

Intervention	Description	Time (mins)
- Additional 15 minutes	Will add additional time when used as a secondary intervention	15
- N/A	Faculty will use this as the secondary intervention if no other secondary interventions exist	0
ADR prevented	Prevent an ADR from occurring during the prescribing or dispensing process but before it reached the patient	10
Allergy info clarified	Clarifying whether or not a patient has any allergies or if noted, the reaction to the listed agent	10
Allergy prevented	Preventing a medication from being ordered or dispensed if prescribed and the patient has a documented allergy	10
Antibiotic recommendations	Recommending an initial regimen or making an adjustment to a current antimicrobial regimen (dose adjustments to antimicrobials should be documented under "drug therapy adjusted")	10
Antiretroviral resistance evaluation	Evaluating an HIV regimen and making recommendations for adjustment	15
Chart review	Review of a patient's chart when rounding in the clinic, answering questions, discussing care with preceptor and/or other health care providers, clarifying medications, returning phone calls to patients, etc. (extensive reviews are documented under Drug therapy consultation); Is automatically part of a clinic visit and is therefore not documented separately of a clinic visit; Is automatically part of a PK consult, PK follow-up, and renal dose evaluation and is therefore not documented separately of these activities.	15
Chemo dose evaluation	Evaluating an order for a chemotherapeutic agent	10
Clarification of orders	Clarifying any question about a medication order with the prescriber or his agent	3
Continuity of care	Facilitation of care from inpatient to outpatient or vice-versa. May also include transition of care to another pharmacy/clinic.	30
CPR/Code attended	Participating with the code team during a cardiac arrest	15
Descriptor – X	Only available as a secondary intervention; Always use in combination with <i>Outpatient - Pharmacy Care Initial or Reassess</i> to describe the visit	0
Diabetic Foot Exam (comprehensive - annual)	Foot exam for patients with diabetes; includes visual assessment, monofilament, pulse assessment	15
Drug information - Brief	Provision of drug information to a professional colleague	3
Drug information - Extended	Extended provision of drug information to a colleague	15
Drug levels avoided	Prevent prescriber from ordering inappropriate/unnecessary serum levels for a medication	10
Drug therapy adjusted (dose / frequency / etc.)	Optimization of a patient's medication regimen - changing dose, frequency, etc for an existing medication	15
Drug therapy consultation	Any consultation about a drug therapy ("curbside consult") outside a scheduled outpatient visit or inpatient encounter	15
Drug therapy discontinued IV	Discontinuing an unnecessary IV medication	15
Drug therapy discontinued PO	Discontinuing an unnecessary PO medication	15
Drug therapy initiated	Initiation of a new medication or medication regimen	15
Drug/Disease interaction	Prevention of interaction between medication and disease state	15
Drug/Drug interaction	Prevention of interaction between two or more medications	10
Drug/Food interaction	Prevention of interaction between medication and any dietary intake such as	10

	food, vitamins, supplements, etc.	
Drug/Lab interaction	Prevention of interaction between medication and laboratory test	15
Facilitation of DME/medical devices	Includes devices patients use at home to monitor therapeutic efficacy or safety or to remain compliant with medication therapy. This excludes time spent in counseling / selecting device. Examples: glucometers, peak flow meters, pillboxes, oxygen supplies, other equipment	5
Group patient education	Preparation and delivery of an educational session for a group of patients	30
Home enoxaparin therapy	Recommend patient be discharged and treated at home with enoxaparin vs inpatient w/UFH	15
Initiate DVT prophylaxis	Recommend a patient be started on a DVT prophylaxis regimen	10
Inpatient – Anticoagulation consult	Initiation of inpatient anticoagulation therapy, per prescriber’s order	15
Inpatient – Anticoagulation follow up	Monitoring/adjusting anticoagulation therapy for an inpatient, per prescriber’s order	15
Inpatient – Nutrition Consult (non-TPN)	Consultation for nutritional needs (ie, tube feedings) other than TPN, per prescriber’s orders	15
Inpatient – PK consult	Consultation for pharmacokinetics of any medication, including evaluating and ordering levels, adjusting medications, and writing notes, per prescriber’s order; Automatically includes chart review and lab evaluation.	15
Inpatient – PK follow up	F/U of pharmacokinetics of a medication, including evaluating & ordering levels, adjusting medications, and writing notes, per prescriber’s order; Automatically includes chart review and lab evaluation.	15
Inpatient encounter (chart review, rounding)	Assessment of a patient’s medical chart and/or rounding on the patient. Includes evaluating laboratory data.	15
IV Drug compatibility	Answer compatibility question for prescriber or nurse	10
IV to PO Conversion	Convert a patient from IV to PO route for appropriate patient/medications	10
Lab evaluation	Evaluating a patient's labs or drug levels, outside a regular patient encounter, drug consultation, outpatient visit, or inpatient encounter; Is automatically part of a PK consult, PK follow-up, and renal dose evaluation and is therefore not documented separately of these activities.	15
Lab/Test ordered	Order or recommend ordering any diagnostic or monitoring test (serum, radiologic, etc.)	5
Medical residency associated activities	Performance or involvement by HSOP faculty in activities related to medical residents education or affiliated programs	15
Medication adherence assessment	In-depth assessment of adherence, including activities such as pill counts, pill box assessment, obtaining pharmacy records and interviewing the patient. This is an extended time period outside a quick assessment during a medication history.	15
Medication reconciliation	Process of comparing an inpatient's medication orders by the physician to all of the medications that the patient has been taking (i.e. home meds). This reconciliation is done to avoid medication errors such as omissions, duplications, dosing errors, or drug interactions. It should be done at every transition of care in which new medications are ordered or existing orders are rewritten, i.e. when a patient is admitted to, transferred within, or discharged from a health care facility.	10
Non-form processed	Filling out paperwork/going through procedure of obtaining/dispensing a non-formulary agent or filling out a PA at the request of prescriber	15
On call interventions	Response to a page or phone call regarding a patient who requires pharmacy services after designated pharmacy hours or during unscheduled pharmacy time. Should be used in conjunction with a secondary intervention that identifies activities performed.	0

