

Presenter's Guide

Alaska

Medication Education



meded.alaska.gov

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Presenter's Guide

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Introduction for presenters

Welcome to your guide to presenting “Alaska Med Ed: Medication Education for Alaskans,” developed by the Alaska Department of Health & Social Services.

Who can present this class?

This class can be presented by anyone who wants to help older adults manage their medicines. You do not need to have special medical knowledge. **You are not expected to answer questions about medicines.**

Instead, you will share the main Alaska Medication Education messages:

- 1) taking medicine correctly is extremely important, and so is
- 2) being an active partner with our health care team.

If participants have medical questions, simply point them to their doctors, pharmacists or other health care providers. You could also invite a pharmacist as a guest speaker; more on that later.

What’s in this guide?

This guide contains information on leading a 1- to 1½-hour program on medication management.

The materials include a DVD that contains all of the Medication Education class materials and brief video clips of Alaskans sharing their strategies for success. These are all on the Alaska Medication Education website, too: MedEd.Alaska.gov.

We may also be able to send you magnifiers to read labels, wallet cards for listing medications, and pill dispenser boxes. Please contact us to see what we have available: email AKMedEd@alaska.gov or call 907-465-1605.

Why offer this class?

Most Americans report they don’t take their medications as directed. This causes many serious problems.

Not taking medication correctly can lead to

- getting sicker and needing expensive care.
- lower quality of life — not being able to do things you enjoy, or even take care of yourself.
- death.

Many older Alaskans take several medications. When people take more than one medication, research shows they are much more likely to take their medicines incorrectly or have problems with their medicines.

Another cause of problems is that many people feel that doctors or other health care providers are in charge of our health. However, we often see many providers for brief amounts of time, and we get our medicines from different places.

This increases the chance of mistakes. Our providers may not have the information that they need – that we have – to make the best recommendations possible.

What are the Alaska Med Ed learning goals?

At the end of this session, participants will:

1. know potential causes of medicine mistakes and ways to prevent them;
2. know why they need to be an active partner with their health care team;
3. make a personal medication list and know how to use it to prevent medicine mistakes;
4. know important questions that they need to ask about their medicines;
5. be able to read prescription and over-the-counter medicine labels.

Using the guide

To lead the class, you can read right from the guide or you can say the same thing in your own words.

The DIRECTIONS for you are in CAPITAL LETTERS. These tell you what to do: when to give out handouts, how to explain activities to participants, and what to ask participants to do.

Don't read the DIRECTIONS aloud – they are just for you.

Do read the regular text aloud (or use your own words).

There is also a note that tells you about how much time you'll need for each part of the program.

What you will need to provide for the program

- Participants. You might call whoever you'd like to invite, or put up an invitation (in the senior center, church, etc.). We've included a sample you can use. You can find it after the handouts.
- Somewhere to hold the program. This space should be big enough for participants to move around to work together as pairs or small groups. It should be private enough that people can talk without disturbing others and so that they can hear easily.
- A time that works for everyone.
- Everyone's contact information so you can reschedule if something comes up.
- Something big to write on that everyone can see, like a white board or big pad of paper on an easel, would be helpful.
- A table or desks for participants so they can fill out handouts that you give them.

Getting ready

1. Review the instructions, the scripts and the handouts a week or two ahead of time so you have time to contact us if you have questions. You can send an email to AKMedEd@alaska.gov or call 907-465-1605 or 907-269-8041.
Make sure you are comfortable with the words used and understand the directions you will give.
2. Practice speaking slowly and clearly: it's easy to speed up if we are nervous.
3. Print or copy handouts and activity worksheets for everyone, from the Alaska Med Ed website or from this guide.
Handout 3 has an answer sheet.
4. Set up the space so that everyone can see you, each other, and whatever you're using to share information.

5. If you will have a guest speaker, confirm that they know:
 - what you are expecting them to do (speak briefly about the importance of taking medicine as directed, and answer general questions),
 - when to come,
 - where,
 - and that they have a contact number for you.
6. Organize snacks/coffee/tea/water if you'll have these.
 - You could do this class as a 'pot luck' breakfast, lunch or dinner if participants are willing.

Tips to help the class go smoothly

- Ask participants often if everyone can see and hear. If anyone looks confused, or wants to say something, you can ask if the person has a question.
- Some sections are read aloud. Be very careful not to embarrass anyone about problems with reading in case of poor eyesight or reading skills.
 - Ask for volunteers to read aloud; if no one offers, read the section yourself.
 - Give them time to do the activities with the reading sections. This will also help the group keep up together.
 - For example, ask the group if they'd like to have you read the medicine checklist handout (slowly, one item at a time, so they can mark their answer on their checklist.)
- If participants ask questions about medications encourage them to write the question down to ask their doctor or pharmacist later.
- When you ask a question, give plenty of time for someone to answer — sometimes people need a few seconds to think of an answer. Also, you can choose someone to answer, but don't put them on the spot. You can do this by looking at a person who looks like they want to say something and asking if they'd like to give an idea. If they don't want to, move on to someone else.
- Always make sure each person who speaks knows that you have heard and appreciate what they've said. You can do this by nodding as they speak or saying thank you before going on to another person.
- If you read the scripts, look up and around often. This will help people stay interested.
- There are many questions in the class. Do ask them, and encourage sharing. This helps keep participants engaged and interested, and helps them personalize the information.
- If you make a mistake, such as mixing up where you are in the program or if you didn't explain a direction clearly, just say so. You don't need to be embarrassed or apologize much. You can say you're glad you are among friends!, make the correction and go on.
- It's common for someone to talk too often or too long. You can say, "You've got so many good ideas... and we need to move on so we can cover all the material." Smile as you say this!
Or, "I want to make sure we get to hear from everyone... How about..." and indicate someone else.
Or, "I'd love to hear more and we're short of time just now... can we talk more after the program?"
If you know someone is very talkative, you can also ask for the person's help before the program. Explain that you need to help everyone to talk... even quiet participants. What

does he or she suggest? Then the person is your partner in this and it's easier to remind him or her during the program.

- Sometimes people start talking among themselves when you are talking or giving directions. This can make it hard for others to hear or it can distract them.
- You can stop and say 'I'm glad this is bringing up so many ideas, can we save those for now and make sure we can all hear what's happening next?' (Smile.)
- Ask everyone to stand up and stretch for a minute after about 30-45 minutes — or whenever the participants look as if they need this. If standing is a problem, a sitting stretch is fine.

Options for expanding the program

Having a guest speaker

Invite a pharmacist to come share some information and answer a few questions.

Or perhaps a pharmacist would be willing to do a 'brown bag' medication review for your participants another time.

Allow about 30-40 minutes. Because that will make the class about two hours long, you might want to offer the class in two sessions, or plan a 15-minute break in the middle.

You may have the best luck if you ask a pharmacist in person, but we've also included a letter you could give the person you'd like to ask. You can find it after the handouts.

If you don't know a pharmacist personally who you would like to ask, you can call the Alaska Pharmacists Association, and they may be able to find someone for you. That phone number is 907-563-8880.

