



INFLUENZA IMMUNIZATION GUIDE FOR PHARMACISTS



CANADIAN
PHARMACISTS
ASSOCIATION

ASSOCIATION DES
PHARMACIENS
DU CANADA

Canadian Coalition for
Influenza Immunization



CONTENTS

2	Influenza Immunization Guide	9	Sample Patient Education Pamphlet
3	Criteria to be used to run report identifying patients at high risk of influenza complications	10	Making the Most of the Media
4	Influenza Vaccination Assessment Form	11	Sample Radio Announcements
6	Influenza Immunization Promotion Letter to Physicians	12	Sample Media Advisory for Influenza Immunization Clinic
7	Influenza Immunization Promotion Letter to Retirement Home Directors	13	Sample Community Column
8	Telephone Consultation Transcript with High-Risk Patients	14	Sample Influenza Clinic Appointment Schedule
		15	Influenza Clinic High-Risk Patient Telephone Consultation Documentation
		16	Public Funding for Influenza Vaccination
		17	Appendix A
		19	References

Influenza Immunization Guide for Pharmacists

Purpose

The Canadian Pharmacists Association has developed the Influenza Immunization Guide so that pharmacists may follow a step-by-step influenza program allowing them to initiate it in their pharmacies.

TIMELINES

August/September	Contact local nursing agency to set up date and time for vaccination clinic (agency to provide dosing charts, patient consent forms, and administer vaccinations)
September	Run report using the provided risk factor criteria to identify patients who should receive influenza vaccine
September — Clinic Date	Complete provided Patient Assessment Form for all identified high-risk patients so that all information is available for patient telephone consultation
	Vaccination Reminder Stickers on all prescription vials; bag stuffers/handouts promoting clinic (templates provided)
	Telephone consultation with high-risk patients — discuss scheduling appointment for vaccination, benefits, and reimbursement (see Telephone Conversation Transcript with High-Risk Patients); document using Influenza Clinic Appointment Schedule and High-Risk Patient Telephone Consultation Documentation (templates provided)
3 weeks before clinic	Send letters to local retirement communities, and/or all patients in your pharmacy data base informing them about the clinic (see Influenza Immunization Promotion Letter templates to Physicians and Retirement Home Directors)
2 weeks before clinic	Place ads in local newspapers/radio; posters in pharmacy (see Sample Radio Announcements, Media Advisory for Influenza Immunization Clinic, Community Column)
Mid October	Run Influenza Vaccination Clinic; document immunizations using Patient Assessment Form
Following year	For your next clinic, make sure to send reminders to all past participants

Goal

To increase the number of high-risk patients immunized against influenza.

Criteria to be used to run report identifying patients at high risk of influenza complications

65 YEARS OR OLDER

These medications were selected based on frequency of use and indication for high-risk disease; for example, salbutamol was chosen as an indicator for asthma and COPD. This will identify the majority of patients with either condition and will decrease the number of drugs to be searched.

MEDICATIONS INDICATIVE OF HIGH-RISK **

Amlodipine	Fosinopril	Nitroglycerine	Verapamil
Clopidogrel	Glyburide	Prednisone	Warfarin
Digoxin	Insulin	Quinapril	
Diltiazem	Lisinopril	Ramipril	
Enalapril	Metformin	Salbutamol	

** For a complete list of medications and conditions indicative of high-risk patients, see [Appendix A](#).

ON PHARMACY LETTERHEAD



Influenza Vaccination Assessment Form

Physician Name: _____

Address: _____

Telephone: _____ Fax: _____

Dear Dr. _____

The following patient RECEIVED/DID NOT RECEIVE an influenza vaccination on ___/___/___ at an influenza immunization clinic held in our pharmacy. He/she has identified you as his/her general practitioner. The following information is being provided so that you may update your files as needed.

