

Teaching the Philosophy of Practice as a Key Component of Pharmaceutical Care Practice Response to Questions on the Teaching of the Patient Care Process

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We would like to thank Dr. Rivkin for taking the time to explore the connection between the philosophy of practice and pharmaceutical care practice itself.¹ Specifically, we would like to continue the dialogue as to how pharmaceutical care practice and the philosophy of practice are connected, and the need for further adoption of a philosophy of practice across our profession.

Neither the philosophy of practice, nor the patient care process, is separate from pharmaceutical care practice.² If you are teaching pharmaceutical care as a practice², you are teaching the philosophy of practice, the pharmacists' patient care process, and practice management systems. In addition, teaching the three components is not intended to be linear, but rather an iterative process where all three components are introduced early and revisited often across the curriculum as students' knowledge and experience deepens. We did not find evidence in the literature, however, that this is the way pharmaceutical care practice is currently being taught throughout pharmacy school curricula in the U.S.

We concur with Dr. Rivkin that "...the profession needs to agree on what our practice philosophy is." We would add that the lack of a consensus should not impede teaching philosophy of practice as one of the three core components of pharmaceutical care. The philosophy of practice is the "why" of what we do in pharmacy practice, and adopting a philosophy of practice is a critical component of developing a professional identity – a process that begins upon entering the Pharm.D. professional program.

We look forward to engaging with this discussion of the philosophy of practice across the profession. In the meantime, we advocate for teaching the Cipolle, et al. definition that was expanded upon by Pestka and colleagues and includes: 1) meeting a societal need, 2) assuming responsibility for optimizing medication use, 3) embracing a patient-centered approach, 4) caring through an ongoing patient-pharmacist relationship, and 5) working as a collaborative member of the health care team.^{2,3}

We would welcome the opportunity to work with others toward adopting a universal pharmacy practice philosophy across the profession, and to explore the most effective ways to teach the philosophy of practice to our students.

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References

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