Alaska Med Ed website

If you have a computer or access to a computer lab, you can incorporate the Alaska Med Ed website, if you like. It is designed to be a companion to this class, and the class materials are available on the site. Handout 6 gives information about this resource and how to use it.

The website has videos of some Alaskans' personal stories, how to read a label and other information, and links to programs that can help pay for prescriptions. It also has a checklist that is a handout in the class, and the class materials themselves.

If you are going to use a computer lab to give the class, you could also

- ask permission to post a flier about the site near the computers, and
- make a shortcut to the Alaska Med Ed website on the computers.

If you don't have access to computers, you can encourage people to visit the site later on their own. They can look over the class materials online anytime they'd like a reminder.

And, of course, the videos and other materials are on the DVD that came with this guide.

Optional

We have also included:

- an evaluation form, if you or your organization is interested in getting feedback.
- a sample letter to invite a local pharmacist or other health care provider who writes prescriptions to come speak and answer questions.
This can help participants become more comfortable talking to health professionals about their prescriptions.
- a certificate of completion you can fill in and give to participants at the end of class, or mail to them later.

The Alaska Med Ed class

1. Welcome and introductions [About 10 minutes]

GREET PARTICIPANTS

Welcome to this class on getting the best out of our medicine. It is designed to help older Alaskans make sure we are able to use medicines in the best way to maintain or improve our health and keep our independence.

EXPLAIN

This class will not teach any technical medical information or give personal medical advice... but by the end of the class you will know:

- the main problems caused by medicine mistakes, and
- how to prevent those problems by working with your health care team.

MENTION GUEST SPEAKER IF YOU HAVE ONE

At the end of the class, we will have a visiting pharmacist.

The pharmacist can't answer personal medicine questions, but we can get more in-depth answers to questions that may come up as we talk.

This class will be about an hour and a half. (NOTE: or two hours if you have a guest speaker)

Before we start, let's get some housekeeping out of the way.

We have a lot to cover, so we won't take a formal break.

Do feel free to get up anytime, though.

The bathrooms are ...

(If you have them, point out drinks, snacks)

If you have a cell phone, please turn it off now. If you're expecting something urgent, please turn it to silent/vibrate and leave the room if you need to answer it.

OK?

Let's start by introducing ourselves:

My name is ...

I got interested in this class because... **TELL SOME PERSONAL EXPERIENCE OR CONCERN ABOUT MEDICATION**

Could each of you briefly introduce yourself and tell one reason why you came today?

INDICATE SOMEONE TO START

ACKNOWLEDGE EACH ANSWER

WHEN EVERYONE'S FINISHED: Thank you. This is going to be a very good group.

Let's get started

How many of us take 3 or more medicines? DEMONSTRATE BY HOLDING UP YOUR HAND

How many are helping someone else take medicines? HOLD UP YOUR HAND,

ACKNOWLEDGE RESPONSES

It looks as if everyone here is an expert in the challenges of taking medicines and getting those medicines right.

2. Mrs. Nelson's story [About 7 minutes]

I want to read you a story about a woman, maybe a lot like ourselves, who faced challenges in taking medicines.

As you listen carefully to her story, try to notice when you hear something that could cause a problem with her medicines.

We'll talk about these later.

START STORY

Mrs. Nelson is 72 years old. She is a widow and lives alone, but both her daughter and son come by and call often.

Mrs. Nelson has more than one chronic condition and she manages her own medicines.

She is responsible for getting her medicines from a pharmacy and remembering to take them in the right way every day.

She does the best she can in all of this.

ASK: Can everyone hear me?

Mrs. Nelson has been taking the same medications with no changes for around three years.

She hasn't had any big problems she's noticed, even with the blood thinner.

PAUSE

One day, Mrs. Nelson heard about an herbal supplement that she thought she might like to try.

It was supposed to prevent dementia or Alzheimer's. You may have heard of it: it's called ginkgo biloba.

PAUSE TO SEE IF ANY OF THE GROUP HAS HEARD OF THIS.

Mrs. Nelson bought it in the supermarket and started taking it every day. Why not? It was a natural remedy and all of us want to avoid problems with our memories.

A few weeks later, Mrs. Nelson was at her regular doctor's appointment. She had several bruises on her arms and legs. Dr. Gonzales noticed them and asked about them.

Mrs. Nelson said she had been feeling a bit dizzy and had stumbled against the furniture at home. She hadn't hit very hard and didn't understand why those bruises had gotten so big.

Dr. Gonzales was concerned and asked Mrs. Nelson more questions about this. Had she been taking her blood thinner correctly?

COMMENT: If anyone here takes blood thinners, you know how hard it can be to get just right.

VISUALLY CHECK WITH THE GROUP TO SEE IF THERE IS ANY AGREEMENT WITH THIS.

Mrs. Nelson said yes, she was very careful about this. Then she told the doctor that sometimes her heart seemed unsteady — and maybe that was making her dizzy.

Dr. Gonzales decided to order some blood tests. Then he decided to change the amount of blood thinner Mrs. Nelson was taking because of the bruises and her blood test results.

He also listened to her heart and ordered an electrocardiogram (a test to see how her heart was beating).

Mrs. Nelson was right, her heart was beating unsteadily.

Dr. Gonzales decided to prescribe a medicine to help with this problem. He wrote a prescription for the heart medicine and also one for the lower dose of blood thinner.

After her appointment, Mrs. Nelson went to a pharmacy to get the two new medicines. She also got a refill of another medicine.

The pharmacist at Sourdough Pharmacy prepared the medicines and gave them to her in a bag.

Mrs. Nelson took them home and started to take them.

The new heart medicine was very expensive, so Mrs. Nelson decided to take only one dose a day, instead of two. This would make her medicine last longer.

PAUSE

After a few days, Mrs. Nelson didn't feel her heart was getting any better. She made an appointment to see her heart specialist, Dr. Grant.

She told Dr. Grant about the problems she'd been having with her heart.

Dr. Grant examined her and decided Mrs. Nelson needed something stronger for her heart so she prescribed a new medicine for her.

Mrs. Nelson went to another pharmacy, Arctic Meds, and filled this prescription and started taking it the next morning.

She also continued to take the heart medicine Dr. Gonzales had prescribed. She didn't want to waste it because it had been very expensive.

Mrs. Nelson now had so many medicines that it was hard for her to remember when and how to take them.

ASK: What is she taking?

ACKNOWLEDGE ANSWERS AND ADD ANY OF THESE THAT WERE MISSED:

- 2 heart medicines
- 1 blood thinner
- ginkgo biloba
- and the other one she got a refill for... we don't know what it was.

Her confusion didn't help. Sometimes she forgot to take a medicine, so she took a double dose when she did remember.

Sometimes she wasn't sure if she'd taken a medicine or not already. She wasn't sure what to do, but she didn't want to tell anyone.

ASK: why do you think she felt this way?

LISTEN TO AND ACKNOWLEDGE IDEAS.

POSSIBLE ANSWERS (OFFER IF NO ONE RESPONDS): She's embarrassed, she's afraid her family will think she isn't able to take care of herself anymore...

After a few days, Mrs. Nelson was feeling even dizzier and she was feeling very confused and forgetful.

