Two puffs every 4 hours when needed."*
- 6) If the candidate asks any follow up questions about how much Ventolin is currently being used, you must say:  
*"I'm using it once or twice per day."*
- 7) If the candidate makes an error when confirming the information gathered about individual medications, you must correct them (e.g. if they ask / say that you are taking 100 mcg or one puff of Ventolin, you would say:  
*"No, I take two puffs every four hours when needed.")*

## **STATION MATERIALS**

### **Reference:**

e-CPS excerpts

**CANDIDATE ANSWER SHEET**

Candidate

**STATION #**

ATTACH BAR CODE LABEL HERE

You are a pharmacy technician working in a hospital pharmacy. A patient is waiting for you in the Emergency Department.

**Your tasks are to:**

- 1. Attach one barcode label in the space indicated above.
- 2. Interview the patient to take a complete medication history.
- 3. Document your findings, including any discrepancies or issues that require follow-up, on the form below.

When you are finished (or when the final buzzer / signal sounds), give this form to the assessor.

**PATIENT MEDICATION FORM**

<b>PATIENT:</b> WALSH, Sydney	<b>HOSPITAL ID NUMBER:</b> 984372
<b>ADDRESS:</b> 87 Camden Road, City, Province	<b>AGE:</b> 60 years old
<b>PHONE:</b> 555-8777	<b>GENDER:</b> Male
<b>PHYSICIAN:</b> Dr. L. Dunn	<b>ALLERGIES:</b> None known
<b>ADDRESS:</b> 355 East 15 <sup>th</sup> Street, City, Province	<b>DIAGNOSIS:</b> COPD
<b>PHONE:</b> 988-3378	<b>DRUG PLAN:</b> None

Medications	Directions	Discrepancy(ies) / Issue(s)

## SCORING CANDIDATES' PERFORMANCE

### OUTCOME RATING GUIDELINES:

#### **Problem Solved (full solution) if candidate:**

- ★ Determines all four medications the patient is currently taking, including name, strength (for Advair and Vitamin C), dosage and dosage form (for Ventolin and Advair).
- ★ Documents (above) accurately and completely.
- ★ Identifies Spiriva discrepancy AND the reason for discrepancy (documents or verbalizes).

#### **Solved Marginal if candidate:**

- ★ Determines all four medications the patient is currently taking, including name, strength (for Advair and vitamin C), dosage and dosage form (for Ventolin and Advair).
- ★ Documents (above) accurately and completely.
- ★ Identifies Spiriva discrepancy (documents or verbalizes), BUT does NOT identify reason for discrepancy.

#### **Uncertain if candidate:**

- ★ Determines the three prescription medications (drug names) correctly, BUT misses some detail (e.g. strength, dosage or dosage form).
- ★ Documents (drug names) accurately, BUT misses some detail (e.g. strength, dosage, dosage form).
- ★ Determines use of vitamin C OR identifies Spiriva discrepancy, NOT BOTH.

#### **Unsolved if any of the following apply:**

- ★ Misses any prescription medication (drug name).
- ★ Misses both vitamin C AND Spiriva discrepancy.
- ★ Documents incorrectly any medication, strength, dose or dosage form.
- ★ Does NOT document any information.

# CHECKLIST

## Obtains and documents a complete current medication history:

- 1. Confirms patient information (e.g. first and last name, birthdate / age, address).
- 2. Gathers patient's medical history: (e.g. allergies, medical conditions).
- ★ 3. Determines medications patient is currently taking:
  - tiotropium OR Spiriva:
    - 18 mcg OR one capsule
    - (inhaled) every 2 days
  - salbutamol OR Ventolin:
    - 200 mcg OR 2 puffs every 4 hours when needed (prescribed)
    - currently uses once or twice daily
    - (metered dose) inhaler
  - fluticasone / salmeterol OR Advair:
    - 250 OR 250 / 50 (mcg)
    - diskus
    - one inhalation twice daily
  - vitamin C:
    - 500 mg
    - tablet
    - one tablet daily
- ★ 4. Documents:
  - tiotropium OR Spiriva:
    - 18 mcg or 1 capsule (inhaled) every 2 days
  - salbutamol OR Ventolin:
    - 200 mcg or 2 puffs 1-2 times / day
    - metered dose inhaler
  - fluticasone / salmeterol OR Advair:
    - 250 OR 250 / 50 (mcg)
    - inhaled 2 times / day
    - diskus
  - vitamin C:
    - 500 mg
    - 500 mg or 1 tablet daily
- 5. Documents incorrectly any medication, strength, dose, or dosage form. (**unsolved**)

## Identifies any discrepancies and reason(s) for it:

- ★ 6. Identifies Spiriva discrepancy (documents or verbalizes) is not being taken daily or as prescribed.
- 7. Asks about reason(s) for change in tiotropium / (Spiriva) use.
- 8. Refers to / will provide information to pharmacist / physician for follow-up.

**RATINGS** (to be based on the Assessor Information on page 5 and standard PEBC scoring guidelines as described on the website)

**COMMENT (if rating less than Acceptable/Marginal or Solved/Marginal) : use back of sheet if needed**

**Communications**

- Acceptable
- Acceptable/Marginal
- Unacceptable/Marginal
- Unacceptable

**Outcome**

- Problem Solved
- Solved/Marginal
- Uncertain
- Unsolved

**Performance**

- Acceptable
- Acceptable/Marginal
- Unacceptable/Marginal
- Unacceptable

Misinformation

Risk