

Drug-interaction Assessment

Experiment 1 - Practical Notes

Name: _____ Roll no.: _____ Date: _____

Aim

To prioritise an interaction in a coded medicine list.

Principle

A potential interaction must be evaluated for evidence, exposure, patient risk and clinical relevance; an alert alone does not define the needed action.

Requirements

- Allocated clinical notes or fictional case, current approved medicine information and local clinical policy.
- Case-record form, calculator where needed and supervising pharmacist.

Procedure

1. Prepare the case

Use the allocated clinical record or a fictional teaching case. Record a case code, setting and date; exclude names and personal identifiers.

2. Assess the required information

Confirm complete medicine list including non-prescription products; indication, route and treatment timing; organ function and relevant monitoring; authorised interaction information. Note missing information explicitly.

3. Develop the pharmacy assessment

For each flagged pair, state the proposed pharmacokinetic or pharmacodynamic basis, likely consequence, evidence strength and patient-specific risk. Consider monitoring, an authorised administration adjustment or a different treatment for discussion with the team. Record what was accepted and followed up.

4. Discuss and document

Present the assessment to the supervising pharmacist or treating team. Record the accepted action, responsible person and intended follow-up.

5. Evaluate the outcome

Review the agreed clinical or process endpoint. Record what changed, what remained unresolved and the next step.

Observations and Record

Record component	Student entry
Case / medicine pair	_____
Interaction mechanism and evidence	_____
Patient-specific risk	_____
Proposed management	_____
Accepted action / monitoring	_____

Result

Assessment: _____. Proposed action: _____. Supervisor decision: _____. Follow-up outcome: _____.

Precautions

- Use the treating team and current patient-specific information for all actual medicine decisions.
- Maintain confidentiality and confirm allergy, medicine and timing information.
- Do not invent patient observations, acceptance of an intervention or follow-up outcomes.

Viva Questions and Answers

1. Does an interaction alert mean the combination must always stop?

No. Relevance and management depend on the evidence and individual context.

2. What makes a recommendation reviewable?

A named issue, supporting facts, a feasible action and the monitoring plan.

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