This made her even more worried about the possibility of Alzheimer's, so she started taking more of the ginkgo biloba.

PAUSE

Then Mrs. Nelson's son Jason came to visit. Mrs. Nelson stood up to go make tea. She was suddenly very weak and fell down.

She hit her face and got a nosebleed that they couldn't stop. It was very scary.

Jason took her to the emergency room. Mrs. Nelson was admitted to the hospital.

3. Medicine mistakes [About 10 minutes]

Let's hear what happened next.

After days in the hospital and lots of tests, the doctors finally discovered that all of Mrs. Nelson's new problems were caused by **medicine mistakes**.

ASK: So, what is a 'medicine mistake'? Any ideas?

ALLOW FOR A FEW ANSWERS. THANK THE RESPONDERS.

CONTINUE:

A medicine mistake is **"any mistake that happens in the process of using medicines."**

These mistakes may cause serious harm, or they may not.

Let's think back over the medicine mistakes we noticed – or didn't notice.

The medicine mistakes that Mrs. Nelson experienced were:

1. The ginkgo biloba interacted with her blood thinners, making them have a stronger effect on her.

ASK: What others did you notice?

ALLOW FOR ANSWERS; ADD ANY THAT WERE MISSED.

2. She kept taking the first heart medicine along with the second.
3. Sometimes she forgot doses, sometimes she doubled up, and she only took half the dose of her first heart medicine.

ADD: Here's one you couldn't have known from the story

4. The pharmacy accidentally gave her the wrong medicine. The names of the two medicines sounded very much alike and it was a little hard to read the doctor's handwriting.

This does happen.

So what problems did Mrs. Nelson have because of these medicine mistakes?

- the ginkgo biloba and heart medicines combination caused bleeding and bruising, her unsteady heart and dizziness and confusion;
- The incorrect medicine from the pharmacy mix up also caused some heart and confusion problems;

and then of course she went through the

- extra doctor's visits,
- paying for more medicine,
- a trip to the emergency room,
- being in the hospital, and
- all the tests.

Even with Medicare, this was expensive — and caused a lot of worry and stress.

And it was all preventable.

PAUSE

Many of us feel that because doctors or other health care providers are the experts, they are in charge of our health.

They tell us what we should do and we are responsible for listening to them.

However...we may

- see more than one health care provider

CHECK WITH GROUP – Anyone see more than one provider?

- often only for short amounts of time

ASK: How much time do you usually spend?

- and we may get our medicines from different places.

CHECK WITH GROUP, ASK:

Anyone get medicines from more than one place? How about things like headache or cold medicines?

ACKNOWLEDGE ANY RESPONSES

Let's look at Mrs. Nelson's health care team.

DISTRIBUTE **Handout 1: Mrs. Nelson's care team**

HOLD IT UP.

In the middle, we see Mrs. Nelson — and there's the ginkgo biloba she bought for herself.

Around her we see some of the other partners on her health care team: both of her doctors who prescribed medicine for her and both of the pharmacists who filled the prescriptions.

Look through the questions below the pictures.

ALLOW A MINUTE – MAYBE READ THEM OUT LOUD

ALLOW ANSWERS, CONFIRM:

The answer to all the questions is Mrs. Nelson.

- She is the only one who knows everything she is taking
- She is the **only** person in the team who knows what problems she has buying and taking her medicines.
- Her doctors and pharmacists can't prevent mistakes and make sure she gets the right medicines without her as an active part of the team.

(The cartoon is just for fun, but it does show a near miss on a medicine mistake.)

So what were some of the things that Mrs. Nelson did that her health care providers would have wanted to know?

ACCEPT A FEW ANSWERS, ACKNOWLEDGE;

ADD ANY THEY MISSED:

1. She didn't ask a doctor before taking the ginkgo biloba, or tell her doctors or pharmacists that she had started taking it.
2. She didn't tell her doctor she only took half of her first heart medicine (one dose instead of two) because it was expensive.
3. She kept taking the first heart medicine after she was prescribed a second one. (Her heart specialist didn't know she was already taking a heart medicine.)
4. She didn't tell her doctor or pharmacist that she was having trouble remembering when to take her medicines.
5. She didn't tell them that sometimes she took double doses, sometimes she missed doses.
6. She didn't tell her doctor or pharmacist it was hard for her to pay for some of her medicines.

So her health care providers didn't really have the information they needed to know to make sure Mrs. Nelson was getting what she needed.

How realistic is Mrs. Nelson's story, really?

Well, Mrs. Nelson isn't the only one who makes medicine mistakes!

Nearly three out of every four of us– that's nearly 75 percent of all Americans – don't always take their medicines as directed.

A survey found that these problems happened for Americans of all ages, with all different kinds of health issues.

And it's not just the people taking medicines or their caregivers who make mistakes... as we heard in Mrs. Nelson's story, professionals occasionally make mistakes too.

This might be:

- health care providers,
- nurses in hospitals, or
- pharmacists.

ASK: How common do you think medicine mistakes are? How serious do you think they are?

ACCEPT A FEW COMMENTS, ACKNOWLEDGE.

Medicine mistakes:

- hurt **1 ½ million people** every year,
- cause **1 in 3** hospitalizations
- and they cause nearly **125,000 deaths** each year.

So the answer is, very serious

ASK: Have any of you ever experienced a medicine mistake?

DEMONSTRATE BY RAISING A HAND

ALLOW ANSWERS, ACKNOWLEDGE ANSWERS

The good news is that we can prevent medicine mistakes by:

- ✓ learning to manage our medicines and
- ✓ being an active partner with our health care team.

We're going to learn how to do both, with the help of some useful tools.

4. Managing medicines [About 25 minutes]

When we talk about 'managing medicines,' we mean everything we do — in partnership with our health care providers and our pharmacist — to make sure we:

- get the right medicines, and
- take them
 - ✓ at the right time,
 - ✓ in the right amount,
 - ✓ in the right way.

The first step to avoid medicine mistakes is to spot them — like we did in Mrs. Nelson's story. Let's look at a checklist to see what we're doing right and where we might improve.

DISTRIBUTE Handout 2: Medicine checklist

This checklist can help us spot problems we have with taking medicines that can lead to mistakes. You don't need to put your name on this — it's just for you to share with your health care provider later if you're having any problems with taking your medicines. There are no right or wrong answers.

EXPLAIN HOW TO USE THE CHECKLIST:

Each item on the list is a common problem many older adults have with managing their medicines. Choose an answer for each one that best describes what is true for you.

**** NOTE: SOME PARTICIPANTS
MAY HAVE TROUBLE READING THE CHECKLIST.
BE VERY CAREFUL NOT TO EMBARRASS ANYONE. ****

ASK THE GROUP IF THEY'D LIKE TO HAVE YOU READ THE LIST.

IF SO, READ EACH STATEMENT SLOWLY;

ALLOW TIME TO CHOOSE AN ANSWER FOR EACH.

AT THE END ASK:

How many of us have experienced at least one or two of the medicine management problems on the list?

DEMONSTRATE BY RAISING YOUR HAND

HOLD UP CHECKLIST

Now that we have some ideas about problems we may be having, let's talk about how we can avoid or solve one or two of these common problems.

Let's look at #2, "I know why I am taking each of my medicines."

If you answered something other than always, how could you go about changing that? How could you make sure you know?

GATHER A FEW IDEAS, ACKNOWLEDGE.

GIVE THESE SUGGESTIONS IF THEY HAVEN'T BEEN MENTIONED:

- I could read the label on my prescription bottle – sometimes that information is on there.
- I could ask my pharmacist.
- I could ask my health care provider (either when it's being prescribed in the first place, or later, if I forget.)
- I could make a note of it on a personal medication list when I first get a new prescription, and then I can look back at my notes later.

END THAT DISCUSSION BY SAYING

Thank you. Good ideas.

IF YOU HAVE TIME:

Let's try another one.

Let's look at #11, "I can afford all my medicines."

If this isn't true for someone, how could that person go about changing that?

- I could ask my pharmacist if there is a generic version of the drug that is cheaper.
- I could ask my health care provider the cost when it's first being prescribed, and speak up if it is too expensive.
- If there is not a cheaper version, or if the cheapest version is too expensive, I can ask my provider and pharmacist if they know of payment assistance programs.
- I can look at the Alaska Med Ed website "Money & Meds" page for suggestions on ways to cut costs that I can then discuss with my provider or pharmacist. We'll be getting a handout about this later in the class.
- If I get Medicare I can call Alaska's Medicare Information Office and ask about medicine payment assistance programs. The United Way's 2-1-1 number or the nearest Alaska Aging & Disability Resource Center are other places I can try. I can find the nearest resource center by calling 1-877-6AK-ADRC (1-877-625-2372) toll-free.

EXPLAIN: We don't have time to go over more problems, but as you can see, if you answered anything besides "always" to one of the questions, it's worth talking to your health care provider about it. Together, you can find an answer that can prevent serious problems.

IF A GUEST SPEAKER IS COMING, YOU CAN SAY: *Remember, we'll also be having our pharmacist visitor coming — so if you think of a problem or question, make a note of these for him/her.*

Our next tool is an up-to-date medication list. First let's practice reading labels. To make a list, we need to be able to read medicine labels. So let's do that first.

DISTRIBUTE Handout 3: Reading labels, making a medication list

EXPLAIN: These handouts are to give us practice with two things:

1. Reading a prescription or over-the-counter label so we know what to write on our list.
2. Filling out a medicine list — in case someone hasn't made one before.

HOLD UP HANDOUTS AS YOU DESCRIBE THEM.

ALLOW TIME FOR PARTICIPANTS TO LOOK AT EACH ONE.

The handouts show

- a prescription and info on how to read it;
- the label from an over-the-counter, or OTC, medicine, and information on how to read it;
- and a blank medicine list.

Take a minute to look these over.

We're going to make a medicine list for the person whose name on the prescription.

ASK: Her name? ANSWER: Sandra Birdsnest

You won't need all of the information on each label for the medicine list. And sometimes information you need isn't on the label or prescription.

ASK: How do you want to work? In groups or all together?

IF PARTICIPANTS WORK IN GROUPS, ALLOW 5 MINUTES TO PUT THE LABEL INFORMATION IN THE MEDICINE LIST.

IF PARTICIPANTS WORK ALL TOGETHER, READ OFF EACH ITEM AND A VOLUNTEER WILL GIVE YOU THE INFORMATION:

Let's start with the name of the person... ALLOW PARTICIPANTS TO WRITE THIS IN.

Now the name of the medicine...

You'll notice there are two names on Sandra's prescription... Anyone know why that is and what the different names tell us?

ALLOW FOR ANSWERS

EXPLAIN OR CONFIRM;

The first name (Albuterol) is the generic and the second name (Proventil) is the proprietary or brand name.

Can anyone explain the difference?

ALLOW FOR AND CONFIRM RESPONSES.

The brand name is the name you'll see advertised. It's a special name given by the company that has the patent for this medicine.

This name may or may not have anything to do with what's in the medicine or what it is for. As long as the company has the patent (or license) they are the only ones who can legally make or sell the medicine.

The generic name is the chemical name of a drug — it's the 'active' ingredient in the medicine that makes it work. Generic medicines can be made by more than one company — after the patent or license has expired.

The active ingredient is the same in both the brand-name and the generic version of a medicine. There are other ingredients that may be different. Generic versions of medicines cost far less than the brand-name versions.

Now let's focus on filling in the other information for the medicine.

ASK: What else do we need to know to fill in each part of Sandra's medicine list?

The dose, which is the amount of active ingredient that is in each pill or puff or teaspoon of a medicine.

Answer: Ø.83 mg/ml

How should she take the medicine, and how often?

Answer: 2 puffs, 2 times a day.

ASK: The prescription may not tell us the reason for taking this medicine. How would Sandra know what the medicine is for?

Answer: She would ask the doctor who prescribed the medicine.

When did she start taking it?

Answer: 05/09/2012

And who prescribed it for her?

Answer: Dr. Hency

And what is the prescription number?

Answer: Rx 25550-6.

This is the number we are asked when we want a refill or to know more about the prescription.

WHEN THE LIST IS COMPLETE, HAND OUT ANSWER SHEET.

Here's a list that shows the information we want to be sure we've gotten for both the prescription and for an OTC medicine like the one Sandra is taking. You can find the information on the label for BigPill antacid on your handout.

So... what should Sandra do if she isn't sure what to write in any of the sections?

ALLOW ANSWERS, ACKNOWLEDGE

She can ask her doctor or pharmacist.

CONFIRM ANSWERS.

REINFORCE: Asking questions is a very important medicine management tool.

DISTRIBUTE **Handout 4: Personal Medicine List**

(and Alaska Med Ed medicine list wallet cards, if you have some)

Here are some different examples of personal medicine lists.

ASK Do any of you keep something like this?

ACCEPT, ACKNOWLEDGE ANSWERS

The lists keep track of mostly the same things, with a few differences:

- the name of the medicine,
- how much is in one dose (how strong it is),
- how much to take,
- how to take it,
- how many times each day to take it,
- which doctor prescribed it, and
- the prescription number

You may want to design your own list, so it will have everything you want on it.

For example, some people like to make a note about how the medicine looks – such as ‘small round orange pill.’ This might have helped Mrs. Nelson to notice that she had been given the wrong medicine!

These lists should include everything a person might take for ‘health’:

- prescription medicines;
- natural or herbal remedies, such as ginkgo biloba
- vitamins or other supplements; *and*
- any medicine you can buy ‘over the counter.’

These are all medicines. All of them have ‘active ingredients’ that can interact with other medicines.

ASK: What does ‘over the counter mean’?

GET ONE ANSWER

ACKNOWLEDGE THE ANSWER AND CONFIRM:

Over the counter medicines are medicines that we can buy **without a doctor’s prescription**.

An example is Tylenol or cold medicine. Sometimes you’ll see this written as “OTC medicine” –OTC means over-the-counter.

We often buy them in a grocery, drug or health food store.

We need to write all of these on our list because any of them can **interact** with our other medicines.

ASK: Has your health care provider ever talked to you about medicine interaction?

ASK: What were told?

ACKNOWLEDGE ANSWERS, CONFIRM

Interaction is when one medicine changes how another one works.

An interaction can make a medicine stronger or weaker, and cause many problems.

In Mrs. Nelson’s case, ginkgo biloba interacted with her blood thinner and made it stronger so she bruised easily and got the nosebleed.

It’s important to know that **alcohol** interacts with many medicines, too.

Grapefruit juice is another example of something that can interact with some medicines.

Has anyone ever been told not to eat grapefruit or drink grapefruit juice with a medicine?

ALLOW ANSWERS, ACKNOWLEDGE; CONFIRM:

There are a lot of medicines that **interact** with grapefruit.

So we can see why natural remedies, supplements, alcohol and over-the-counter medicines are just as important for your doctors and pharmacists to know about as the prescription medicines.

Looking at these lists, we can see that if Mrs. Nelson had kept a list and showed it to her doctors and pharmacists, they could have seen exactly what she was taking.

They could've made sure there were no interaction problems — and working together, they could have prevented the medicine mistakes that were made.

IF ANY PARTICIPANTS SAID THEY HAD A MEDICATION LIST,

ASK: Does anyone here already keep a medicine list? Has it been useful to you?

ALLOW A FEW RESPONSES; ACKNOWLEDGE; CONFIRM:

You can take this home to finish later or maybe you want to design your own. Whatever you decide, making a medicine list is worth doing.

There's another useful thing you can do. Has anyone ever taken all of their medicines along to an appointment?

ALLOW A FEW RESPONSES; ACKNOWLEDGE; CONFIRM:

If you aren't sure about something you are taking, this is a great way to make sure it's safe with your other medicines. Put everything you take: prescriptions, over the counter medicines, supplements, herbal or natural remedies into a bag and take them to your doctor's appointment.

Now we'll talk more about preventing mistakes.

5. Asking questions, getting more information [About 15 minutes]

So one thing Mrs. Nelson can do to prevent medicine mistakes is go through the Med Check list.

A second thing is to fill out a personal medicine list and take it with her to her providers.

What's a third important thing Mrs. Nelson can do? It's something very basic that we've talked about.

Anyone want to guess?

ALLOW A FEW ANSWERS

ACKNOWLEDGE; IF NEEDED, GIVE THE ANSWER:

She could speak up and ask questions.

Why is it that many of us don't always ask questions when we are seeing our health care providers?

What can stop us?

ALLOW FOR ANSWERS AND ACKNOWLEDGE THESE

COMMON ANSWERS:

We're embarrassed; we don't want to sound dumb or ignorant; we know the doctor is in a hurry and don't want to take up time.

ASK (IF NOT SUGGESTED) Has anyone just not been sure what questions to ask?

ALLOW FOR ANSWERS AND ACKNOWLEDGE

Let's look at some useful questions.

DISTRIBUTE Handout 5: Ten important questions to help you be 'medicine smart'

Let's go over a few of these...

Let's look at question 1 – Ask the name of the medicine, and whether it's the brand name or the generic...

What would we do with this info?

ALLOW FOR ONE OR TWO ANSWERS... ACKNOWLEDGE.

IF NEEDED, GIVE ANSWER:

Put it on our medicine list.

Let's look at question 2 – When we ask if there is a generic version... What are we really getting at? Remember Sandra Birdsnest's prescription?

ALLOW FOR ONE OR TWO ANSWERS... ACKNOWLEDGE.

IF NEEDED, GIVE ANSWER:

We're asking if there is a cheaper version that we could get instead.

Let's look at question 4 – is there something you shouldn't eat or drink or other medicine you shouldn't take when you take this medicine...

Can you think of any example of something that often shouldn't be taken with certain medicines?

ALLOW FOR ONE OR TWO ANSWERS... ACKNOWLEDGE.

IF NOT MENTIONED, GIVE THESE ANSWERS:

- We learned that ginkgo biloba can cause problems, right?
- And grapefruit juice can interact with some medicines, or alcohol...

So if we want to take a supplement, or if we like grapefruit juice, that might be just fine, and NOT cause problems with our medication –

We know that we need to ask so that we can manage our medicines right.

Doctor's appointments can be rushed, and we may forget to ask...

ASK: Has anyone ever forgotten to ask your doctor a question? (SMILE)

ALLOW FOR COMMENTS, ACKNOWLEDGE

To help you remember to ask these questions, take this list with you. Let your health care provider know that you know it's important for you to be able to manage your medicines and prevent mistakes.

They will appreciate that you take your health care team responsibility seriously.

(SUGGEST A STRETCH IF YOU HAVEN'T ALREADY)

This class has covered a lot of material, but you probably have more questions, or you may think of more questions later.

Remember, your health care provider and pharmacist are the best sources of answers.

Another great resource for you is the **Alaska Medication Education website**.

DISTRIBUTE **Handout 6: Alaska Medication Education resource list**

This was done for older Alaskans by the State of Alaska Division of Seniors and Disability Services, with help from state pharmacists.

Of course, again, this is NOT a substitute for talking to your health care providers, and you always want to check with your doctor before making any changes to your medicine routine.

This handout shows some of the information you can find on the site.

OPTIONAL: IF YOU HAVE A COMPUTER OR ACCESS TO A COMPUTER LAB, OFFER TO SHOW PARTICIPANTS THE ALASKA MED ED SITE AFTER THE CLASS, OR SET UP ANOTHER DAY/TIME TO DO SO.

You'll see one thing on there is the checklist we did earlier.

POINT OUT ON HANDOUT OR SITE; IT SAYS Med Check NEXT TO A CHECK BOX

If you have a friend who might like to fill it out, he or she can do it online and print it out.

The site also has some short videos of Alaskans like us, giving their strategies for managing their medicines and avoiding medicine mistakes.

POINT OUT THE PHOTOS AT THE BOTTOM MIDDLE

You just click on each picture to see and hear the video clips.

Or if you just want to read the point they make, scroll down.

There's also a message from a state pharmacist (she works at the Pioneer Homes' pharmacy) talking about why it's so important to take your medication as directed.

POINT OUT PHOTO AT RIGHT under "Get facts from the pharmacist."

Click on her picture to hear what she has to say.

6. Wrapping up [About 8 minutes]

SUMMARIZE CLASS SO FAR:

Let's quickly go over what we've learned today:

We learned about medicine mistakes –

Any suggestions of some things we learned about medicine mistakes?

ALLOW PARTICIPANT SUGGESTIONS, ACKNOWLEDGE

ADD ANY OF THE FOLLOWING THAT WERE NOT MENTIONED:

- ✓ how common they are
- ✓ some causes
- ✓ how much harm they can cause

We also learned ways to PREVENT medicine mistakes...

How?

ALLOW PARTICIPANT SUGGESTIONS

ADD ANY OF THE FOLLOWING THAT WERE NOT MENTIONED:

- ✓ being an active partner on our health care team — asking questions and offering information
- ✓ using medicine management tools and skills such as
 - a personal medicine list, and
 - the Med Check quiz we took
- ✓ reading prescriptions and labels carefully

We also learned where to find more information and resources, on the Alaska Med Ed website.

It's great to know all this, but we will need to put it into action if we are going to be a team partner and medicine manager.

Let's take a minute to write down

- WHY we want to manage our medicines,
- and one step we will take to prevent mistakes.

DISTRIBUTE **Handout 7: My plan**

GIVE PEOPLE A BRIEF MOMENT TO LOOK IT OVER –

ASK IF THE GROUP WOULD LIKE YOU TO READ IT OUT LOUD WHILE THEY MARK THEIR ANSWERS.

So on that first line, you want to think about something that is a reason to be careful with your medicines...

You can fill this in later if you can't think of something right now, or you can add more reasons later.

Then on the second line, you'll list a step you will take to manage your medicines... so that you will be able to do what you listed in the first part.

Make sure it is something practical and not too hard to do – so it's likely you will do it.

GIVE EXAMPLES: It may be something like 'I'm going to read all my medicine labels this afternoon' or 'I'm going to make myself a medicine list'.

ALLOW A FEW MINUTES FOR THIS.

COMMENT/ASK: OK, that's a great start. Would any of you like to share what you've decided?

YOU MIGHT SHARE WHAT STEP YOU CHOSE TO ENCOURAGE SHARING.

THANK EACH PERSON FOR SHARING.

THANK EVERYONE FOR COMING AND BEING A PART OF THE CLASS:

Thank you all for coming and for your contributions to the class.

In the weeks and months to come, I hope you feel confident about taking your medicines as directed.

Please share what you've learned with others, and please let them know about the Alaska Med Ed website.

OPTIONAL: HANDOUT EVALUATION

If you have time, I would greatly appreciate it if you'd fill out this evaluation.

I use it to improve how I present/ OR (my organization name) asks me to get your feedback/ OR _____ (whatever your reason/situation for requesting it.)

OPTIONAL: HAND OUT CERTIFICATE OF COMPLETION NOW OR AFTER THE GUEST SPEAKER IF YOU HAVE ONE

**OPTIONAL: If you have arranged to have a pharmacist guest speaker –
INTRODUCE THE GUEST PHARMACIST**

EXPLAIN:

Our guest will give a short presentation about what pharmacists can do to help older adults with medicines, and then take questions. We'll have about 30 minutes.

REMIND PARTICIPANTS:

Our guest cannot answer specific questions about their personal medication. You can ask questions that are useful to others in our group, though, such as:
Could you tell us about how aging changes how medicine works in the body?

ASK: Did anyone make a note of a question you wanted to ask?

IF NO ONE SPEAKS UP, HERE ARE SOME QUESTIONS YOU CAN ASK:

- Could you tell us how medicines work differently in our bodies as we get older?
- Do you have any stories about a medicine mistake that a client was making that you discovered? What happened and how it could have been prevented?

ALLOW ~ 30 MINUTES FOR THIS DISCUSSION

**AT A BREAK IN THE CONVERSATION, THANK PARTICIPANTS FOR THEIR QUESTIONS,
AND THANK THE SPEAKER FOR COMING.**

REMIND PEOPLE THAT IF THEY THINK OF OTHER QUESTIONS LATER, THEY CAN LOOK ON THE ALASKA MED ED SITE, OR ASK THEIR PROVIDER OR PHARMACIST.

IF POSSIBLE, ASK PARTICIPANTS TO SIGN A THANK YOU NOTE AFTER SPEAKER LEAVES; SEND IT LATER.

Thank you for presenting!



HANDOUTS

Handout 1: Mrs. Nelson's care team



Mrs. Nelson



Dr. Gonzales



**Sourdough
Pharmacy**



Dr. Grant



**Arctic Meds
Pharmacy**



Gingko Biloba

1. Who is the only person in this picture who knows everything Mrs. Nelson is taking?
2. Who knows that she sometimes misses medicines and then takes a double dose?
3. Who knows it is hard for her to remember how and when to take all of her medicines?
4. Who knows that sometimes she can't afford all of her medicine?



Alaska Medication Education

The following questions will help you check whether you're getting the best out of your medicines or if you could have a problem with them. Check the box that applies to you.

	Always	Most of the time	Sometimes	Never or hardly ever
1. I take each of my medicines at the right time every day.				
2. I know why I am taking each of my medicines (I know what each medicine does for my health).				
3. I know what the side effects of the medicines I take could be.				
4. I take my medicines even if I am not feeling well.				
5. I understand and easily follow the directions my health care provider or pharmacist tells me about taking my medications.				
6. The written information I get about my medicine is easy for me to read and understand.				
7. It is easy for me to open pill bottles or packages and to swallow my pills.				
8. I know if there are foods I should avoid when I'm taking one or more of my medicines.				

Handout 2-1, continued:

	Always	Most of the time	Sometimes	Never or hardly ever
9. I feel comfortable asking my health care provider to explain again when I don't understand something about my medicines.				
10. I am confident I will not become addicted to a medicine I am taking.				
11. I can afford all my medicines.				
12. My medicines are all prescribed by the same health care provider.				
13. I tell my doctor about everything I take for my health such as vitamins, herbs or natural remedies and medicine I can buy without a prescription (over-the-counter cold remedies, etc).				
14. I know what to do if I forget to take a dose of my medicine.				

If you answered “Always” or “Most of the time” to a question, you’re taking your medicine as prescribed. Keep it up!

If you answered “Sometimes” to a question, you have a challenge taking your medicine as prescribed. At your next appointment, ask your provider or pharmacist for help changing that to “Always” or “Most of the time.” Keep up the good habits you have!

If you answered “Never or hardly ever” to a question, let your provider or pharmacist know that you’re having a problem with your medication. If you don’t already have an appointment scheduled soon, you could call your provider. You may take this questionnaire with you to your appointment.

Handout 3: Reading labels, making a medicine list

This handout shows a prescription, the label from an over-the-counter (OTC) medicine and a blank medicine list. It also has an example of a prescription and OTC label with notes to help you understand the information on each one.

Read the information on the prescription and label and put the right information into the list.

- You won't need all of the information on each label for the medicine list.
- You may not find some information on the prescription or label. Plan to ask the doctor or pharmacist questions to get the answers.

Handout 3-1: Pharmacy label

	Right Price Pharmacy
	345 W. 35th St, Miami Fl. 33165 Phone (305) 249-5598
Rx 25550-6	Dr. Hency, Robert B
Sandra Birdsnest ALBUTEROL 0.83 MG/ML Equivalent to PROVENTIL 0.83 MG/ML 2 PUFFS TWICE A DAY	
QTY 3.0 05/09/112 Discard after 05/09/14 0 Refills/Dr. approval req'd/	
NEW RX	 9 781932 698183



Drug Safety: Reading Labels and Patient Information

Why Read Labels and Information Sheets?

Your prescription drug comes in a bottle or a box with a label. You also receive written information about the drug from your pharmacy. Both the label and the information sheet tell you important safety information.



How to Read a Drug Label

Pharmacy labels have a lot of information. Here are the things to look for on a drug label. Each pharmacy may put the information in a different place. To learn more, visit our free website, www.ConsumerReportsHealth.org/BestBuyDrugs.

Pharmacy name and address — CENTRAL PHARMACY
45 Main St, Anytown, US 12345

Prescription number — Rx# 231-479-161

Who the prescription is for — SMITH, JANE

Directions for taking the drug — TAKE ONE TABLET ORALLY DAILY OR EVERY SIX TO EIGHT HOURS AS NEEDED FOR SYMPTOMS.

Quantity in the container — 24

Brand name of the drug — FAZACLO

Refills left — NO REFILLS

Generic name of the drug — CLOZAPINE

Dose, or strength, of the drug — TAB 10-500MG

Expiration date of the drug — USE BEFORE 06/24/12

Safety reminders — DO NOT TAKE THIS DRUG IF YOU BECOME PREGNANT; DO NOT DRINK ALCOHOLIC BEVERAGES WHEN TAKING THIS MEDICATION; MAY CAUSE DROWSINESS OR DIZZINESS

Doctor who wrote the prescription — Dr. Jones, John C

Date the prescription was filled — DATE 06/24/10

Phone number of the pharmacy — (800) 555-5555

CAUTION FEDERAL LAW PROHIBITS TRANSFER OF THIS DRUG TO ANY PERSON OTHER THAN THE PATIENT FOR WHOM PRESCRIBED.

Drug Facts

Active ingredient (in each tablet) Chlorpheniramine maleate 2 mg	Purpose Antihistamine
--	---------------------------------

Uses temporarily relieves these symptoms due to hay fever or other upper respiratory allergies:
 ■ sneezing ■ runny nose ■ itchy, watery eyes
 ■ itchy throat

Warnings
Ask a doctor before use if you have
 ■ glaucoma
 ■ a breathing problem such as emphysema or chronic bronchitis
 ■ trouble urinating due to an enlarged prostate gland

Ask a doctor or pharmacist before use if you are taking tranquilizers or sedatives

When using this product
 ■ You may get drowsy ■ Avoid alcoholic drinks
 ■ Alcohol, sedatives, and tranquilizers may increase drowsiness
 ■ Be careful when driving a motor vehicle or operating machinery
 ■ Excitability may occur, especially in children

If pregnant or breastfeeding, ask a health professional before use.
Keep out of reach of children. In case of overdose, get medical help or contact a Poison Control Center right away.

Directions Adults and children 12 years and over	Take 2 tablets every 4 to 6 hours; not more than 12 tablets in 24 hours
Children 6 years to under 12 years	Take 1 tablet every 4 to 6 hours; not more than 6 tablets in 24 hours
Children under 6 years	Ask a doctor

Other information Store at 20-25° C (68-77° F)
 ■ Protect from excessive moisture

Inactive ingredients D&C yellow no. 10, lactose, magnesium stearate, microcrystalline cellulose, pregelatinized starch

Therapeutic substance in drug

When not to use this drug, when to stop taking it, when to see a doctor, and possible side effects

More information on how to store the drug

Product type

Symptoms or diseases the drug treats

Read carefully: how much to take, how often to take it, and when to stop taking it

Other things in the drug, such as colors or flavorings

Handout 3-4: Over-the-counter label information

BigPill

EXTRA STRENGTH

Antacid

Fast-acting Heartburn Relief

Long-lasting Antacid Barrier
Original Flavor



100 CHEWABLE TABLETS

Drug Facts	
Active ingredients (in each tablet)	Purpose
Aluminum hydroxide 160 mg.....	Antacid
Magnesium carbonate 105 mg.....	Antacid
Uses relieves	
<ul style="list-style-type: none"> • Acid indigestion * heartburn * sour stomach • Upset stomach associated with these symptoms 	
Warnings	
Ask a doctor before use if you have * kidney disease * a magnesium or sodium restricted diet	
<p>Ask a doctor before use if you are now taking a prescription drug. Antacids may interact with certain prescription drugs.</p>	
<p>When using this product do not take more than 16 tablets in a 24 hour period or use the maximum dosage for more than 2 weeks</p>	
Keep out of reach of children	
Directions	
<ul style="list-style-type: none"> • Chew 2 to 4 tablets four times a day or as directed by a doctor • Take after meals and at bedtime or as needed • For bet results follow by a half glass of water or other liquid • Do not swallow whole 	
Other information	
<ul style="list-style-type: none"> • Each tablet contains: magnesium 50 mg and sodium 32 mg • Store at 20^o-25^o C 	
Inactive ingredients alginic acid, calcium stearate, flavor, mannitol,	
<p>Distributed by Redrobin & Co. Paris, Texas 22904 Health</p>	  <p>9 0123456789</p>

Handout 3- 5: Reading labels, making a medicine list

Name:						
Name of medicine (Brand and generic name)	Dose	Taking the medicine: When? How?	Reason for taking?	Date started	Date stopped	Prescribed by...

Handout 3-6: Reading labels, making a medicine list
ANSWER SHEET

Name: Sandra Birdsneest						
Medicine (Brand and generic name)	Dose	Taking the medicine: When? How?	Reason for taking?	Date started	Date stopped	Prescribed by...
Abuterol: generic Proventil: brand name	.83 Mg/ML	2 puffs 2 times each day	Breathing problems (Sandra would need to ask her doctor or pharmacist, because the prescription doesn't say)	05/09/12	Still taking	Dr. Hency 305-249- 5598 (It's helpful to have a contact phone on this list)
Big Pill antacid	160 mg aluminum hydroxide 105 mg magnesium carbonate	Chew 2 to 4 tablets four times each day after meals and at bedtime. Do not swallow whole.	For heartburn and stomach burning	09/04/12	Still taking	OTC – Dr. said it's OK

Handout 4: Personal medicine list (Examples and instructions, next 4 pages)

Always keep this form with you. Update your list after every doctor and hospital visit.

- List medicines here.
- Keep it up to date.
- Carry it with you.
- Share with your doctor/pharmacist.
- Always take your medicine as directed.

For helpful tips and resources, visit ScriptYourFuture.org today.



QUESTIONS to ask my doctor/pharmacist

1. What's my medicine called and what does it do?
2. How and when should I take it? And for how long?
3. What if I miss a dose?
4. Are there any side effects?
5. Is it safe to take it with other medicine or vitamins?
6. Can I stop taking it if I feel better?

I WILL

SIGN HERE

TAKE MY MEDS.