1. PATIENT DEMOGRAPHICS

Patient Name: _____

Address: _____

Telephone _____ Date of Birth: _____

2. IF PATIENT WAS NOT VACCINATED, PLEASE SKIP TO #3

Risk assessment: Patient **WAS VACCINATED** as a result of presenting with the following risk factors: ^{i iii iv v vi}
(check all that apply)

- | | | | |
|---|--|--|---------------------------------------|
| <input type="checkbox"/> 65 years or older | <input type="checkbox"/> immunosuppression | <input type="checkbox"/> chronic heart disease | <input type="checkbox"/> cancer |
| <input type="checkbox"/> chronic lung disease | <input type="checkbox"/> cystic fibrosis | <input type="checkbox"/> asthma | <input type="checkbox"/> diabetes |
| <input type="checkbox"/> hemoglobinopathies | <input type="checkbox"/> HIV infection | <input type="checkbox"/> renal dysfunction | <input type="checkbox"/> tuberculosis |
| <input type="checkbox"/> Other: _____ | | | |

3. CONTRAINDICATION ASSESSMENT

Patient **WAS NOT VACCINATED** as a result of presenting with the following contraindications: ^{i iii v}
(check all that apply)

- History of anaphylactic hypersensitivity reaction to eggs (difficulty breathing, hives, swelling of throat/mouth)
- Past anaphylactic hypersensitivity reaction to influenza vaccine
- History of thimersol allergy
- Vaccinated for influenza during the current year
- Acute febrile illness
- Active nerve disorder, such as Guillain-Barre Syndrome

4. ASSESSMENTS CONDUCTED BY

Name: _____

Signature: _____ Date: _____

Patient Name: _____

5. PATIENT EDUCATION (Please check all that apply)

- Verbal
- Written

Points discussed:

- You cannot get influenza from the vaccine since it is a killed vaccine
- Adverse events ^{vii}
- When to contact your doctor or urgent care

Counselled By: _____ Title: _____

6. RECORD OF INFLUENZA VACCINE ADMINISTRATION

Date: ___/___/___ Time: _____ Site: _____ Route: _____ Dose: _____

Manufacturer: _____ Lot #: _____

Vaccine Administrator: _____ Title: _____

Signature: _____

THE PHARMACY WILL ALSO MAINTAIN A COMPLETE RECORD OF THE IMMUNIZATION.

If you have any questions, please contact us.

Adapted from: Grabenstein JD, Bonasso J. Health-system pharmacists' role in immunizing adults against pneumococcal disease and influenza. *American Journal of Health-System Pharmacy*. September 1, 1999. 56:17S:3S-22S.



ON PHARMACY LETTERHEAD

Influenza Immunization Promotion Letter to Physicians

Date: _____

Dear Dr. _____

It's that time again! The flu season is just around the corner, and we, at **(NAME OF PHARMACY)**, are taking an active role to increase immunization. We will be holding an Influenza Vaccination Clinic on ____/____/____ at the pharmacy.

Every year, the flu claims over six thousand lives in Canada.^{viii} Our goal is to target high-risk patients and immunize them to minimize the unnecessary costs to our health care system.

Enclosed is a poster and flyers with information regarding the clinic. Please feel free to display them in your office as well as to encourage any of your patients to take advantage of this service.

If any of your patients are immunized, the pharmacy will follow up with a document, so that you may update your patient files.

Sincerely

(Signature)

Name and Title



ON PHARMACY LETTERHEAD

Influenza Immunization Promotion Letter to Retirement Home Directors

Date: _____

Dear _____

It's that time again! The flu season is just around the corner, and we, at **(NAME OF PHARMACY)**, are taking an active role to increase immunization. We will be holding an Influenza Vaccination Clinic on ____/____/____ at the pharmacy.

Every year, the flu claims over six thousand lives in Canada. ^{viii} Our goal is to target high-risk patients and immunize them to minimize the unnecessary costs to our health care system.

Enclosed is a poster and flyers with information regarding the clinic. Please feel free to display them as well as to encourage any of your residents to take advantage of this service.

If any of your residents are immunized, the pharmacy will follow up with a document to the resident's general practitioner, so that they may update their patient files.

Sincerely

(Signature)

Name and Title



Telephone Consultation Transcript with High-Risk Patients

Hello, my name is _____. I am calling from **(NAME OF PHARMACY)**. How are you today?

The reason I am calling is that I have looked over your medication profile and am concerned that you may be at high-risk of complications from the flu because of your history of **(REASON PATIENT IS AT HIGH-RISK)**. Do you have a few minutes so that I may go over some important information with you?

