

# A PHARMACIST'S GUIDE TO PANDEMIC PREPAREDNESS

Developed By:



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## **A Pharmacist's Guide to Pandemic Preparedness**

This document, developed collectively by the American Pharmacists Association (APhA), American Society of Health System Pharmacists (ASHP), and National Association of Chain Drug Stores (NACDS) Foundation, is devoted to providing pharmacists with key elements to consider in preparing for pandemic influenza. While it is impossible to prevent the occurrence of a pandemic, proper planning by the public, health care providers, government, and other stakeholders can significantly reduce its impact.

The foundation of response to a pandemic is a basic understanding of emergency preparedness plans and response systems, medication and health care delivery systems, access issues and the roles of pharmacists and support staff. A pandemic can affect public health for a year or more, and any preparedness and / or response plans should take this into account.

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*These materials do not represent a standard of care or standard business practices for pharmacies. Each pharmacy should address pandemic preparedness based upon its own unique needs and circumstances, and modify examples as appropriate.*

*Nothing contained herein shall be construed as an express or implicit invitation to engage in any illegal or anticompetitive activity. Nothing contained herein shall, or should be, construed as an endorsement of any particular pandemic preparedness resource or plan.*

**Local/Community Involvement:** Unlike many other emergencies, a pandemic will not be localized to a single region of the country given the mobility of individuals, carriers of the virus, and transmission through respiratory droplets. Because of this, careful and considerate local/community planning is essential to a successful response. Pharmacies are an important part of any local response and are encouraged to engage in the following before and during a pandemic:

- Contact their local health departments and other appropriate response groups such as local Medical Reserve Corps and the American Red Cross to register with a recognized organization in your community that coordinates the credentialing and utilization of health care providers.
- Offer services where pharmacists may be utilized: administration of vaccines; dispensing of antivirals/medications; patient screening; and education of the public with approved messages and materials.
- Obtain information on local and regional emergency plans, as well as resources for dealing with pandemic situations.
- Participate in community planning meetings and exercises.
- Advocate for pharmacists being considered first responders based on direct patient contact, and that pharmacists should receive vaccinations/medications when other patient care givers receive theirs.
- Within institutions, coordinate with the hospital's designated Hospital Emergency Incident Command System (HEICS) coordinator for pharmacy staff involvement within the HEICS system.
- Establish a system to monitor influenza-like illness in patients cared for in the practice, including the purchase of OTC medications in the community and admitting diagnosis to hospitals.

- Formally establish a process for requesting and obtaining assets (e.g., personal protective equipment, medical supplies etc. from public health department or from your pharmacy) through the community's response plan.
- Be an advocate for roles and responsibilities for pharmacists and pharmacy technicians.
- Discuss the advantages and disadvantages of community-based stockpiles of selected pharmaceuticals.

**Training Opportunities:** One method pharmacists can use to enhance their emergency response knowledge and skills is to undergo training. Listed below are a variety of training opportunities related to pandemic preparedness:

- Complete basic life support skills (CPR) and keep certification up to date.
- Participate in emergency planning meetings and exercises with local and state health departments.
- Participate in your health-system, local/state public health, and emergency management response educational and training initiatives (for example, Medical Reserve Corps)
- Understand the basic tenets of the National Incident Management System (available at no cost on-line through [www.FEMA.gov](http://www.FEMA.gov)) and the Hospital Emergency Incident Command System.
- Get trained to administer immunizations through APhA's nationally recognized immunization certificate training program. Visit [www.aphanet.org](http://www.aphanet.org).
- Complete an annual education program on influenza and other potential public health issues.
- Check with corporation or health system management about training tools available for pharmacists.

**Staying Informed:** A wealth of information on pandemic preparedness and influenza activity is readily available. The following outlines valuable resources to obtain information relevant to pharmacists:

- Visit [www.pandemicflu.gov](http://www.pandemicflu.gov) regularly. This is the government's official pandemic Web site and contains a wealth of information and resources on pandemic influenza.
- Understand how the government's pandemic preparedness and response plans interface with your pharmacy-specific plan. The government's plan can be accessed at [www.pandemicflu.gov](http://www.pandemicflu.gov).
- Sign up for the Centers for Disease Control (CDC) flu monitor to be routinely provided with the status of flu activity in your area and the country. Visit <http://www.cdc.gov/flu/weekly/fluactivity.htm>.
- Sign up for your State's Health Alert Network for real-time updates on emergency events affecting your area / state. Contact your local public health department to determine how to sign up for the service.
- Sign up for the APhA Immunizing Pharmacists Listserve (send e-mail with Subscribe to IZ Listserve to [mrothholz@aphanet.org](mailto:mrothholz@aphanet.org)), ASHP's Emergency Preparedness list-serve ([www.ashp.org](http://www.ashp.org)), and local/state health department communications to stay up on the latest recommendations.
- Read articles in professional journals, Web sites, and other publications related to the topic.
- Participate in local, state, and national pharmacy associations, initiatives related to emergency/pandemic preparedness.
- Have a basic understanding of how public health emergency laws and regulations that might be enacted promptly during an incident could affect your practice.

**Practice Support:** While many elements of a pandemic preparedness and response plan apply to all pharmacists, different practice settings may wish to deal with certain situations in different ways. The following outlines some things to consider:

- Establish a plan with your specific practice in mind on dealing with a pandemic situation, maintaining your practice, etc. Sample checklists can be found at [www.pandemicflu.gov](http://www.pandemicflu.gov).
- Practice Role
  - What role will your practice be willing to assume (serve current patients' existing prescription needs; serve all patients; serve as a care center/extension for public health)? What role does your practice setting best serve within your community? Communicate this role to your public health department.
  - Will your practice make pharmacists, student pharmacists, residents, pharmacy technicians, and others available to public health department?
  - Are there other entities within your practice/health system that you need to coordinate activities with? If yes, who are they? Describe the interactions.
- Staff

40% or more of the workforce may be out during a pandemic (Gellin B, HHS National Vaccine Program Office, April 16, 2006). Consider the following when planning for and responding to a pandemic:

  - Who is the lead contact for your pharmacy? Who is the lead contact for your setting and/or corporation and how do you interact with them?
  - Who in your corporation/practice do you need to coordinate with to address staffing needs and responsibilities (e.g., Human Resources, etc.)?

- What staff will be available to work in the pharmacy? Will they be protected?
  - How will you address staff concern regarding family's safety?
  - In the event of a widespread pandemic, school will probably close and therefore, pharmacy staff with children may be unable to come to work. All staff should be aware of others in the pharmacy with children and their plans to care for them during a pandemic.
  - How will you notify staff of the emergency plan implementation? How will staff get in touch with the lead person?
  - How will employees get through emergency checkpoints?
  - Can any of the activities be conducted by employees from their homes versus having to come into the practice site?
  - Through the appropriate committee, discuss the issues of "credentialing" and identification badges/cards before an incident occurs.
  - Encourage staff to develop their personal emergency response plan for themselves and their family. Conduct an exercise with staff to test.
- Supply  
Maintaining an adequate supply of medications, vaccine, and other pertinent supplies is an essential component of a successful pandemic response. Consider the following supply issues when preparing your pharmacy's pandemic plan:
- Where will medication (routine or anti-viral?)/vaccine supply come from? Who will receive the supply and secure the items?
  - Establish a system to maintain cold-chain management of drugs and vaccines requiring refrigeration or freezing.
  - If medication/vaccine is coming from the company's prime vendor or central warehouse, how will the driver get through checkpoints? How will orders be placed?
  - What supply of antiviral, antibiotic, and other medications indicated under pandemic situations do you have in stock within your pharmacy, before any special orders are received? (this is not an encouragement for stockpiling, see Appendix A)
  - How and where will national stockpile of vaccine/anti-viral medication be introduced? Pharmacies should work with their management and state/local health departments to assure they receive appropriate quantities of stockpiled items during a pandemic.
  - Who will compensate, reimburse, or provide for the dispensing of medication and/or administration of vaccines? Pharmacies should work with management, vendors, and private and public payers to assure they have procedures in place to correctly document the dispensing and administering of vaccines and other medications during a pandemic so they can be appropriately reimbursed.
  - Test the capabilities of the vendor's emergency delivery system; do they have a plan?
  - How will you maintain access to routine medication supplies? How will deliveries of essential medications (acute care and chronic meds for community pharmacy) continue to reach your pharmacy if travel restrictions are imposed?
  - Pharmacies may wish to share preparedness and response plans with other vendors and suppliers involved in your products' supply chain.



- Administrative Issues

Many administrative tasks will be performed differently during a pandemic, including documentation and billing of services/products. Several programs have emerged to provide access to medication histories and other vital information for the continuity of care and operations. These programs include, but are not limited to: RxHistory, NCPDP, and ICERx. Below is a list of potential administrative issues which you may need to consider:

- What information does public health wish to have documented? Can a special account number be established in the pharmacy's computer system? How will the information be transmitted?
- Will you have access to patient-specific information (electronic records, registries, etc.)?
- Will a patient's prescription drug plan cover medication and associated services or will it be covered by the government?
- Will insurance providers allow patients to fill prescriptions that are out of the norm (e.g. longer days' supply, exception fills)? How will pharmacies/patients be notified?
- How will pharmacy patient care services (e.g. vaccine administration) be documented?
- Are there special plan codes to be utilized for dispensing medications and services to patients?
- Because of the high level of anxiety during a pandemic, some patients may be anxious to obtain vaccine/antiviral medications. Pharmacies might consider having a procedure in place to assure that only recommended patients receive these products as indicated by the CDC.
- If access to real-time electronic claims processing for products and services is

not available, pharmacies are encouraged to document as much pertinent information related to their services as possible.

