2022 OPEN Summit Abstract Submission

Title of presentation: A Virtual Interactive Case System Innovation to Support Pharmacist Prescribing for Minor Ailments

Presenter: Song Min Lee (PharmD, Class of 2T2)

Supervisor: Certina Ho (Faculty)

Advisors: Dr. Gordon Tait, Staff Scientist, Department of Anesthesia, Toronto General Hospital, University Health Network; Dr. Michael Hamilton, Family Physician; Medical Director, Institute for Safe Medication Practices Canada

Research Team Members: Wuqi Lin (PharmD, Class of 2T0); Christy Mak (PharmD, Class of 2T1); Peter Zhang (PharmD, Class of 2T1); Shreeya Thakrar (PharmD, Class of 2T1); Amy Botross (PharmD, Class of 2T1); Nashita Tabassum (PharmD, Class of 2T2); Joo-Young Lee (PharmD, Class of 2T2); Christina Truong (PharmD, Class of 2T2); Fabian Cretu (PharmD, Class of 2T2); Maaria Arif (PharmD, Class of 2T2); Song Min Lee (PharmD, Class of 2T2); Annie Yao (PharmD, Class of 2T3),

Background

Virtual interactive cases (VICs) have been used as an educational resource for differential diagnosis training in medical students, but they have not been explored in pharmacist prescribing for minor ailments (PPMA).

Purpose

We aimed to share our experience in the development of 3 VICs to support PPMA.

Methods

We created PPMA VICs on allergic rhinitis, conjunctivitis, and cold sores. Through iterative case writing, reviewing, and transcribing to the VIC online environment, we recognized the benefits and challenges when attempting to fully utilize the built-in functionalities of the platform.

Results

When developing the patient assessment component of VICs, we embedded 10% relevant or essential questions that a VIC user should ask to rule in or out a differential diagnosis. We included one correct and 6-10 incorrect diagnosis statements to challenge the user on differential diagnosis of the minor ailment. When managing the minor ailment, the user was presented with only 30% appropriate interventions, including pharmacologic and self-care options. A user would be able to solve the case scenario with the correct minor ailment diagnosis if all statements and questions were inspected during patient assessment, but costs and time associated with irrelevant actions taken would be reflected in the VIC final debriefing, informing the user that such clinical encounter was not practically and logistically feasible or affordable.

Conclusion

The VICs are not meant for educating nor training PPMA. VIC is a safe and user-friendly platform to support and challenge pharmacist knowledge and skills in providing minor ailment prescribing service.

Word Count: 248