This October, at **(NAME OF PHARMACY)**, we are hosting a flu shot clinic for our patients so that they can avoid the flu and its complications. This service is being offered on **(DATE)**. A registered nurse will be here from _____ to _____ to administer the shots. To make it easier for you, we will also contact your doctor to let **HIM/HER** know that you received the shot, so that **his/her** office can update their records as well. The cost for getting the flu shot is **(DEPENDS ON PROVINCE)**.

- ▶ Do you have any questions or concerns that I may not have covered?
- ▶ When would be a good time for you to come in for your flu shot?
- ▶ Please remember to bring in your vaccination card, if you have one.

If you think of any questions later on, please feel free to call me at **(TELEPHONE NUMBER)**.

Thank you, **(Mr. /Mrs. /Ms.)** _____ for your time. Have a wonderful day!

Optional Information

- ▶ Over six thousand Canadians die each year from the flu.
- ▶ Flu symptoms include fever, sore throat, cough, chills, headache and muscle aches.
- ▶ The flu vaccine is changed every year because the virus changes repeatedly. This is why it is necessary to get the flu shot annually.



Sample — Patient Education Pamphlet

What is influenza?

Influenza (most commonly known as the flu) is a virus that can affect people year round but is most common during the winter months. Symptoms include high fever, cough, muscle aches and pains, and headache. Patients often confuse these symptoms with the common cold. Table I helps differentiate between these two infections.

What are the complications of influenza?

Influenza can lead to pneumonia, worsening of heart and lung diseases and even death.

Why should I get the influenza vaccine?

Over six thousand Canadians die each year from the flu.^{viii} Getting vaccinated can help prevent you from getting the flu.

How often should I get vaccinated?

Vaccination is required every year since the virus changes frequently.

TABLE I

Symptoms	Cold	Influenza
Fever	Rare	High lasts 3-4 days
Headache	Rare	Usual, may be severe
Aches and pains	Mild	Usual, may be severe
Fatigue and weakness	Mild	Usual, may be severe, early onset
Stuffy nose	Usual	Sometimes
Sneezing	Usual	Sometimes
Sore throat	Usual	Sometimes
Chest discomfort, cough	Mild to moderate	Usual, may be severe

Who is at risk of influenza complications?

65 years or older	Immunosuppression
Chronic heart disease	HIV infection
Chronic lung disease	Cystic fibrosis
Asthma	Cancer
Diabetes	Tuberculosis
Renal Dysfunction	

How might I feel after my shot?

Mild Reactions <i>(These usually do not last more than 1-2 days)</i>	Moderate — Severe Reactions <i>(Contact physician immediately)</i>
Redness, swelling at injection site	High fever
Aches	Difficulty breathing
Slight fever	Hives
	Wheezing

If you have any other questions, please contact us at _____



Making the Most of the Media

After all your efforts in organizing your influenza immunization event, you will want to ensure maximum publicity to bring your message to the widest audience. It helps to understand what gets noticed and why.

Reporters and editors are interested in relating news stories to the community in which they happen. If you can convince reporters or editors that a story is important to the public, they will write about it or broadcast it.

You can maximize the impact of your media campaign by contacting the media in advance and providing them with ideas and an editorial copy (see sample media advisory, radio announcements, and community column).

Here are some general tips that you may find helpful when you are ready to contact your local media:

- ▶ Try to anticipate the reporter's needs.
- ▶ Prepare what you want to say, and say it with confidence and clarity.
- ▶ Respect reporters' deadlines.
- ▶ Provide reporters with a telephone number where you can be reached if they have to call you back.
- ▶ Be prompt in returning reporters' calls.
- ▶ Be honest. If you don't know the answer, say so and tell them you will get back to them with the correct response.
- ▶ If you are to be photographed or filmed, ask to be seen counseling a patient rather than in the dispensary counting and pouring. Remember to promote yourself as today's pharmacist.

Specific Ideas

- ▶ If your local radio station has a phone-in-show, offer to sit in for a question and answer segment.
- ▶ Your local radio and television stations most likely do "remote broadcasts". When organizing your event, let them know well in advance and invite them to broadcast from your location.
- ▶ Write a letter describing your Flu Awareness Program to the editor of your local newspaper.
- ▶ Be sure to use the sample media advisory and community column included in this guide.
- ▶ A month or so before your Flu Shot Clinic, send the media the provided radio announcement scripts. Ask them to air them before and during the week the Flu Shot service is offered.
- ▶ Advertisements can be placed by purchasing the space or you can contact the editor, particularly of smaller weekly, biweekly or monthly community newspapers, asking if he/she would run the ad free-of-charge as a Public Service Announcement.