Front side

MY MEDICINES

including prescriptions, over-the-counter medicines, vitamins and supplements

Alaska Medication Education
meded.alaska.gov

MEDICINE	WHY I TAKE IT	START DATE	REFILL DATE	HOW MUCH DO I TAKE?	WHEN DO I TAKE IT?
Example: Naproxen	Arthritis	6/1/11	7/1/11	1 tablet, 250mg	twice a day

Back side

Using your personal medicine list

- 1. Always keep this form with you.** Keep it in your wallet or purse. Give a copy to your emergency contact, another family member, or friend. Take it with you to the pharmacy when you pick up prescriptions.
- 2. Doctor and hospital visits.** Take this form to all doctor and hospital visits and when you go for appointments and tests.
- 3. Allergies.** List any reaction you have experienced from medicines that required you to stop taking that medicine such as allergies or bad side effects. Also include any allergy to dye, food, or insects, etc. Please write what happens to you if you are exposed to these things.
- 4. Doctor/dentist/other prescriber.** List their names and a phone number in case they need to be contacted about your medicines.
- 5. Pharmacy.** List the pharmacy name, phone number, and location in case there are questions about your medicines.
- 6. List of medicines.** Write the brand and generic name of each medicine, your dose, how often and how (by mouth, under your tongue, injection, etc.) you take it. List the reason you take the medicine. Note the date you started taking it. If you stop taking a medicine, draw a line through it and list the date you stopped taking it. List all tablets, patches, drops, ointments, injections, etc. Include prescription, over-the-counter, herbal, vitamin, and diet supplement products. Also list any medicine you take only on occasion (like Viagra, nitroglycerin). If you need extra pages, write your name on each page.
- 7. Update the list.** Update your list after every doctor visit when the dose of a medicine is changed, a new medicine is started, or an old one is stopped. Ask your nurse, pharmacist or doctor to help you update your list when you leave the hospital. You need to know what medicines to take and what to stop taking. Bring the updated form to any and all follow up appointments at your doctor's office, hospital, and pharmacy. Once a year ask your community pharmacist to review and update the list with you.

LIST OF CURRENT MEDICINES: List all tablets, patches, inhalers, drops, liquids, ointments, injections, etc. Include prescription, over-the-counter, herbal, vitamin, and diet supplement products. Also list any medicine you take only on occasion (like Viagra, nitroglycerin).

Name		Date of Birth	Sex (select one)	Height	Weight
			Male Female		
Address		Emergency Contact			
		Phone Number(s)		Name:	
		Home:		Relation:	
		Work:		Phone:	
		Mobile:			
Allergies and Reactions (please describe what happened when you took the medicine)					
Doctor / Dentist / Other Prescriber's Name		Phone Number		Type of Practitioner / Reason for Seeing	
Pharmacy Name		Phone Number		Location	
Vaccines (Date of Last Dose)					
Flu:					
Tetanus, diphtheria, pertussis:					
Pneumonia:					
Zoster (Shingles):					
Hepatitis B:					
Other:					
Additional Information / Comments					

Handout 5: Ten important questions to help you be ‘medicine smart’

Here are 10 important questions from the National Council on Patient Information and Education to help you get the information you need to use medicines properly. Be sure to ask your doctor, physician’s assistant, nurse practitioner and pharmacist these questions whenever a medicine is prescribed for you.

1. What is the name of the medicine and what is it for? Is this the brand name or the generic name?
2. Is a generic version of this medicine available?
3. How and when do I take it – and for how long?
4. What foods, drinks, other medicines, dietary supplements or activities should I avoid while taking this medicine?
5. When should I expect the medicine to begin to work, and how will I know if it is working? Are there any tests required with this medicine (for example, to check liver or kidney function)?
6. Are there any side effects, what are they, and what do I do if they occur?
7. Will this medicine work safely with the other prescription and nonprescription medicines I am taking? Will it work safely with any dietary/herbal supplements I am taking?
8. Do I need to get a refill? When?
9. Do I need a new prescription to get a refill?
10. How should I store this medicine?

You may also want to ask: Is there information available about the medicine in large print, or a language other than English?

Brought to you by the National Council on Patient Information and Education

www.talkaboutrx.org ● **www.bemedwise.org** ● **www.mustforseniors.org**

National Council on Patient Information and Education, Bethesda, MD



Handout 6: Resource list

Alaska Medication Education



There's more to say about managing medicine than we can cover in one class.

You can find more helpful information (and this class) at the Alaska Medication Education website made by the Alaska Department of Health and Social Services, Division of Senior and Disabilities Services.

Here is the link: <http://dhss.alaska.gov/dsds/MedEd>

Or you can find the website by using Google or another search engine.

Put in the words 'Alaska Med Ed' and push the 'enter' key. Click on 'Alaska Medication Education' from the list that comes up. The site looks like this:



- **To get to a page:** Click on any of the buttons on the left side.
- **To see and hear videos:** Click on any of the pictures
- **To go to the checklist to help you identify medicine problems that you're having that might cause harm:** Click on the "Med Check" picture.
- **To get back to this main page:** Click on the  **Home** button on each page.
- **To go to other pages from any page:** Click on any of the items under "Go to..."
- **To get back to the page you were on before:** Click on the "back" arrow at the top left of your browser.
- Click on  **Contact Us** to tell us what you think and to ask questions.

Handout 7: My medicine management plan

1. What is something you would very much like to do or continue to do sometime in the future?

Examples:

- I plan to continue to enjoy getting together with friends.
- I plan to help care for my grandchildren when they come along.
- I plan to go to my 60th high school reunion.

2. Choose something that is important to you and write it in the 'plan' space below:

I plan to _____

(Here's an extra line in case you think of something else later you'd like to add.)

3. Now, what is a step you will take to manage your medicines so that you will be able to do what you plan?

Examples:

- I will make sure I check with my doctor or pharmacist before I take any OTC medicine or herbal remedy or supplement to make sure it is safe with the other medicines I'm taking.
- I will make a medicine list and take it to all my appointments.
- I will ask questions until I am sure I understand what I need to know about a medicine.

4. Now put them together:

I will _____

So that I can _____

Signed _____ **Date:** _____

Alaska
Medication Education



Name

Has successfully completed the
Alaska Medication Education Program

On _____
Date

and is committed to working
with his/her
health care provider and pharmacist
to safely and successfully
manage personal medications.

Letter of invitation to be a guest speaker at an Alaska Med Ed class

Date:

Hello,

I'll be leading a roughly one-hour workshop to promote medication adherence for older Alaskans, and I'd like to invite you to come at the end as a guest speaker for about half an hour.

I hope you'll be willing to briefly reinforce that it's important to 1) take medicines as directed, 2) keep a list of all medicines and supplements, and 3) be an active member of the health care team. Then I hope you might answer a few general questions that participants may have.

Hopefully if the participants can practice asking questions, they will feel more comfortable asking their pharmacists and health care providers about their medications in the future.

The workshop was designed by the Alaska Division of Senior and Disabilities Services, Department of Health and Social Services, and reviewed by a state pharmacist. You can find the materials I'll be presenting on the companion website, Alaska Medication Education, at **MedEd.alaska.gov**.

The workshop time will be _____

and the location will be _____

You can reach me by phone: _____

or email: _____

Thank you for your consideration,

Alaska Medication Education



**Most Americans —75%! —
don't take their medicine correctly.**

**(This can mean hospital visits, health care bills,
and some very serious health problems.)**

Why? What's so hard?

Come learn more & get tips to help you stay healthy!

Where: _____

When: _____

Contact: _____

It's free!

**And the information is from the
Alaska Department of Health & Social Services,
so it's independent.**



Alaska Medication Education
Alaska Department of Health & Social Services

Governor, Sean Parnell
Commissioner, William J. Streur



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