

Preparing to Provide Hormonal Contraception Management

Practical Tips for Community Pharmacists

Colleen MacInnis BSc.Pharm



Canadian
Pharmacists
Association

Association des
pharmaciens
du Canada

Presenter Disclosure

Presenter Name: **Colleen MacInnis**

- I have no relationships with any commercial interests to disclose
- I have received a speaker's fee from CPhA for this learning activity

Learning Objectives

- Discuss practical operational tools to prepare your practice setting for provision of hormonal contraception management
- Improve confidence in providing this clinical service to your patients
- Examine resources available for this service for both the pharmacist and the patient
- Identify potential patients and discuss hormonal contraception service options available to them

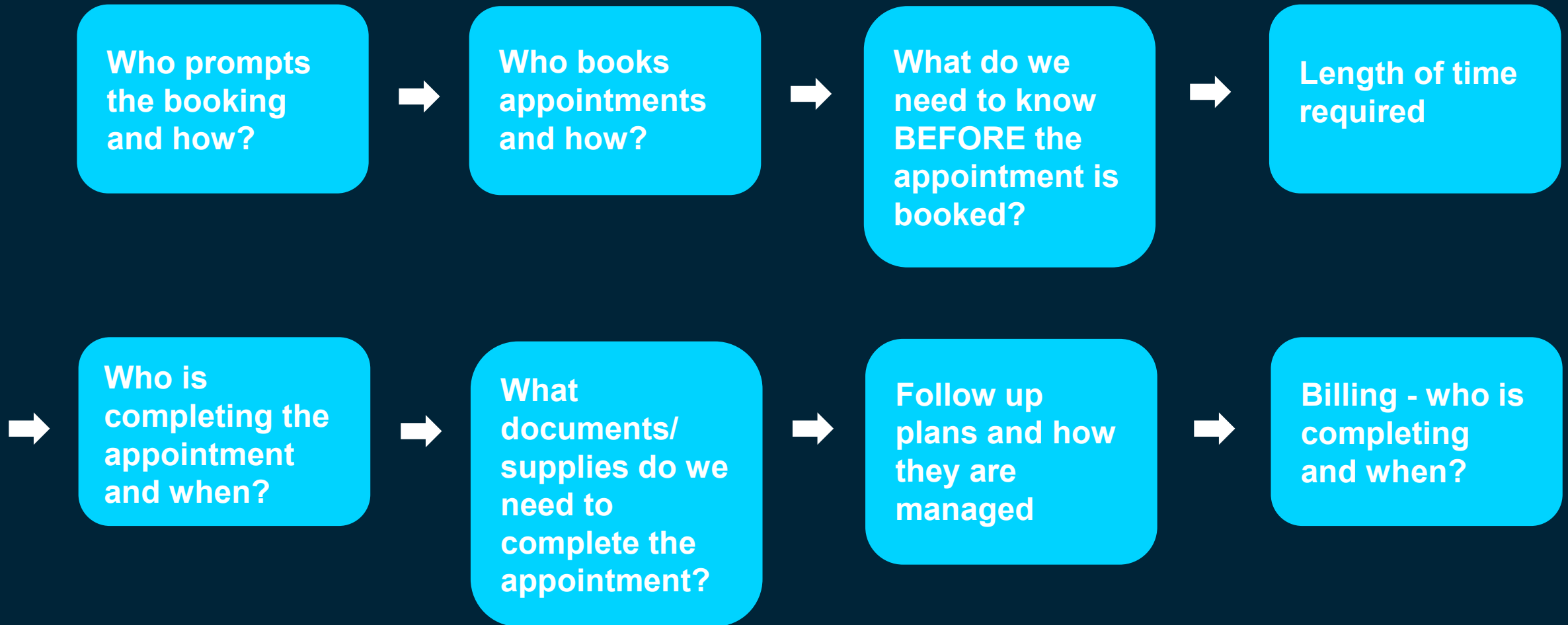
Meet Renee

- Renee is a 24-year-old woman.
- Has been taking TriCira 21's for 5 years without issue.
- Currently has no primary care provider.
- Contacts your pharmacy because she heard pharmacists can now write prescriptions for hormonal contraception and she is out of refills of her current prescription.

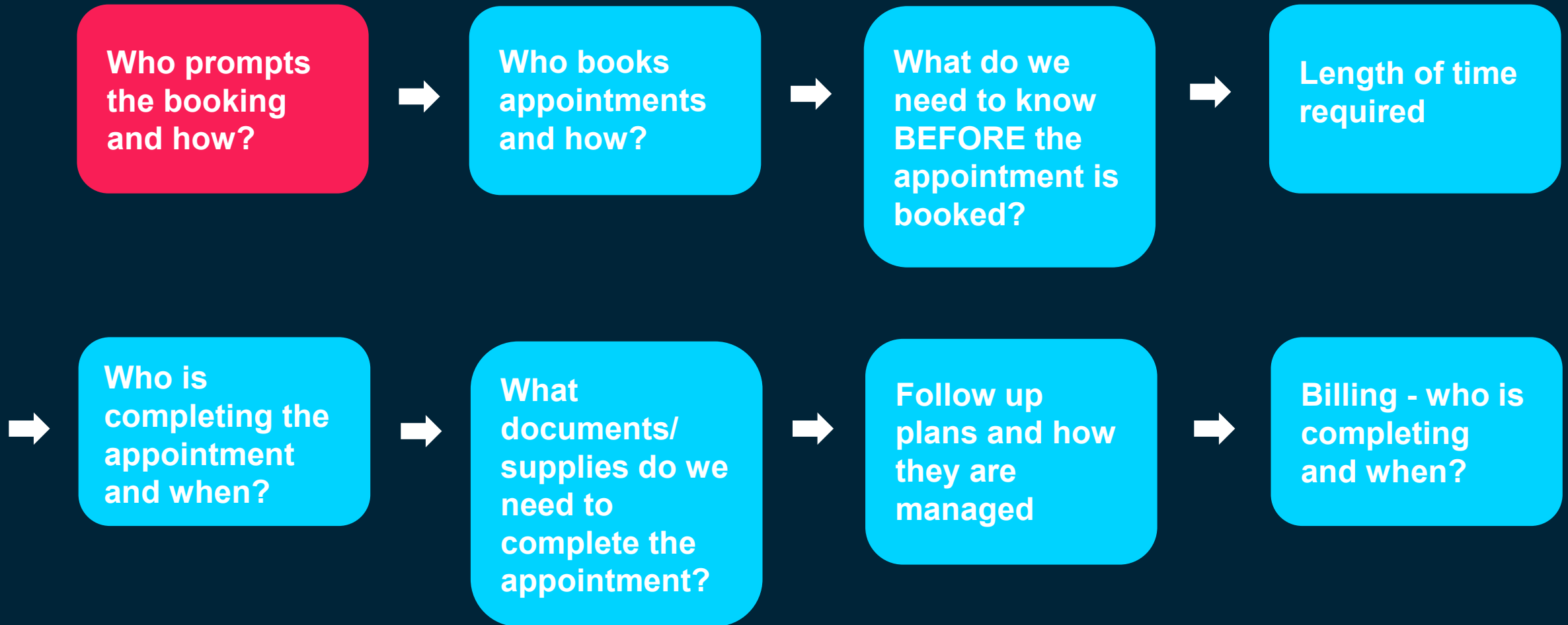


WHERE DO WE EVEN START?

Appointment Pathway - New Services



Appointment Pathway - New Services



Who Prompts the Appointment Booking?

Patient

- Advertising within store
- Social media

Pharmacy team

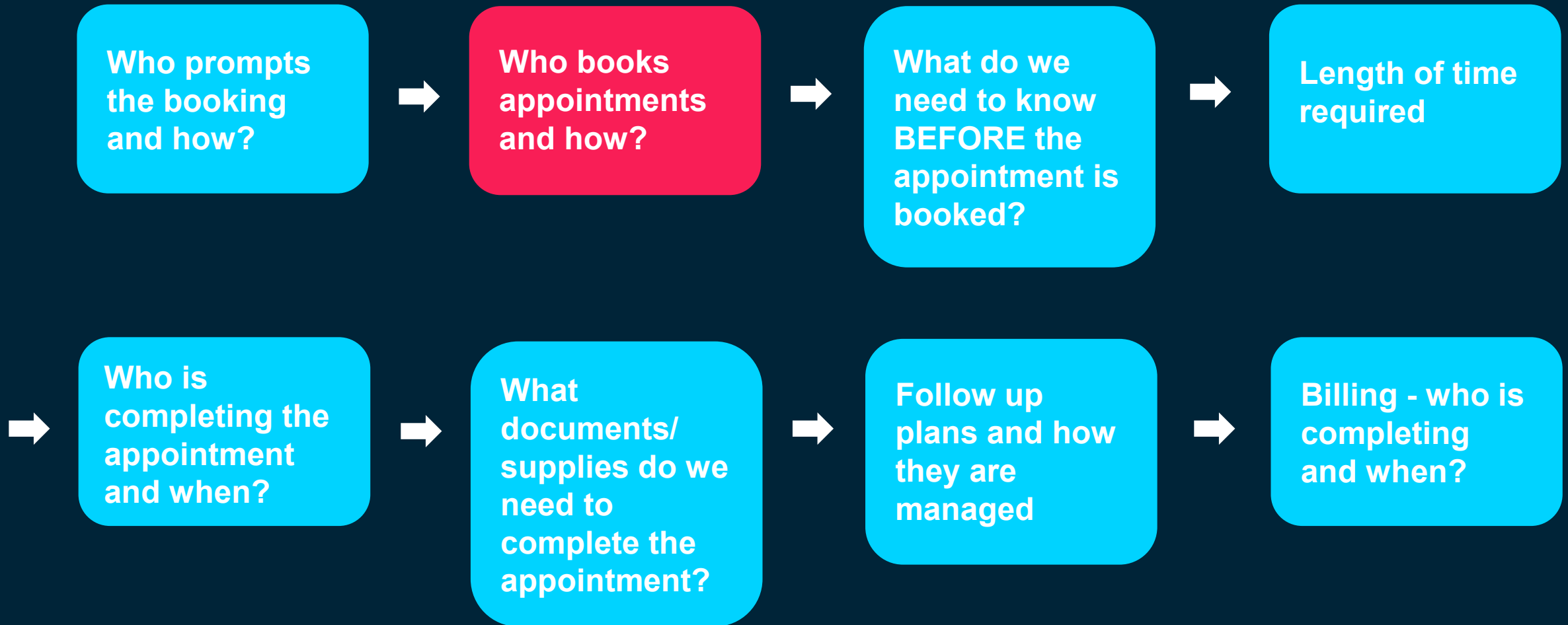
- Slips attached to birth control medication
- Other pharmacies who are not providing

Referral from local providers

- MD/NP offices, walk-in clinics
- Women's' health clinics
- Local high schools



Appointment Pathway - New Services

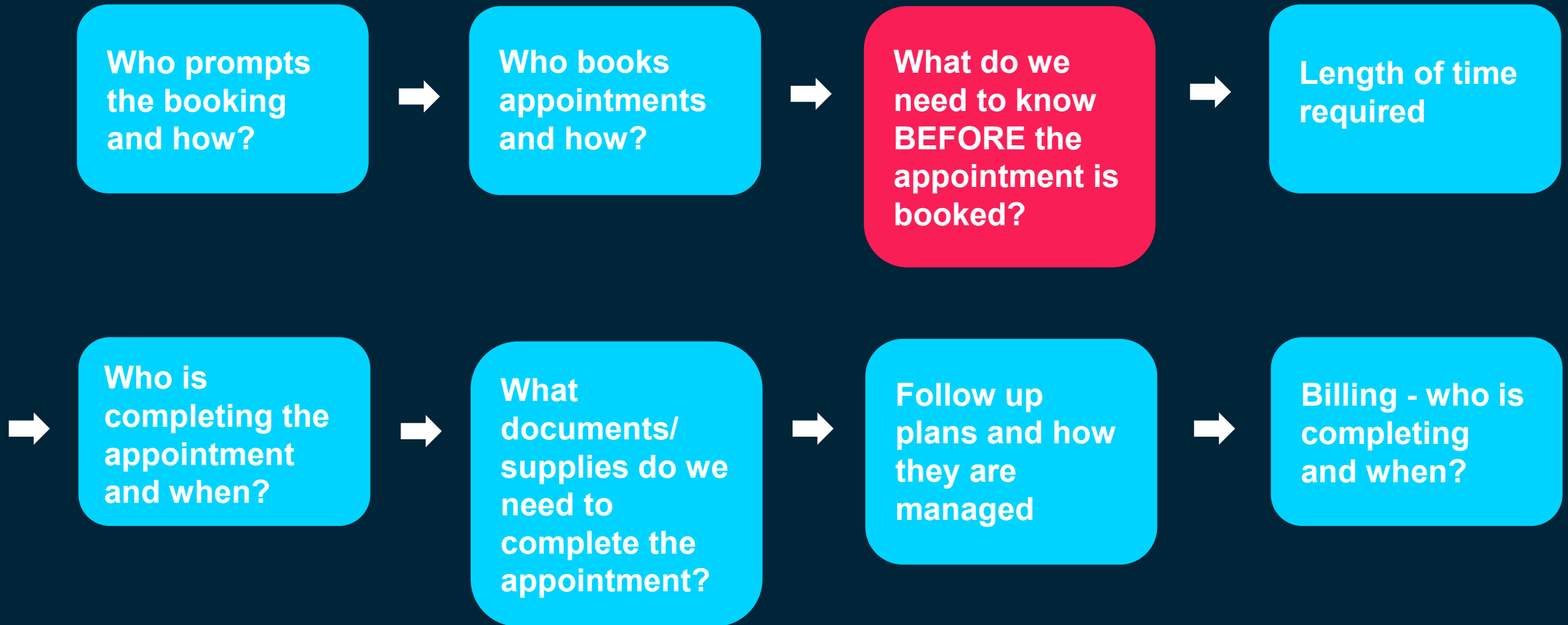


Who Books the Appointment and How?