Sample Radio Announcements

The following are sample radio announcements. Feel free to use or modify them, or create your own!

BROADCAST #1 — 15 SECONDS

It's Influenza Immunization Week at **(NAME OF PHARMACY)**. Don't get stuck with the flu this year. Come visit us for your annual flu shot today. We're located at _____, just **(N/E/S/W)** of **(MAJOR LOCATION)**.

BROADCAST #2 — 15 SECONDS

Don't let the flu get you this year! Visit **(NAME OF PHARMACY)** for your annual flu shot today! We're located at _____, just **(N/S/E/W)** of **(MAJOR LOCATION)**.

BROADCAST #3 — 15 SECONDS

Over 6 thousand Canadians die each year from the flu. Don't become a statistic. Visit **(NAME OF PHARMACY)** this week to see if the flu vaccine is for you!! We're located at _____, just **(N/S/E/W)** of **(MAJOR LOCATION)**.

BROADCAST #4 — 15 SECONDS

If you're over 65 or have a chronic illness, make it a habit to get the flu shot every fall. It could save your life! To get your free flu shot, come in and visit **(NAME OF PHARMACY)**. We're located at _____, just **(N/S/E/W)** of **(MAJOR LOCATION)**.



Sample Media Advisory for Influenza Immunization Clinic

An advisory is usually sent one week prior to an event to alert the media and, hopefully, encourage them to attend.

(NAME OF PHARMACY) HOLDS FLU AWARENESS PROGRAM

WHAT

The flu season is just around the corner and **(NAME OF PHARMACY)** is holding a Flu Awareness Program. They have been busy teaching their patients the importance of an annual flu shot and are reminding all people who may experience complications from the flu, to take advantage of the Flu Shot Clinic on **(DATE)**.

If you're over 65 or have a chronic condition, such as asthma or diabetes, make it a habit to get the flu shot every fall. It could save your life. To find out if you should get a flu shot, come in and see **(NAME)**, our pharmacist.

Visit **(NAME OF PHARMACY)** on **(DATE)** for a **(FREE)** flu shot. No appointment is necessary. Be prepared and cut your chances of getting the flu this winter!

WHO

(NAME OF PHARMACY OR NAME OF THE ORGANIZATION SPONSORING THE EVENT)

WHERE

(WHERE THE EVENT WILL TAKE PLACE)

WHEN

(DAY, DATE AND TIME OF EVENT)

WHY

Influenza, or "the flu", claims the lives of over six thousand Canadians each year.^{viii} Many of these deaths are preventable if patients get immunized. Certain people are at a much higher risk of developing complications from the flu. It is important for these, as well as others wanting to avoid the flu, to get immunized. Influenza is a virus that changes often. This is why the vaccine is changed annually and why it is necessary to get the shot every year.

Influenza can cause many symptoms, including fever, sore throat, cough, and muscle aches. Avoid getting the flu this winter. Get your flu shot today!





Sample Community Column

Local Pharmacy Protects Patients from the Flu

With the flu season just around the corner, **(NAME OF PHARMACY)** has been busy getting their patients ready to battle the flu. For the last month or so, they have been teaching their patients the importance of an annual flu shot and reminding all people who may experience complications from the flu, to ask their pharmacist if they should be getting the vaccine.

(YOUR NAME), the pharmacist at **(NAME OF PHARMACY)**, cautions the public “if you’re over 65 or have a chronic illness, make it a habit to get the flu shot every fall. It could save your life.”

Influenza, or “the flu”, claims the lives of over six thousand Canadians each year. Many of these deaths are preventable if patients get immunized. Certain people are at a much higher risk of developing complications from the flu. It is important for these people, as well as others wanting to avoid the flu, to get immunized. Influenza is a virus that changes often. This is why the vaccine is changed on an annual basis and why it is necessary to get the shot every year.

Influenza can cause many symptoms, including fever, sore throat, cough, chills, muscle aches and headaches. These can all be avoided by getting an annual flu shot.