Outpatient – Additional 15 minutes (99607)	Additional time spent for the initial assessment or reassessment (see below); only to be used with an Initial or Reassessment documentation	15
Outpatient – Medical emergency (99605)	Extra care required for medical urgencies/emergencies such as severe hyperglycemia, hypertensive crisis, chest pain, DVT, etc.	30
Outpatient – Pharmacy care brief - X	Used as the primary intervention to document health and wellness visits (X denotes the specific type of health screening.	5
Outpatient – Pharmacy care initial (99605)	Used as the primary intervention (always in conjunction with <i>Descriptor – X</i> as the secondary intervention) to document an initial assessment and/or intervention for a scheduled visit with a pharmacist; Automatically includes medication history, adherence assessment, lab evaluation, chart review and patient counseling.	15
Outpatient – Pharmacy care reassess (99606)	Used as the primary intervention (always in conjunction with <i>Descriptor – X</i> as the secondary intervention) to document the reassessment and/or intervention for a scheduled visit with a pharmacist; Automatically includes medication history, adherence assessment, lab evaluation, chart review and patient counseling.	15
Patient assistance program	Helping patients or caregivers with information gathering, enrollment, or any other associated activities related to medication assistance programs	15
Patient counseling – Brief	Brief session to educate a patient (or their caregiver) on the patient's medication regimen; Is automatically part of a clinic visit and is therefore not documented separately of a clinic visit.	5
Patient counseling – Extended	Extended session to educate a patient (or their caregiver) on the patient's medication regimen; Is automatically part of a clinic visit and is therefore not documented separately of a clinic visit.	15
Patient medication history	Gathering medication history (including Rx, OTC, herbals, allergies) from patient, chart, other healthcare providers and/or family members	10
Patient referral	Used to refer a patient to another specialist or back to their PCP	10
Pharmacy residency associated activities	Performance or involvement in activities related to pharmacy residents	15
Poison information	Provide toxicology/poisoning information	10
POM - Patient's own medication evaluation	Identify and validate a patient's own medication to be administered as an inpatient	10
Post-PCI medication teaching (HSV only)	Counsel patients who have had a coronary stent placed on post-PCI medications prior to hospital discharge (Huntsville Hospital only)	25
Preceptor - X	Only available as a secondary intervention; Students should select their preceptor(s) for the activity being documented	0
Renal dose evaluation	Evaluation of dose(s) for a patient with decreased renal function and recommending or initiating changes in drugs or doses; Automatically includes chart review and lab evaluation.	15
Research study recruitment/follow up	An appointment for enrollment or follow up in a research study; Activities may include informed consent, discussion of design, data collection, responding to questions, etc.	15
Therapeutic duplication avoided	Prevent prescribing of two medications for the same indication when not needed	10
Therapeutic interchange done	Convert a patient from non-formulary to formulary agent based on approved interchange or by calling prescriber for verbal order	15
Therapeutic interchange recommended	Recommend a formulary alternative to prescriber ordering non-formulary agent however prescriber does not accept recommendation	10
TPN adjustment	Evaluating TPN and adjusting the order based on patient parameters	15
TPN evaluation	Evaluate TPN, no adjustment necessary	15
Vaccine recommended	Recommending a vaccine be administered to a patient	10

