

Report form of clinical pharmacy implementation

Section 1 Moderia/sector identification data

1.1	Moderia /sector name	
1.2	Name of reporter /position	
1.3	Stage number	
1.4	Date of report	
1.5	Duration/.....	
1.6	Hospitals of the stage :	
1.7	Nature of current activities	
1.8	Departments where clinical pharmacy is implemented	
1.9	Number of clinical pharmacists in each hospital /department	

Section 2 Stages of implementation plan

stage	Tick the current stage
Preparation & training of pharmacists	
Establishment of clinical pharmacy unit & DIC	
Implementation stage in one specialty	
Expand implementation to other specialties /mention it	

Section 3 Summarized description of the current working reported activities.

“In light of the implementation plan”

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Section 4 Detailed report of current working activities

4.1 For stage 1 hospitals

Report about clinical pharmacists

Item	Comment
Complete required training illustrated in the plan	
Meet the knowledge and skills requirements for patient care (refer to description)	
Demonstrate ongoing learning and development (attach any conducted events , seminars , scientific days)	
Use tools correctly (Forms, scientific references, polices & protocols)	
Comply with Egyptian clinical pharmacy standards of practice	
Regularly participate in daily bed rounds	
Records recommendations , interventions or the appropriate activity in the approved documents	
General evaluation of their performance of practice (provide grades)	

Other comments (specific to each hospital separately)

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Report about clinical pharmacy services provided

item	report
Total number of interventions for patient care (illustrating types of references used)	/hospital 1 /hospital 2 /hospital 3 /hospital 4 Total :
Total number of DIRs (categorize types of questions)	/hospital 1 /hospital 2 /hospital 3 /hospital 4 Total:
Total number of scientific newsletters produced	/hospital 1 /hospital 2 /hospital 3 /hospital 4 Total:
Total number of scientific days/events	/hospital 1 /hospital 2 /hospital 3 /hospital 4 Total:
Total number of ADR reports	/hospital 1 /hospital 2 /hospital 3 /hospital 4 Total:

Total number of ME reports	/hospital 1 /hospital 2 /hospital 3 /hospital 4 Total:
Total number of P&T committee meetings conducted	/hospital 1 /hospital 2 /hospital 3 /hospital 4 Total:
Total number of drug protocols management	/hospital 1 /hospital 2 /hospital 3 /hospital 4 Total:
Total number of patient counseling sessions conducted	/hospital 1 /hospital 2 /hospital 3 /hospital 4 Total:

4.2 For stage 2 & 3 hospitals (Hospital pharmacy implementation)

item	report
Pharmacists complete required training for hospital pharmacy developments (mention type of training courses conducted)	
Mention types of hospital pharmacy activities conducted as included in the plan	
Total number of ADR reports	
Total number of ME reports	
Total number of P&T committee meetings conducted	

4.3 Attach any documents illustrate the reported activities

4.4 Mention your recommendations given during the hospitals visits as follow up team:

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**4.5 mention Hospital satisfaction of clinical and hospital pharmacy service provided
(Describe that for each of the following :-)**

Physician satisfaction:

Nurses satisfaction:

Other colleagues:

Patient satisfaction: