

**From:** \_\_\_\_\_  
**To:** \_\_\_\_\_  
**Subject:** Consultation Paper "review of guidelines on practice-specific issues - guideline 1 references"  
**Date:** Friday, 13 May 2011 5:42:45 PM

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Please note the following in relation to the approach for comment on the guideline references.

With respect to the 3 suggested amendments that follow, in my role as a practitioner and manager I fully support all three.

1. to remove the statement "*For pharmacists undertaking medication reviews*",
2. the addition of the paragraph "*In addition to accessing the references listed in these Guidelines during the dispensing, clinical assessment, reviewing and counselling processes, pharmacists should use additional references relevant to their area of practice. Consideration should also be given to accessing reference material which provides information in the Australian context. Pharmacists may also need to use more than one reference to ensure that all current and relevant information is accessed.*" and
3. to amend the list of references published on the Board's website including the removal of *Martindale: The Complete Drug Reference* from the list of references and to require pharmacists to have access to *Therapeutic Guidelines Series (hardcopy), eTG or equivalent*.

In addition, I have a further comment that relates to list reference "f" which states:

*"a paediatric pharmacopoeia published by an Australian teaching hospital"*

Whilst this is not included in the request for feedback, I would like to suggest that the wording has potential for improvement and that the term "pharmacopoeia" is outdated and may not truly reflect what would be available.

Hence I suggest that "*a current paediatric reference available from an Australian source (including a teaching hospital)*", or similar, may be better wording given that there are various resources either already available in hard copy or electronically and that are called dosing or prescribing guidelines / protocols. I also believe that such a resource might not be from a "teaching hospital" per se, but have been developed by a specialty network which could be jurisdictional or national across the paediatric hospitals. Finally, I am aware that it is hoped that there is a commonwealth funded paediatric dosing reference available in the near future which might also meet the intended need of this particular reference requirement in the Board's guidelines. Whilst this might not occur for a period of time, making statement "f" a little more general might reduce the need for amendment again in the future.

Cheers

**Helen D**

Helen Dowling

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