- Calendar system in pharmacy software: completed by pharmacy team member
- Web-based booking systems: patient can book themselves in
- Old-fashioned appointment book and pencil



Appointment Pathway - New Services

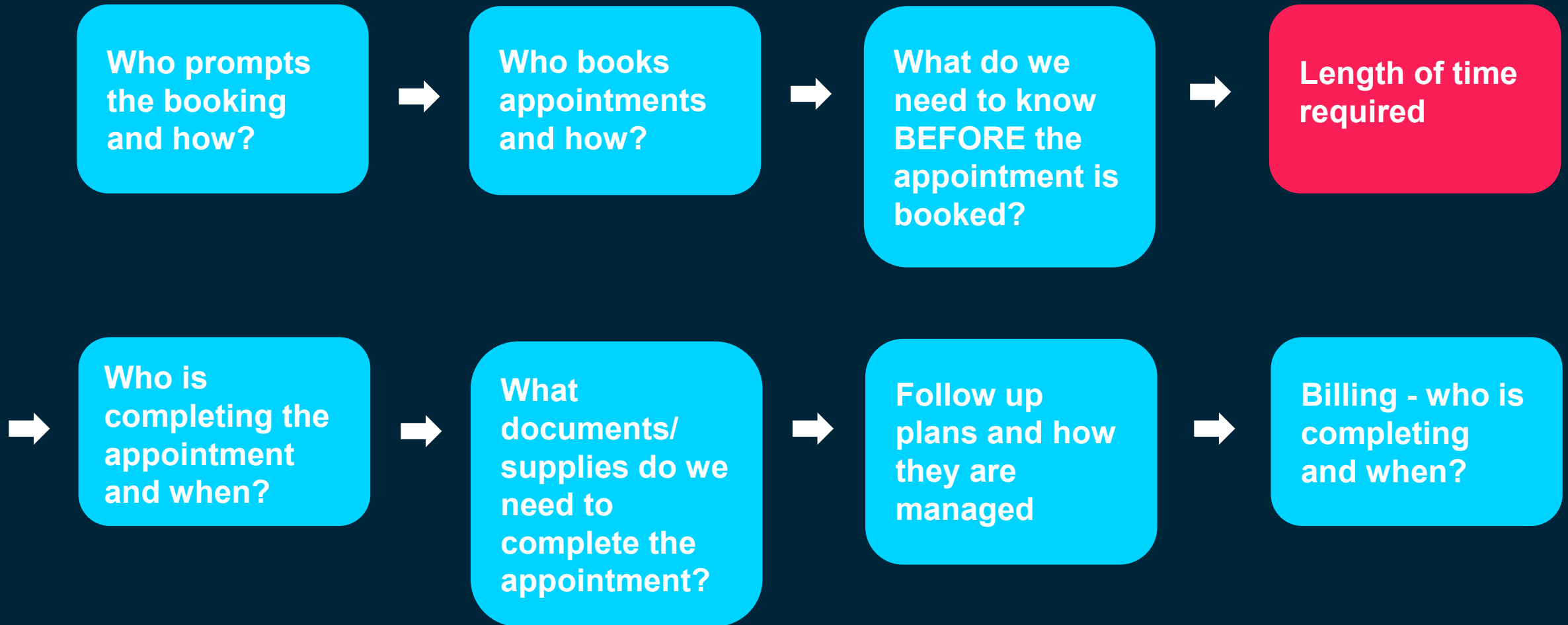


What do we need to know BEFORE the appointment is booked?

- Existing patient?
- Aware of any fees/charges?
- Patient specific factors that may limit our assessment ability
 - Age?
 - Indication? Contraception vs. non-contraception indication
 - Renewal vs. brand new start vs. change of product



Appointment Pathway - New Services



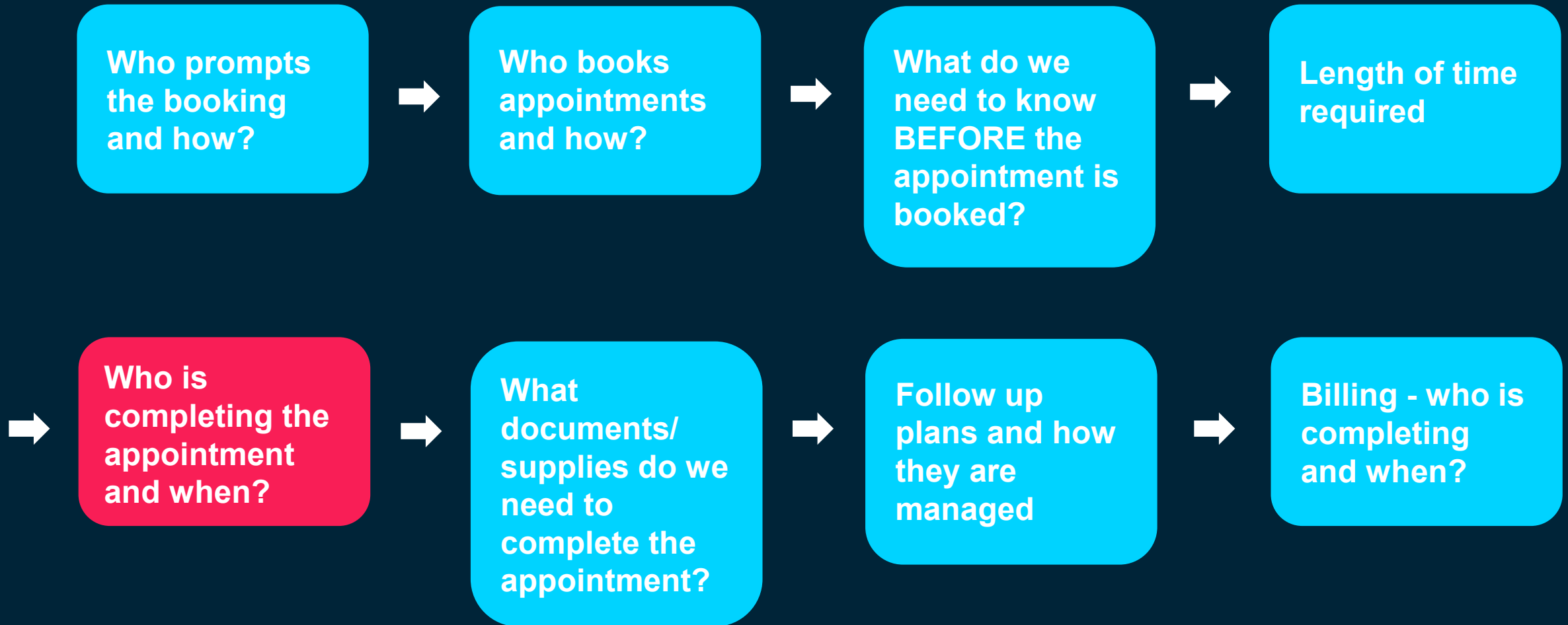
Length of Appointment

- Initial appointment vs. follow up
- Renewal vs. newly starting
- Give time before/after for paperwork
- Start with larger time block and scale back as comfort level improves
- Set times in pharmacy software calendar
- Clock in the room



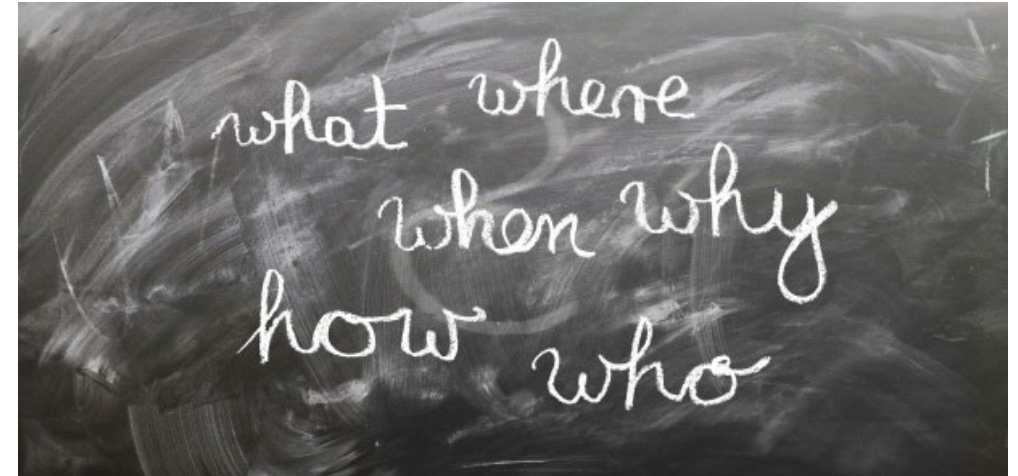
Goal: 20 minutes in-person appointment, 5 minute phone follow up

Appointment Pathway - New Services

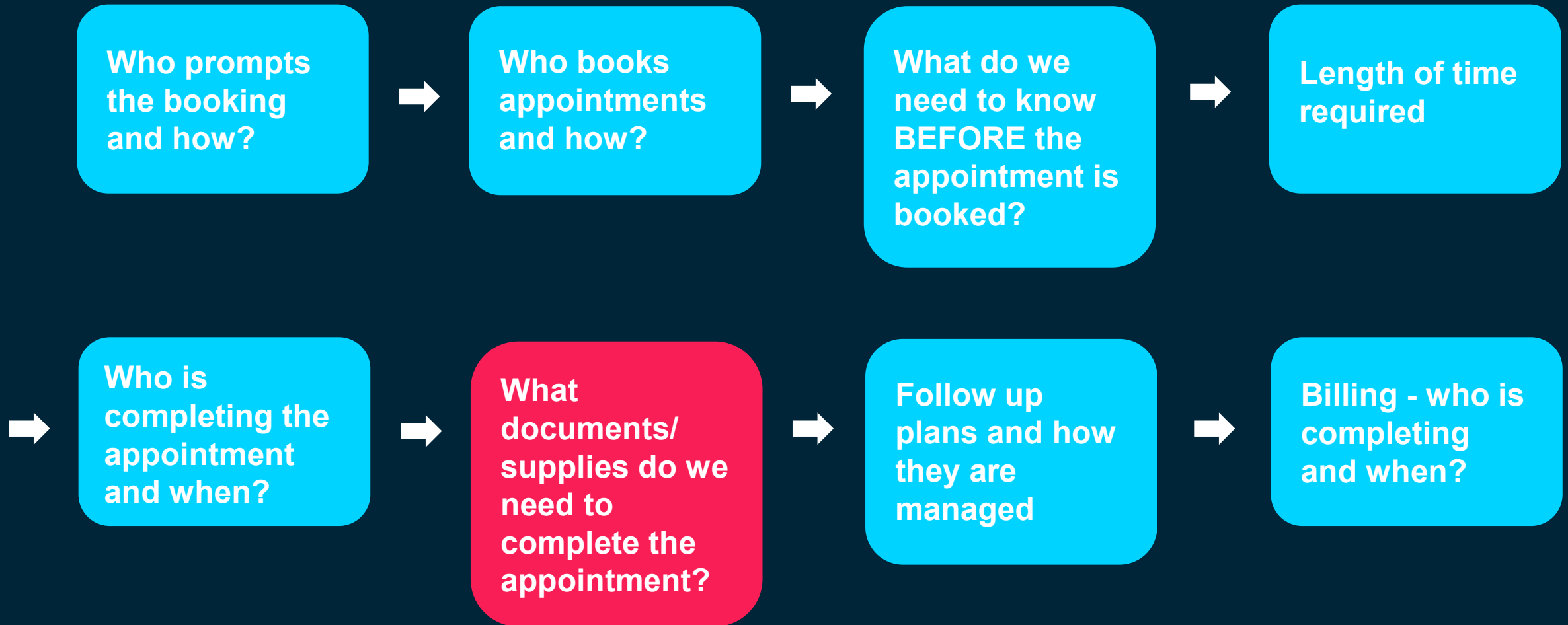


Who is Completing the Appointment and When?

