

Pharmacist-driven education for solid organ transplant recipients in the COVID-19 era

In the COVID-19 era, it remains of utmost importance for solid organ transplant (SOT) patients and caregivers continue to receive excellent education following transplantation. As a leader in SOT, we recognized the need to enhance patient engagement by implementing a comprehensive pharmacist-driven medication knowledge program encompassing didactics, visual tools, and virtual learning. These initiatives have proven to be particularly beneficial in ensuring optimal patient outcomes following orthotopic heart transplantation (OHT) during the COVID-19 era.

One of the first initiatives was a sample discharge medication list as an early step to begin better preparing patients for their discharge. The OHT pharmacist reviews the medication list with the patient once the patient is able to cogently participate in his or her medication education post-transplantation. The template gives patients a preliminary idea of what they will be going home on, orients them to the visuals on the medication guide, and helps them learn the names and dosages of medications.

The next initiative to improve our OHT patients' education process was the creation of color-coded flash cards for each immunosuppressive and antimicrobial medication. Each card lists the medications' generic and brand names with pictures of the capsules or tablets and describes key points such as timing of administration, drug interactions, and potential adverse effects. Patients review these cards both individually and during education sessions led by the OHT pharmacist.

In order to ensure our efforts to improve our patients' education are effective, an assessment to evaluate understanding of post-OHT medications was created. The assessment consists of eleven multiple-choice questions and gauges the patients' recollection of their medication names, indications, and what to do in scenarios such as a missed dose of medication. The assessment is conducted during the first post-transplant education session and then repeated following at least one more education session during which the educational tools are reviewed. Thus far, patients who have taken the assessments scored averages of 46% on the pre-education assessment and 88% on the post-education assessment, demonstrating significant improvement in their medication knowledge following multiple education sessions with the pharmacist.


During the COVID-19 pandemic, many of our institution's services transitioned to a telemedicine approach and patients were provided with iPads to conduct secure, virtual education sessions.

A challenge to telemedicine is maintaining a connection and engagement with the patient; however, the pharmacist was able to lead effective education sessions during multiple video visits by utilizing the aforementioned tools.

Overall, these innovative educational tools have been highly effective in improving patient education and satisfaction; they can be easily adapted to fit specific program's and institution's needs. Conducting effective, virtual patient medication education sessions aided in the safe and timely discharge of complex OHT patients. This allowed our hospital the space to care for a potential surge of patients affected by COVID-19 and decreased the risk of potential exposure of SARS-CoV-2 to our immunocompromised patients, while ensuring no compromise to OHT recipients' medication education. Our experience demonstrates how pharmacists can continue to effectively provide the necessary medication education to patients in a rapidly evolving healthcare practice. Our team plans to continue to use these educational tools during telemedicine visits throughout and beyond the COVID-19 era.

CONFLICT OF INTEREST

None

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