### Protecting Patients and Staff

- Encourage patients and professionals to have a personal/family emergency plan including medication information, supplies, and communication mechanisms. For sample plans go to [www.ready.gov](http://www.ready.gov).
- Encourage patients and professionals to practice good hand hygiene and cough etiquette.
- Encourage patients and professionals to get an annual influenza vaccination.
- Consider adopting a liberal/non-punitive sick leave policy for managing staff who have symptoms of, or documented illness with, pandemic influenza. Chain/institutional pharmacists should check with management for the organization's policy. A policy could consider;
  - the handling of staff who become ill at work.
  - when personnel may return to work after recovering from pandemic influenza.
  - when personnel who are symptomatic, but well enough to work, will be permitted to continue working.
  - a system for evaluating symptomatic personnel before they report for duty and testing of the system during a non-pandemic (e.g., seasonal) influenza period.
  - a policy for the management of personnel who are at increased risk for influenza complications (e.g., pregnant women, immunocompromised health care workers), possibly placing them on administrative leave or altering their work location.

- Encourage staff to develop their own family care plans for the care of dependent minors and seniors in the event community containment measures (e.g., “snow days,” school closures) are implemented and for possible illness in adult family members. Staff should be encouraged to share their individual plan with others at the company/organization.
- Consider creating a specific waiting area designated for patients with symptoms of pandemic influenza that is segregated from other patients or using masks, if appropriate.
- For multi-unit pharmacies (i.e., chains, networks of independents) consider consolidating operations to critical sites, especially if manpower is in short supply.
- Consider establishing a plan for implementing respiratory hygiene/cough etiquette. For example:
  - Obtain language appropriate signage from the CDC resource site (<http://www.cdc.gov/flu/protect/covercough.htm>) on Respiratory Hygiene/Cough Etiquette instructing symptomatic persons to use tissues to cover their cough to contain respiratory secretions and perform hand hygiene.
- Distribute masks to symptomatic patients who can wear them (adult and pediatric sizes should be available), providing facial tissues, receptacles for their disposal, and hand hygiene materials in waiting areas.
- Serve as a public education resource by disseminating prepared messages from public health and emergency response officials.

### **Medication/Vaccine Supply and Distribution**

- Consider establishing a plan for maintaining at least a week’s supply of resources when there is evidence that the potential for pandemic influenza has reached the United States, according to the CDC. Include legend drugs, OTC drugs, and consumable supplies.
- Discourage personal stockpiling of antivirals/vaccines/medications (outside of health facilities) because of concerns about potential inappropriate use, maldistribution, improper storage, and meds going out of date when no pandemic has been indicated.
- Anticipate consumable resource needs (e.g., masks, gloves, hand hygiene products, over the counter (OTC) medications, prescription vials, etc). See Appendix A.
- Consider establishing a distribution plan for medications and supplies for patients in isolation.
- Work with wholesalers and drug manufacturers to establish primary and contingency plans to address supply shortages, including detailed procedures for acquiring supplies through normal channels, as well as to request resources for replenishing supplies when normal channels have been exhausted.
- Identify commonly used prescription medications in your practice and appropriate stocking levels to meet practice needs. An example of meds used by a major pharmacy chain during Katrina can be found on page 10.

*This is not intended to be an all-inclusive document. Pharmacies will be relied on heavily during a pandemic. Pharmacists are encouraged to understand the government's preparedness and response plans (available at [www.pandemicflu.gov](http://www.pandemicflu.gov)) and be aware of the role that pharmacists may be expected to play, understand the resources available within the corporation or health system, and participate in response activities.*

*In addition, pharmacists are encouraged to share experiences and suggestions for enhancements to this tool. Send input to one of the contacts below.*

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## Appendix A: Pandemic Flu Pharmacy Checklist