- Not on-demand services
- Set a goal: how many services per week?
- Set aside blocks during overlap time specifically for appointment booking
- Make sure entire team is aware



Appointment Pathway - New Services



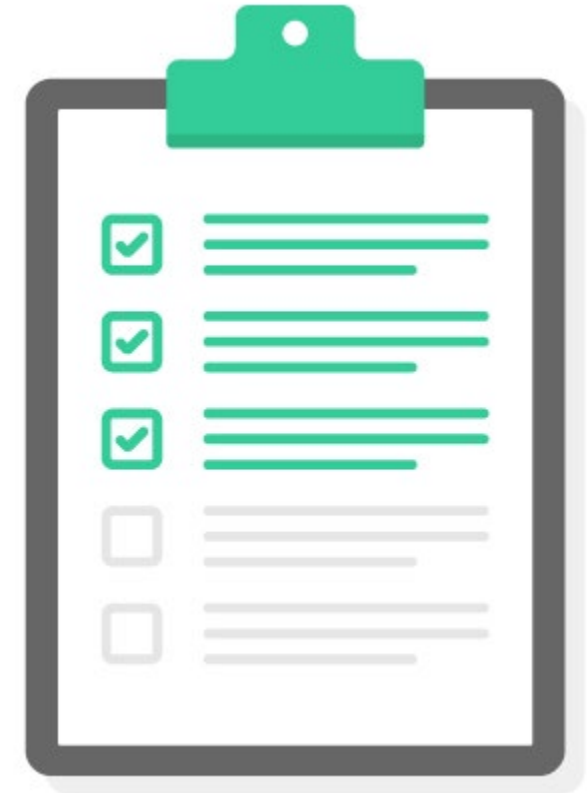
What documents/supplies do we need for assessment?

- Private space that is comfortable for pharmacist and patient
- Appropriate assessment forms accepted by your province
 - Where are these located? Link on desktop, preprinted, scanned into the pharmacy software
 - Fillable PDFs
 - Prescription pads
 - Get ready ahead of time: get in the habit of checking appointment calendar every morning



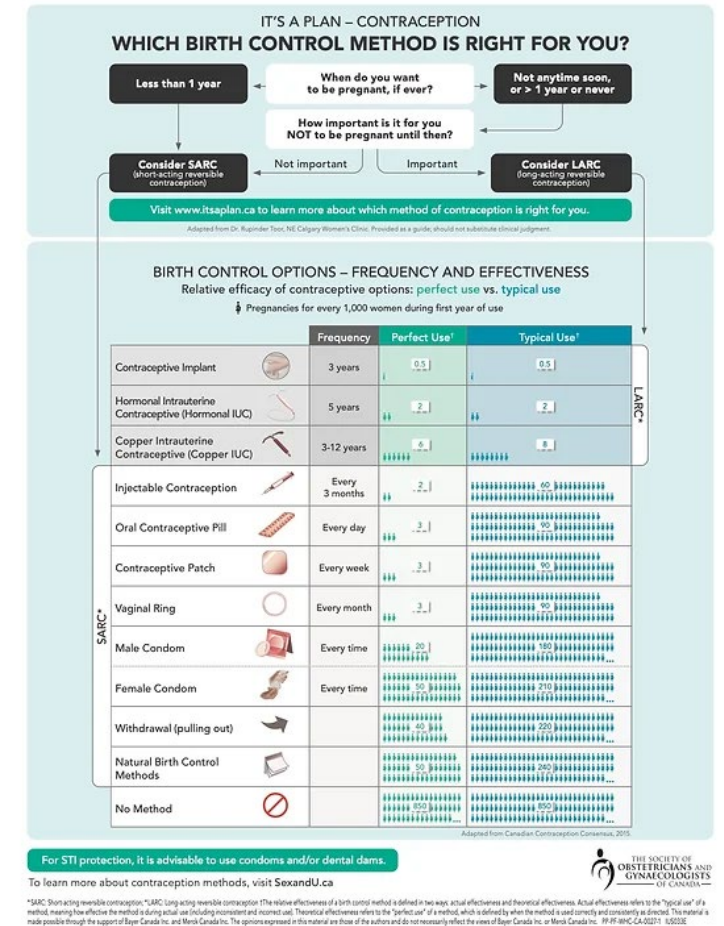
What documents/supplies do we need for assessment?

- Pregnancy Screening Questionnaire
- Reliable clinical resources:
 - CPS Therapeutic Choices - Contraception
 - Canadian Contraception Consensus (<https://www.jogc.com>)
 - medSask Guidelines for Prescribing for Minor Ailments and Patient Self-Care. University of Saskatchewan.



What documents/supplies do we need for assessment?

- Professional blood pressure monitor
- Scale and BMI calculator tool
- Contraception method charts
- Samples of OCs, IUS, rings etc.
- Referral forms for IUS, implants

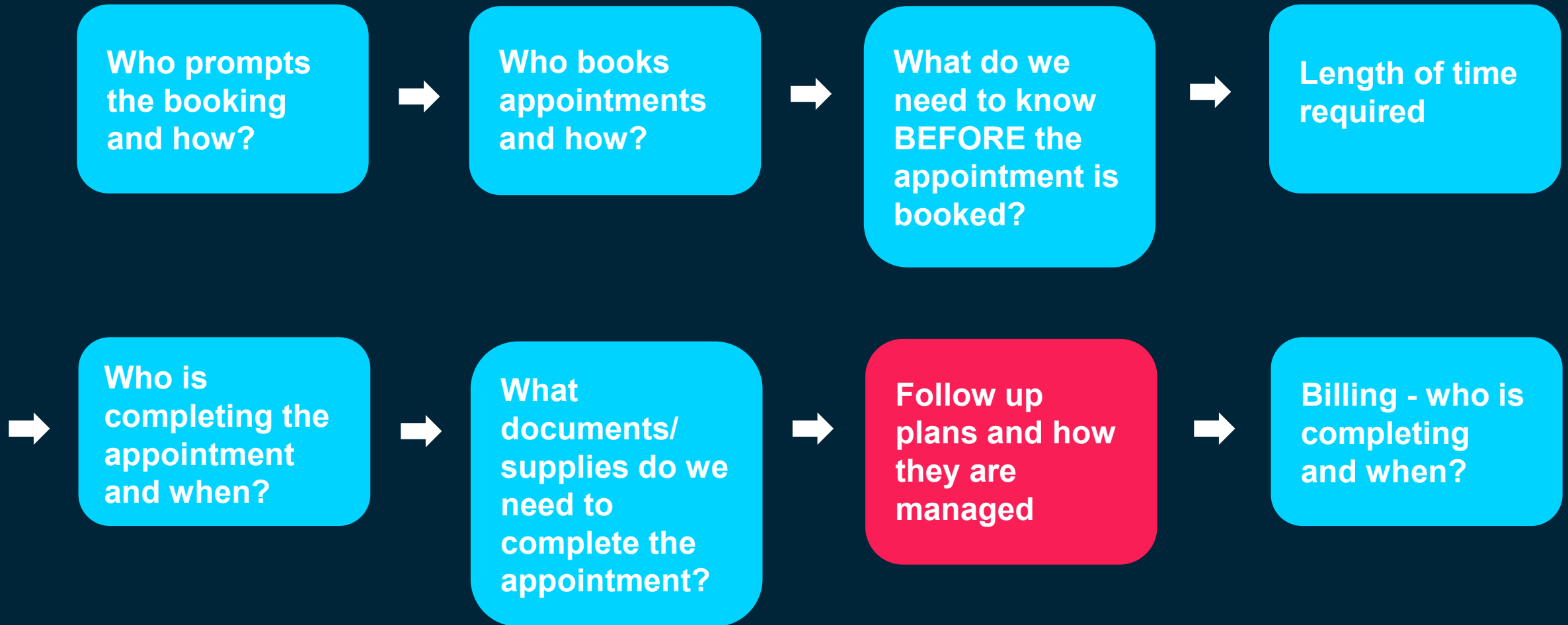


What documents/supplies do we need for assessment?

- Guidelines on PAP test timing
 - CTFPHC recommends every 2-3 years for those 25-69
 - For asymptomatic women who have been sexually active
 - Does not apply to women with hx of abnormal screening results
- STI information
 - <https://www.sexandu.ca>
 - CPS Therapeutic Choices: Sexually Transmitted Infections



Appointment Pathway - New Services



Follow up plans & how are they managed?

- Recommended follow up for new or changes to hormonal contraception
 - 1 - 4-week phone follow up appointment
 - 3 months in-person or phone follow up appointment
- Use pharmacy software to schedule follow up appointments to get paper out of baskets

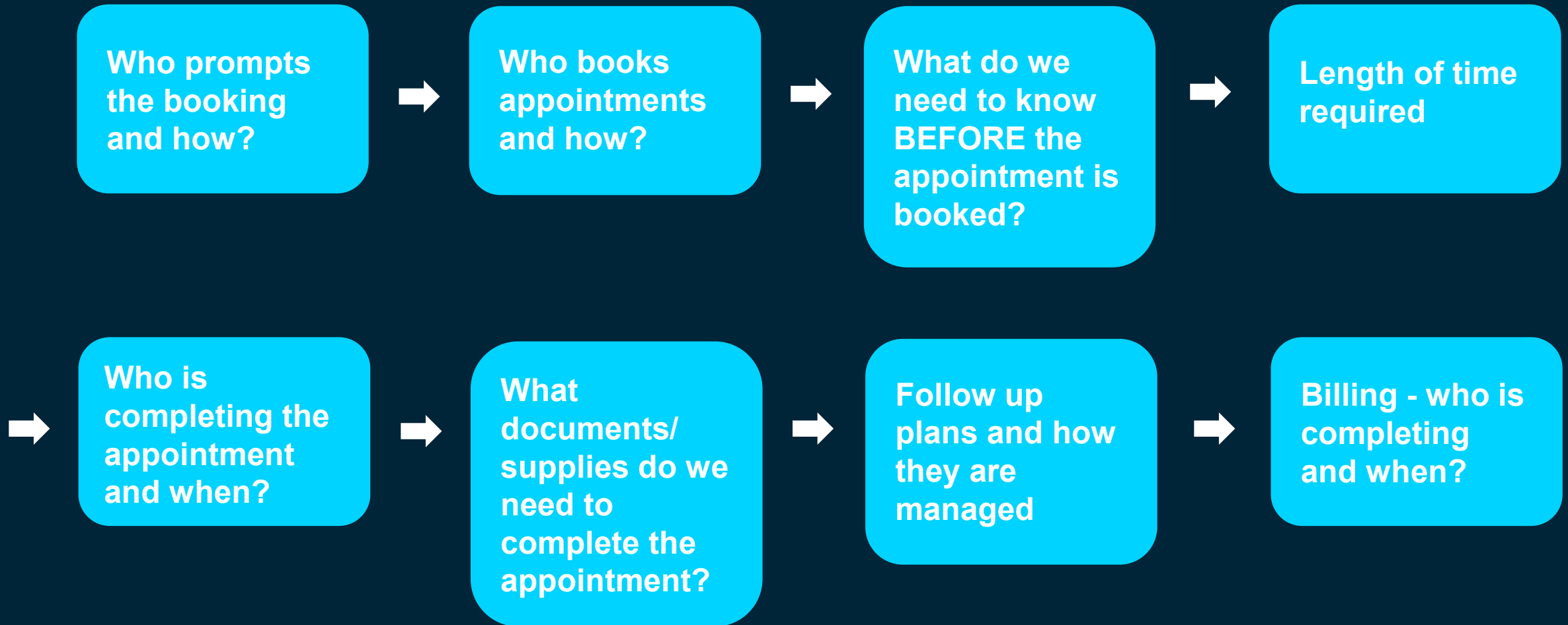


Back to Renee

- Renee is a 24-year-old woman.
- Has been taking TriCira 21's for 5 years without issue.
- Currently has no primary care provider.
- Contacts your pharmacy because she heard pharmacists can now write prescriptions for hormonal contraception and she is out of refills of her current prescription.



Renee's Appointment Pathway



Renee's Pharmacy Service Pathway

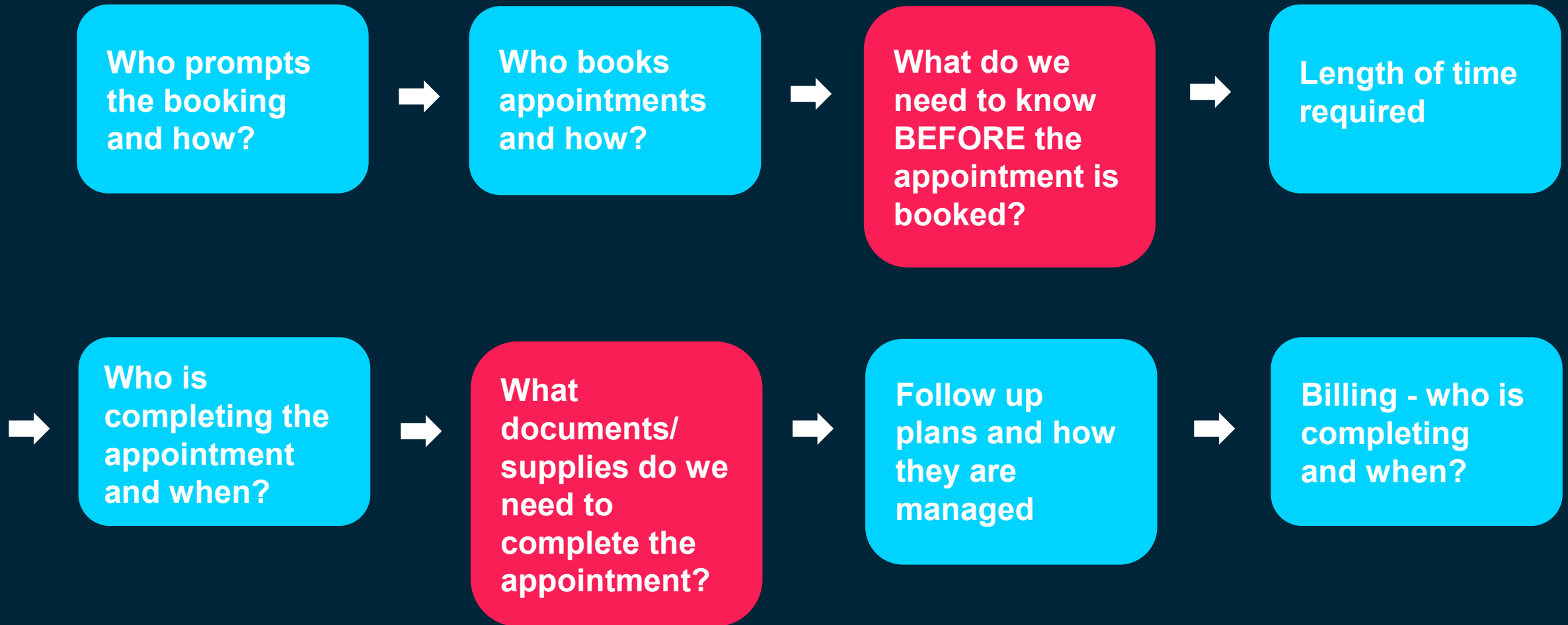
- ➔ Appointment booked by pharmacy assistant in our software calendar for next day - 15 minutes during pharmacist overlap. Noted in appt notes that she requested renewal.
- ➔ Pharmacist prepares that morning for appointment and prints all required forms before the scheduled time..
- ➔ At appointment: no concerns identified. BP is normal, BMI is healthy. Pregnancy is ruled out and she has not missed any doses.
- ➔ New prescription is written by pharmacist for TriCira 21's M:3 packs, 3 refills. She is given the sexandu.ca website to visit on her own time.
- ➔ Since it's a renewal, a follow up phone appointment is booked in software for 3 month's time.
- ➔ Pharmacy bills service fee to appropriate payor. Patient is billed for prescription.

Meet Yasmine

- Yasmine is 15-year-old woman.
- Sexually active with casual partners.
- Wants to start birth control - has been using condoms only.
- Afraid to go to her family doctor because she is her friend's mother.



Yasmine's Appointment Pathway



Yasmine's Pharmacy Service Pathway



Appointment booked by pharmacy assistant in our software calendar for next day during pharmacist overlap.



Her age was flagged by pharmacy assistant wondering if that limits your ability to provide her care? Age of consent and mature minor information is considered.



Appointment is booked for 45 minutes total since you have just started offering this service and it's a brand-new start.



Pharmacist prepares that morning for appointment and prints all required forms before the scheduled time.



Yasmine's Pharmacy Service Pathway

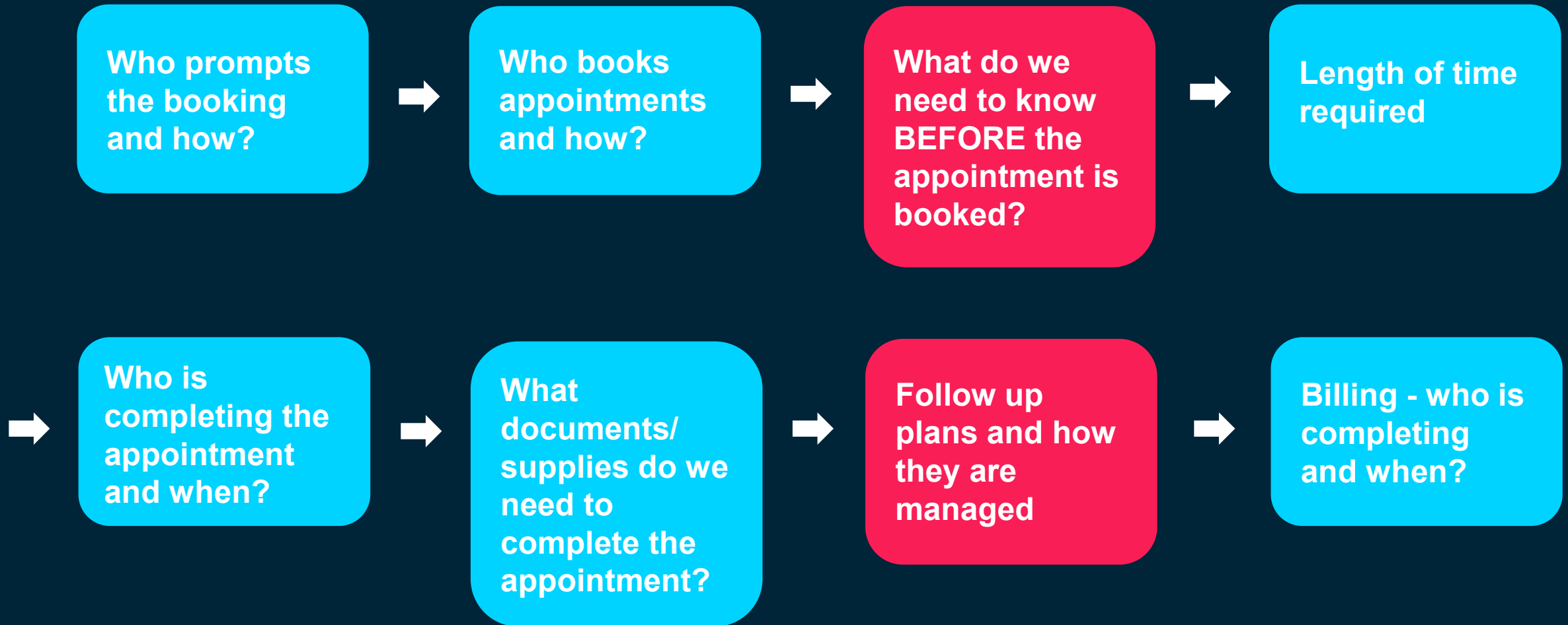
- ➔ At appointment: BP is normal, BMI is healthy. Pregnancy is ruled out.
- ➔ Through conversation Yasmine informs you that her sexual partners are in her grade and within 2 years of her age. She considers these to be safe relationships.
- ➔ STI prevention and use of condoms discussed. She is given sexandu.ca website to research on her own as well
- ➔ New prescription is written by pharmacist for Alysena 28's 1 month with 2 refills. She is instructed on correct use, effectiveness and potential side effects.
- ➔ Follow up phone appointment is booked in software for 1 week and in person planned for 3 month's time.
- ➔ Pharmacy bills service fee to appropriate payor. Patient is billed for prescription.

