Collaborative Practice Agreement

The Idaho State Board of Pharmacy provides for a collaborative practice between a physician and a pharmacist for the purpose of drug therapy management of patients.

Collaborative Practice is defined as a practice in which the prescribing practitioner makes a diagnosis, maintains ongoing supervision of patient care and refers the patient to a pharmacist, who may initiate and modify drug therapy management within the protocol established by the prescribing practitioner and the pharmacist.

The clinical pharmacists at BGH Anticoagulation Clinic are trained in anticoagulation therapy management and perform duties under a protocol approved by the clinic’s supervising physician and BGH Pharmacy & Therapeutics Committee as follows:

1. Evaluate patients on anticoagulation therapy and adjust anticoagulant medication as appropriate.
2. Provide initial and ongoing patient counseling related to anticoagulation therapy and promote patient understanding of and adherence to the prescribed medication regimens.
3. Order and evaluation the results of laboratory tests related to anticoagulation therapy, including:
   - Prothrombin time with International Normalized Ratio (PT/INR)
   - Partial thromboplastin time (PTT)
   - Complete Blood Count (CBC)
   - Serum Creatinine
   - Anti-Xa Levels
4. As an agent of the physician, prescriptions that are related to anticoagulation management (i.e. warfarin, dabigatran, LMWH, or vitamin K) can be, either written or phoned to the patient’s pharmacy. Will confirm candidacy for Bridge Therapy with referring physician prior to initiation LMWH.
5. As an agent of the physician and under the supervision of the clinical pharmacist, vitamin K can be administered when reversal of warfarin is warranted.
6. Document each encounter, which is maintained in the electronic medical record and patient’s clinic chart then viewable by the referring physician or if requested can be sent to the physician after each clinic visit.

The referring physician or supervising physician of the Anticoagulation Clinic may override this agreement whenever he or she deems it necessary or appropriate. Termination of this agreement may also result as a break in the patient contract.

Agreement: A collaborative practice agreement has been established between Dr. ________________________________, a licensed practitioner in the State of ________________________________, and the following pharmacists:

Sharla Comstock, PharmD  Sara Couch, RPh  Denise Kelley, RPh
Mauria K. Prince, RPh  Dwayne Sheffler, RPh  Mary Snider, RPh

Physician Signature: ________________________________  Date: ________________________________
Physician Name (Print): ________________________________  License #: ________________________________
Phone #: ________________________________  State: ________________________________  NPI #: ________________________________
Pharmacist’s Signature: ________________________________  Date: ________________________________