- **Supplies: Immunizations**
  - o Cotton balls
  - o Latex gloves
  - o Needles / syringes
  - o Alcohol swabs
  - o Sharps containers
  - o Influenza Vaccine
- **Supplies: Miscellaneous**
  - o Masks
  - o Eye shields / goggles
  - o Thermometers – oral, rectal, axillary administration
  - o Thermometer covers
  - o Vaporizers
  - o Vaporizer solution
  - o Humidifiers – warm air / cool air
  - o Biohazard waste containers
  - o Plastic bags
  - o Mops / brooms
  - o Refuse containers / liners
  - o Water containers
  - o HEPA air purifier / filters
  - o Labels
  - o Sharpie markers
- **Other consumables**
  - o Bottled water
  - o Electrolyte solution
  - o Hand sanitizer
  - o Antibacterial wipes / Baby wipes
  - o Bleach
  - o 70% / 91% rubbing alcohol
  - o Cleaning chemicals
  - o Air disinfectants
  - o Surface disinfectants / antiseptics
  - o Paper towels
  - o Toilet tissue
  - o Tissues (Kleenex)
  - o Antibacterial Soap
- **Drugs**
  - o Anti-virals (Tamiflu, Relenza, Symmetrel, Flumadine)
  - o NSAID's (Ibuprofen, Naproxen)
  - o APAP
  - o Aspirin
  - o Opioids
  - o Decongestants (Sudafed, Allegra D, Claritin D, Coricidin HBP, phenylephrine)
  - o Antihistamines (Claritin, Allegra, Benadryl)
  - o Antidiarrheals (Immodium AD, Pepto Bismol, Lomotil)
  - o Antinausea meds (Emetrol, meclizine, Phenergan – oral and suppository)
  - o Topical decongestants (phenylephrine, oxymetazoline, naphazoline)
  - o Short-acting beta agonist inhalers
  - o Glucose Tablets
  - o Chronic care medications, including insulin
- **Information – Personal**
  - o Blood type
  - o Immunization / vaccination record
  - o Medical history
  - o Medications, OTC's, herbals
  - o Allergies
  - o Health conditions
  - o Co-morbidities / disease states
  - o Lifestyle – smoking / tobacco use, alcohol use, exercise
- **Information – Names, Phone numbers, Addresses**
  - o Family members
  - o Caregivers
  - o Physicians
  - o Insurance / 3rd party coverage
  - o Financial status / payment ability

**TOP 50 MEDICATIONS DISPENSED DURING HURRICANE KATRINA  
AS REPORTED BY A MAJOR PHARMACY CHAIN**

<b>Medications</b>	<b># of Rx's Sold</b>
HYDROCHLOROTHIAZIDE 25MG	1,541
ALBUTEROL INHALER (COMP	1,213
METFORMIN 500MG TABLETS	744
HYDROCODONE / APAP 5MG / 500M	732
NORVASC 10MG TABLETS	617
FUROSEMIDE 40MG TABLETS	569
PLAVIX 75MG TABLETS	567
CARISOPRODOL 350MG TABLET	558
NEXIUM 40MG CAPSULES	557
METOPROLOL 50MG TABLETS	530
TRIAMTERENE 37.5MG / HCTZ	517
LIPITOR 10MG TABLETS	503
SULFAMETH / TRIMETHOPRIM 80	500
NORVASC 5MG TABLETS	474
AMOXICILLIN 500MG CAPSULE	450
ATENOLOL 50MG TABLETS	427
CEPHALEXIN 500MG CAPSULES	406
LIPITOR 20MG TABLETS	406
TRAMADOL 50MG TABLETS	411
IBUPROFEN 800MG TABLETS	400
FUROSEMIDE 20MG TABLETS	401
CYCLOBENZAPRINE 10MG TABL	377
FLONASE NASAL SPRAY (120I	370
ZYRTEC 10MG TABLETS	369
AMBIEN 10MG TABLETS	373
ZITHROMAX 250MG TABS (Z-P	364
PROPOXYPHENE-N 100 W / APA	365
LISINAPRIL 20MG TABLETS	354
POTASSIUM CL 20MEQ ERTAB	345
PREVACID 30MG CAPSULES	344
LEXAPRO 10MG TABLETS	337
METFORMIN 1000MG TABLETS	321
PROTONIX 40MG TABLETS	313
LISINAPRIL 10MG TABLETS	310
NAPROXEN 500MG TABLETS	311
ADVAIR DISKUS 250 / 50MCG 6	300
HYDROCODONE / APAP 7.5MG / 75	308
TOPROL XL 50MG TABLETS	310
HYDROCODONE / APAP 10MG / 500	301
HYDROCODONE / APAP 7.5 / 500M	298
ZOCOR 40MG TABLETS	281
ATENOLOL 25MG TABLETS	274
LANTUS U-100 INSULIN 10ML	280
ALPRAZOLAM 0.5MG TABLETS	285
COMBIVENT INHALATION AERO	268
LIPITOR 40MG TABLETS	264
HYDROCHLOROTHIAZIDE 12.5M	264
SINGULAIR 10MG TABLETS	262
CIPROFLOXACIN 500MG TABLE	240
PROMETHAZINE 25MG TABLETS	257

INSIDE BACK COVER

BACK COVER