To finish off their Flu Awareness Program, **(NAME OF PHARMACY)** is hosting a Flu Shot Clinic on **(DATE)**, when people can come in to the pharmacy and get their annual flu shot.

Be prepared and cut your chances of getting the flu this winter!

For more information on **(NAME OF PHARMACY)**'s Flu Awareness Program or to make an appointment for your flu shot, call **(TELEPHONE NUMBER)** or visit the pharmacy team at **(ADDRESS)**.



Sample Influenza Clinic Appointment Schedule

DATE	TIME	NAME	TELEPHONE	ADDRESS	NOTES
10-Oct-02	10:00				
10-Oct-02	10:10				
10-Oct-02	10:20				
10-Oct-02	10:30				
10-Oct-02	10:40				
10-Oct-02	10:50				
10-Oct-02	11:00				
10-Oct-02	11:10				
10-Oct-02	11:20				
10-Oct-02	11:30				
10-Oct-02	11:40				
10-Oct-02	11:50				
10-Oct-02	12:00				
10-Oct-02	12:10				
10-Oct-02	12:20				
10-Oct-02	12:30				
10-Oct-02	12:40				
10-Oct-02	12:50				
10-Oct-02	13:00				
10-Oct-02	13:10				
10-Oct-02	13:20				
10-Oct-02	13:30				
10-Oct-02	13:40				
10-Oct-02	13:50				
10-Oct-02	14:00				
10-Oct-02	14:10				
10-Oct-02	14:20				
10-Oct-02	14:30				
10-Oct-02	14:40				
10-Oct-02	14:50				
10-Oct-02	15:00				
10-Oct-02	15:10				
10-Oct-02	15:20				
10-Oct-02	15:30				



Public Funding for Influenza Vaccination

Target	BC	YK	AB	NT	NU	SK	MB	ON	QC	NB	NS	NF	PE
Persons age 6 months to 5 years					✓								
Persons 18 years and older		✓											
Persons 50 years and older					✓								
Persons 60 years and older									✓				
Persons 65 years and older	✓		✓	✓		✓	✓				✓	✓	
Universal vaccination								✓					
Residents of nursing homes or chronic care facilities	✓		✓	✓	✓	✓	✓		✓	✓	✓	✓	
Health care workers	✓		✓	✓	✓		✓		✓		✓	✓	
Children and adolescents on long-term ASA	✓		✓	✓	✓	✓	✓		✓	✓	✓	✓	
Persons on long-term ASA (e.g., RA patients)				✓	✓						✓	✓	
Household contacts of people at high-risk	✓		✓	✓	✓		✓		✓		✓	✓	
Persons with weakened immune systems	✓		✓	✓	✓		✓			✓		✓	
Essential community services: first responders	✓		✓ ¹	✓	✓							✓	
Persons at risk travelling to destinations where flu is likely circulating				✓	✓				✓				

Adults and children with chronic conditions severe enough to require regular medical follow-up or hospital care such as:

▶ Cardiac disease	✓		✓	✓	✓	✓	✓		✓	✓	✓	✓	
▶ Pulmonary disease	✓		✓	✓	✓	✓	✓		✓	✓	✓	✓	
▶ Asthma	✓		✓	✓	✓	✓	✓		✓	✓	✓	✓	
▶ Diabetes	✓		✓	✓	✓	✓	✓		✓	✓	✓	✓	
▶ Renal disease	✓		✓	✓	✓	✓	✓		✓	✓	✓	✓	
▶ Liver disease	✓		✓		✓						✓		
▶ Anaemia or hemoglobinopathy	✓		✓	✓	✓	✓			✓	✓	✓	✓	
▶ HIV patients	✓		✓	✓	✓	✓			✓	✓	✓	✓	
▶ Immunosuppression, cancer	✓		✓	✓	✓	✓			✓	✓	✓	✓	

¹ Paramedics and emergency medical technicians, firemen and policemen are not covered.

Provincial Contacts

- Alberta**
Elaine Sartisan
Disease Control and Prevention
Health and Wellness Alberta
(780) 415-9722
- British Columbia**
BC Pharmacy Association
(604) 279-2053
- Manitoba**
Digby Horne
(204) 788-6722
Tara Mawhinny
(204) 786-7288
Jackie Habing
(204) 788-6725
- New Brunswick**
Lynn Cochrane, Project Manager
Office of the Chief Medical
Officer of Health
Department of Health and Wellness
(506) 453-2323
Fax: (506) 453-8702
lynn.cochrane@gnb.ca
- Newfoundland**
Disease Control Office
Department of Health
(709) 729-3430
- Northwest Territories**
Health Protection Unit
Department of Health and
Social Services
(867) 920-8877
- Nova Scotia**
Mahnaz Farhang Mehr
Communicable Disease Prevention
and Control
1690 Hollis St, 11th Flr
PO Box 488
Halifax, NS, B3J 2R8
(902) 424-1748
farhanma@gov.ns.ca
- Nunavut**
Geraldine Osborne
Assistant Medical Health Officer
(867) 975-5770
Mehrun Forth Public Health Nurse
Consultant (867) 975-5726
- Ontario**
John-Paul Dowson
Ruth Mallon
Ontario Pharmacists' Association
(416) 441-0788
- Prince Edward Island**
Marie Morris
Public Health
Department of Health and Social
Services
(902) 368-6114
- Québec**
Dr. Yves Robert
Ministère de la Santé et
des Services sociaux
(514) 873-1292
- Saskatchewan**
Rosalie Tuchscherer
(306) 787-7113
- Yukon**
Pat Mandl
Communicable
Disease Officer
(867) 667-8369



PATIENTS WHO NEED INFLUENZA VACCINATION

Risk Factor Criteria to Identify High-Risk Patients

Patient may require immunization if he/she belongs to one of the following high-risk categories:^{i iii iv v vi}

- ▶ 65 years or older
- ▶ chronic heart disease
- ▶ chronic lung disease
- ▶ asthma
- ▶ diabetes
- ▶ renal dysfunction
- ▶ immunosuppression
- ▶ cancer
- ▶ cystic fibrosis
- ▶ hemoglobinopathies
- ▶ HIV infection
- ▶ tuberculosis

Medications indicative of high-risk patients:^{xi}

ASTHMA MEDICATIONS

- ▶ Aminophylline
- ▶ Atropine
- ▶ Beclomethasone
- ▶ Budesonide
- ▶ Cromolyn
- ▶ Epinephrine
- ▶ Fenoterol
- ▶ Fluticasone
- ▶ Formoterol
- ▶ Hydrocortisone
- ▶ Ipratropium
- ▶ Isoproterenol
- ▶ Methylprednisolone
- ▶ Montelukast

IMMUNOSUPPRESSIVE AGENTS

- ▶ Azathioprine
- ▶ Basiliximab
- ▶ Cyclosporine
- ▶ Daclizumab
- ▶ Mycophenolate mofetil
- ▶ Sirolimus
- ▶ Tacrolimus

CORTICOSTEROIDS

- ▶ Betamethasone
- ▶ Cortisone Acetate
- ▶ Dexamethasone
- ▶ Hydrocortisone
- ▶ Methylprednisolone
- ▶ Prednisolone
- ▶ Prednisone
- ▶ Triamcinolone

ORAL HYPOGLYCEMICS

- ▶ Acarbose
- ▶ Chlorpropamide
- ▶ Gliclazide
- ▶ Glyburide
- ▶ Metformin
- ▶ Pioglitazone
- ▶ Repaglinide
- ▶ Rosiglitazone
- ▶ Tolbutamide

ANTIVIRAL

- ▶ Abacavir
- ▶ Nelfinavir
- ▶ Acyclovir
- ▶ Nevirapine
- ▶ Amantadine
- ▶ Oseltamivir
- ▶ Amprenavir
- ▶ Ribavirin
- ▶ Delavirdine
- ▶ Ritonavir
- ▶ Didanosine
- ▶ Ritonavir/Lopinavir
- ▶ Efavirenz
- ▶ Saquinavir
- ▶ Famciclovir
- ▶ Stavudine
- ▶ Ganciclovir
- ▶ Valacyclovir
- ▶ Indinavir
- ▶ Zalcitabine
- ▶ Lamivudine
- ▶ Zanamivir
- ▶ Zidovudine

ANTICOAGULATION THERAPY

- ▶ Dalteparin
- ▶ Danaparoid
- ▶ Enoxaparin
- ▶ Heparin
- ▶ Nadroparin
- ▶ Nicoumalone
- ▶ Tinzaparin
- ▶ Warfarin

HEMOGLOBINOPATHY TREATMENTS

- ▶ Ancestim
- ▶ Filgrastim
- ▶ Epoetin alfa

ANTI-ARRHYTHMICS

- ▶ Digoxin
- ▶ Diltiazem
- ▶ Disopyramide
- ▶ Flecainide
- ▶ Mexiletine
- ▶ Propranolol
- ▶ Quinidine
- ▶ Sotalol
- ▶ Verapamil

CONGESTIVE HEART FAILURE

- ▶ Amiloride
- ▶ Bumetanide
- ▶ Captopril
- ▶ Carvedilol
- ▶ Chlorthalidone
- ▶ Cilazapril
- ▶ Digoxin
- ▶ Enalapril
- ▶ Ethacrynate sodium
- ▶ Ethacrynic acid
- ▶ Fosinopril
- ▶ Furosemide
- ▶ Hydrochlorothiazide
- ▶ Lisinopril
- ▶ Metolazone
- ▶ Quinapril
- ▶ Ramipril
- ▶ Spironolactone
- ▶ Triamterene

ANTIMICROBIALS

- ▶ Ketoconazole
- ▶ Itraconazole
- ▶ Nystatin
- ▶ Griseofulvin
- ▶ Amphotericin B
- ▶ Tirbenafine
- ▶ Rifampin
- ▶ Fluconazole
- ▶ Miconazole
- ▶ Clotrimazole
- ▶ Tolnaftate
- ▶ Flucytosine

OTHERS

- ▶ Nitroglycerin
- ▶ Insulin
- ▶ HIV infection treatments

References

- i Grabenstein JD, Bonasso J. Health-system pharmacists' role in immunizing adults against pneumococcal disease and influenza. *American Journal of Health-System Pharmacy*. September 1, 1999. 56:17S:3S-22S.
- ii Top 200 Rx Products. *Pharmacy Practice*. Volume 17:23. December 2001.
- iii Immunization Toolkit: Community Outreach and Patient Education Fact Sheet Influenza Vaccine 1999-2000. <http://www.hanys.org/immunize/s3.htm>
- iv Canadian Coalition for Influenza Immunization. www.influenza.cpha.ca
- v Statement on Influenza Vaccination for the 1999-2000 Season. Canada Communicable Disease Report Vol. 25 (ACS – 2) 1 June 1999. Health Canada. <http://www.hc-sc.gc.ca/hpb/lcdc/publicat/ccdr/99vol25/25sup/acs2.html>
- vi Pharmacy-Based Immunization Delivery – A National Certificate Program for Pharmacists. Self-Study Learning Program. The American Pharmaceutical Association, 2000.
- vii Influenza Vaccine Information Statement. 4/24/01. Centers for Disease Control and Prevention National Immunization Program. <http://www.cdc.gov/nip>
- viii Influenza and the New Antivirals: potential for Misdiagnosis and Possible Misuse of Antivirals. *Canadian Communicable Disease Report (CCDR)* Vol. 26:23. December 1, 2000. <http://www.hc-sc.gc.ca/hpb/lcdc/publicat/ccdr/00vol26/dr2623ec.html>
- ix Who Needs It? Your Patients Do! Pharmacists' Guide to Promoting Flu Shots. *Canadian Pharmaceutical Journal*. September 2001. 134:7:41-48.
- x Nordenberg T. Colds and Flu: Time Only Sure Cure. U.S. Food and Administration. http://www.fda.gov/fdac/features/896_flu.html
- xi Compendium of Pharmaceuticals and Specialties (CPS) 2002 edition. Therapeutic Guide. Canadian Pharmacists Association.



CANADIAN
PHARMACISTS
ASSOCIATION

ASSOCIATION DES
PHARMACIENS
DU CANADA

1785 Alta Vista Dr.
Ottawa, Ontario K1G 3Y6
Tel (613) 523-7877, 1-800-917-9489
Fax (613) 523-0445, 1-800-601-1904
www.pharmacists.ca
cpha@pharmacists.ca

Canadian Coalition for Influenza Immunization