Meet Fiona

- Fiona is a 46-year-old woman.
- She has been taking OCPs off and on since her teens but is currently not on a hormonal contraceptive.
- Single, nonsmoker, reports not sexually active.
- Wants to start back on OCP because she is going on a vacation and wants to adjust timing of her periods.



Appointment Pathway - New Services



Fiona's Pharmacy Service Pathway



Appointment booked by pharmacy assistant in our software calendar for next day - 30 minutes during pharmacist overlap. Noted in appt notes that she requested to restart OCPs.



Pharmacist prepares that morning for appointment and prints all required forms before the scheduled time..



At appointment: no concerns identified. BP is normal, BMI is healthy.



After further discussion, Fiona confirms that she has no intentions of requiring an agent for contraception. The pharmacist explains that they cannot prescribe for menstrual cycle timing and refers Fiona to her NP.



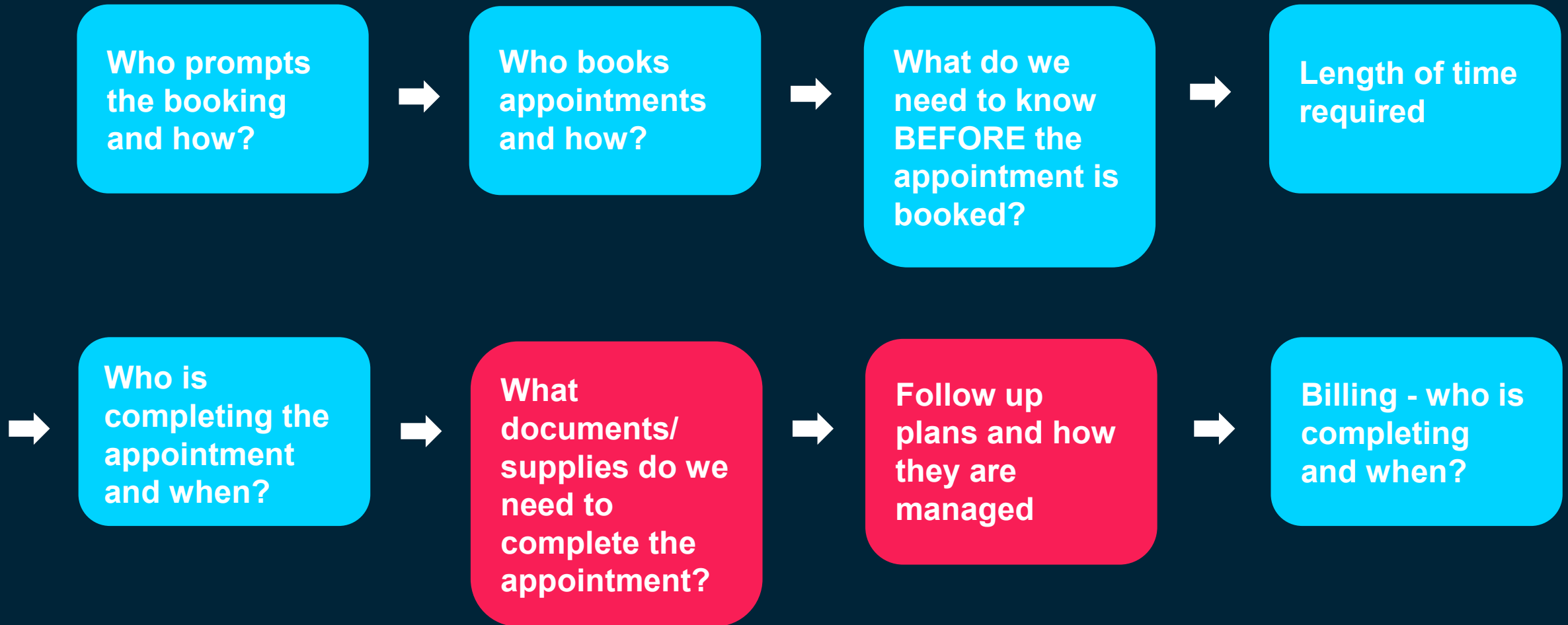
Pharmacy bills service fee to appropriate payor.

Meet Amanda

- Amanda is a 37-year-old woman.
- Has had 3 children.
- Normal menstrual cycles.
- Is married and has a healthy sexual relationship with her male partner.
- Is a busy mother who wants to consider a non-oral contraceptive so she does not have to remember to take it.



Appointment Pathway - New Services







Amanda's Pharmacy Service Pathway

- ➔ Appointment booked by pharmacy assistant in our software calendar for next week-30 minutes during pharmacist overlap. Noted that patient wants to discuss all potential options available to her at this stage in her life.
- ➔ Pharmacist prepares that morning for appointment and prints all required forms before the scheduled time..
- ➔ At appointment: no concerns identified. BP is normal, BMI is healthy.
- ➔ New prescription is written by pharmacist for Mirena IUD and referral created for Women's Health Clinic for product insertion by a NP.
- ➔ Follow up phone appointment is booked in software for 3 month's time but Amanda is instructed to call you before that if she has any issues/concerns.
- ➔ Pharmacy bills service fee to appropriate payor. Patient is billed for prescription.

Conclusion

Today we:

-  Discussed practical operational tools to help prepare your practice setting for provision of hormonal contraception management
-  Improved confidence in providing this clinical service to your patients
-  Examined resources available to support this service for both the pharmacist and the patient
-  Identified potential patients and discuss hormonal contraception service options available to them

References

- Therapeutic Choices - Contraception. Canadian Pharmacists Association.
- Therapeutic Choices - Sexually Transmitted Infections. Canadian Pharmacists Association.
- Canadian Contraception Consensus (<https://www.jogc.com>)
- medSask. Guidelines for Prescribing for Minor Ailments and Patient Self-Care. University of Saskatchewan. <https://medsask.usask.ca/hormonal-contraceptives.php>
- <https://www.sexandu.ca>. The Society of Obstetricians and Gynecologists of Canada
- Canadian Task Force on Preventive Health Care <https://canadiantaskforce.ca>
- 6 questions to ask to determine pregnancy status: Klein et al. Am Fam Physician
- Article 12 of the Convention on the Rights of the Child and Children's Participatory Rights in Canada