Impact of PGY2 Residency Training on Pharmacist-led Collaborative Drug Therapy Modification (CDTM) Implementation in Georgia

Introduction

- CDTM allows for adjustment of dosages, dose schedules or medications by a pharmacist.
- Less than 1% of Georgia Pharmacists have a CDTM license.

Methods

Primary Outcome
- PGY-2 training

Secondary Outcomes
- Demographics
- Services offered
- Disease states managed
- Perceptions regarding CDTM

Inclusion Criteria:
- Pharmacist who completed the survey
- Active CDTM license

Methods
- Georgia Board of Pharmacy provided list of CDTM licensed pharmacist
- Dillman method for surveying
- Pharmacist received mailer inviting them to complete 30min electronic Redcap survey
- Descriptive statistics, chi square, and t-test were conducted using SPSSv28

Results

- Out of 136 licensed pharmacist, 36 responded. Out of the 36, 27 had an active CDTM License. 17 had no PGY2 Training, 10 had completed PGY2 Training
- Statistically significant difference between PGY2 and no PGY2 groups in precepting and reporting of barriers, years of practice
- No difference in mean number of services offered, quantity of disease states managed, percentage ordering labs, or frequency of billing for services

Conclusion

- Completion of PGY2 training may be associated with the development of CDTM services and precepting
- Small sample could not identify any difference in billing frequency, or types and quantity of services offered, which can be a limitation to the study
- Future research may analyze the perceptions of current licensed pharmacists on CDTM licensure

Completion of PGY-2 training may be associated with pharmacist engagement in CDTM services in Georgia

Citations


Research Team

Sharon P. Osae, PharmD, BCACP, Dayana Pimentel, PharmD Candidate, Blake Johnson, PharmD, BCACP, Devin Lavender, PharmD, BCPs, Beth B. Phillips, PharmD, BCPs, BCACP, FCPG, FASHP, Russ Palmer, M.Ed, PhD, Henry N. Young, PhD, Rebecca H. Stone, PharmD, BCPs, BCACP, FCPG (presenting author)