

Date/Time:
Question Classification: <input type="checkbox"/> Adverse Drug Reaction/Contraindication <input type="checkbox"/> Drug Compatibility/Stability <input type="checkbox"/> Identification <input type="checkbox"/> Availability <input type="checkbox"/> Drug Interaction <input type="checkbox"/> Pharmacy Practice <input type="checkbox"/> Dose <input type="checkbox"/> Drug Therapy <input type="checkbox"/> Pharmacology
Question:
Background Information:
Requestor Name, title and/or profession (MD, nurse, pharmacist, technician, patient, etc), and contact information:
Date/Time Answer needed:
Answer to be given by... (e.g, phone/e-mail):
Answer:
Other pertinent information(required):
References (indicate in list whether reference was Helpful [H] or Unhelpful [U]):
Answer completed by (student name/date/time):
Answer given to requestor by (student name/date/time):

This Drug Information Question Intake/Tracking Form includes all fields that could be used in a formal drug information service setting. However, the form is only a template. Please feel free to modify it or to only use the applicable fields based on the question setting. For example, if a student is recording a question s/he was asked on rounds, and the student gave the answer immediately, the “date/time answer needed by” (and other fields) would not need to be completed.

Suggestions for using provided fields in the template:

- Date/Time field – for recording when question is received.
- Question field – for recording the question as it is posed. It should be clearly stated using complete sentences and proper grammar. When the form is used in a more formal drug information setting, the person taking the question may not be the person providing the response, so questions should always be written so that anyone can understand precisely what the question is.
- Background Information field – Record the information pertinent to the question. For example:
 - How did this question come about? Is it patient-specific? (If so, make sure you get patient-specific data.) Did someone ask them the question (i.e., is this first-hand, second-hand, etc.)? Write down any information obtained in discussing the request. This may help identify the “true” question or help decide when the question has been searched as thoroughly as possible. Don’t be afraid to call back if you need more information or think of something you didn’t ask. It is important to be as thorough as possible.
 - Ask the caller where they have looked thus far and if they have any data already.
 - Repeat the question as you understand it to the caller. This will help confirm your research and find the information they truly need.
- Requestor Name, etc. field – It is important to document the correct Title of the person asking the question. Be specific and differentiate between titles such as Pharm.D. & BS Pharm. or RN, LPN, & ARNP. This information will be used when returning calls, sending written responses, and to determine the level of detail of the response.
- Date/Time Answer needed field – When using this form in a more formal drug information setting, recording the date/time an answer is needed helps prioritize requests and makes sure they are answered within a period of time that is useful to the caller.
 - Asking the caller “How much time can you give us to research this question?” usually gives you ample time, as opposed to asking “When do you need a response?”.
 - Regardless of whether or not a response is ready, the requestor must be contacted by the agreed upon deadline. If the response is not complete, let them know it is in process. This assures them they and their request have not been forgotten and that you are actively pursuing a response for them.
- Answer to be given by field – Ask the requestor if they prefer the answer to be relayed to them with a phone call or in writing, or both. (Be prepared to relay the answer both verbally and in writing, regardless of how this is initially requested.)
- Answer field – Give the answer in the first sentence, whether giving the answer in writing or verbally. You can expand the information and give more details after the first sentence. References used should be incorporated into the answer, especially if a written response is provided to the requestor.
- Reference field – Record all references used.
- Completed by field – List the name of the student who researches and compiles the answer.
- Given by field - If the student who relays the answer is different from the student who compiles the answer, record the name and date/time the answer is given.

Helpful hints for answering Drug Information Requests

- It is okay to start with a tertiary resource for background data. If you use a tertiary resource initially, try to review any primary literature that is cited. The data presented may not fully represent the entire primary reference. Many questions will require a literature search, even if you find the answer in a tertiary reference. When doing a literature search, be sure to review older data, if available. Just because it is older does not mean it is not relevant or useful.

- Both safety and efficacy data are important when reviewing a drug therapy. If your study/studies did not address one or the other, at least make that comment within your response. Also, if this is the case, consider adding common side effects/uses or populations where the drug should not be used.

The written response:

- List all references consulted, designating them as being Helpful or Unhelpful (whether you used them in your response or not).
- Always answer the question in the first sentence of the written response.
- In addition to presenting the data found, summarize your findings, including a final recommendation for whether or not the data supports the use of the drug in this manner. Also include any precautions or safety data that may be pertinent.
- If you are providing a formal written response, it should be generated on official letterhead and signed by the student and the preceptor who approved the response. All of the references should be included as well as contact information for the preceptor if there are any follow up questions.
- If a written response is provided, a disclaimer statement is often used, such as, "We hope you find this information useful. This information should be interpreted using your clinical judgment. The answer provided is based on the specific details of the initial question. This information provided is based on the information available at the time, it should be used to supplement your clinical knowledge."

The verbal response:

- The verbal response should be a condensed and succinct version of the written response. Simply reading the written response is not appropriate.
- The response should be complete such that the person asking the question could treat a patient at that moment with the information you provide. Dosage information and/or a brief summary of the efficacy/safety data should be provided.