

# Pharmacists, data and patient care

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An article in the Dec. 23, 2011 (Vol. 39, No. 2) issue of the New England Journal of Medicine by Dr. Chue-Huei Wu (Oxford University Press) looked at the actions of pharmacists regarding data and drug safety.

It was found that pharmacists often acted differently when accepting personal data as opposed to data regarding personal health. This affected the delivery of medicines to patients and the processing of prescription drug cases.

Wu noted that this issue could take up to four times longer at a pharmacy than other hospitals and clinics. He concluded that pharmacists, having important roles in the health system, needed more training on data and drug safety to serve their patients better.

An interview was conducted by Patrick C. Y. Woo, associate professor, biomedical informatics, Department of Pharmacology and Toxicology, Chinese University of Hong Kong, and Dr. Wan-Hong Wu, Hong Kong based spokesperson, of COTivity Consulting International.

Dr. Chue-Huei Wu said that the issue of data and data safety has actually emerged in the last three or four years in the health care industry in various areas: medicine, clinics, hospitals, sports, personal information, personal ads and payments. Thus, the issues are not limited to pharmacy administration.

The uncertainties in data and the data quality has exposed a number of pharmacist issues. As such, improved documentation for medical records on the electronic pharmacy and the safe handling of personal data are very important. Otherwise, individuals will likely become exposed to risks from various drugs and medical information. Furthermore, not all pharmacist problems will result in drug safety problem.

Q. To what extent can pharmacists follow proper patient acceptance and performance?

A. Currently, the contact with patients are shared at such a level that pharmacist need to be organized if pharmacists will explain with the help of time lapse charts.

However, the hospitals and clinics make the electronic record keeping at the time of patient processing. The handling of the personal data is communicated through the medical record system. Pharmacists can copy the data but they cannot handle the system as it does not take a chance of errors in data.

Q. What is the greatest challenge in making electronic pharmacy well received and acceptable?

A. There are some pharmacists that are indifferent to taking responsibility of data and patient safety management. There is no dedicated master health record system for the pharmacist.

On the other hand, the use of data for the community care and society big societal system is not made together. Pharmacists still need extensive training to handle the data, and they need practical training for data awareness.

Q. What types of uses do you think the e-pharmacy might have?

A. The electronic pharmacy provides not only for storage and communication of data, but also for centralized tracking of data, including patient safety and establishment of data safety. All pharmacies will use the data in clinical care on pharmacists. The pharmacists can intervene in the mistakes of the management of patient data.

Q. Can pharmacists share patient data with labs, radiologists, doctor's office and other specialized personnel?

A. Except for pharmacies which will store the data in their own system, the pharmacist may retrieve the data on stored data.

Q. How likely is it that pharmacies will do the right thing?

A. They have the right knowledge and they usually take responsibility when they see the wrong thing happening.

Q. Are pharmacists committed to personal data safety and data sharing?

A. There are some pharmacists, who carefully review the patient information. The drug data quality, safety as well as information transmission is a record that the pharmacist needs to submit to the regulatory body.



A Brown And White Cat Is Sitting In A Field