

APPENDIX 1. Definitions of clinical activities.

Clinical Activity ^a	Definition
Deprescribe/discontinue medication ^b	Discontinuing a medication that does not have a compelling indication, is no longer required, or is deemed unnecessary based on the patient's goals of care. This may also include deprescribing of duplicate therapy, defined as discontinuing medications from the same class used for a single indication.
Medication dose change ^b	A decrease or increase of the patient's current medication.
Change in medication timing ^b	Altering the timing of administration of a patient's current medication, for example from noon to suppertime.
Formulation or medication change ^b	Formulation change: The active ingredient of the medicine and the total daily dose are not changed. May be provided in an alternative route (from PO to IM) or alternative form (from solid oral to liquid). This may also include providing recommendations on crushing or splitting oral medications or administering via alternative routes (such as a gastrostomy tube). Medication change: Switch to a medication in a similar class as the current therapy, for example, between different drugs in the same therapeutic class, including proton pump inhibitors, oral anticoagulants, ACE inhibitors, and ARBs.
Recommend an over-the-counter (OTC)/nonprescription medication ^c	Suggest the patient use a nonprescription product or over-the-counter medication, including but not limited to vitamin supplements, topical or oral analgesics, and laxatives.
Medication adherence ^d	Providing instructions on the use of an adherence aid and/or a recommendation provided on how to manage medications (such as suggesting a dosette) OR assessing patients who may benefit from assistance with medication administration, discussing the MAP, recommending initiation of MAP to the case manager and/or patient/caregiver and facilitating initiation of the program by compiling a list of medications to be blister-packed and possible medication administration times OR completing a medication review aimed at reducing pill burden and/or reducing the frequency of medication administrations throughout the day to facilitate blister-packing and/or improve medication adherence.
Patient/caregiver counselling or education ^d	This may involve responding to drug information requests, educating a patient about their disease state, educating on disease- and drug-specific monitoring parameters, providing information on managing missed medication doses, and how to manage their condition with medication and lifestyle modifications, where applicable OR providing medication counselling on prescription and over-the-counter products and clarifying the dose, route, and administration of medications when a new medication is prescribed or when there is a change in medication therapy.
Prescribing ^b	Writing and/or phoning in a prescription for an additional medication to treat an untreated indication, or as add-on therapy to treat a pre-existing condition. This also includes renewing or extending a previous prescription.
Order laboratory test(s) ^b	Ordering a requisition for the patient to have laboratory testing completed or suggesting that a laboratory test or diagnostic test be done (such as a pulmonary function test). May also include conducting or recommending at least 1 physical assessment, for example, checking blood pressure, heart rate, and/or oxygen saturation.
Collaborate or intent to collaborate with another health care professional ^d	This primarily involves notifying the referring provider (other than the case manager), nurse practitioner, primary and/or specialist physician (via fax or email) about the pharmacist consultation and any recommendations or interventions that resulted from the pharmacist's assessment of the patient. In the pharmacist's documentation, this could be noted as the need to seek assistance or more information from another health care professional and/or request to work with another health care professional to resolve both medication-related and/or non-medication-related concerns (such as financial concerns, etc.).
Referral to another health care professional ^b	Pharmacist recommends (either to the patient/caregiver or case manager) or initiates a referral to another care provider (such as family physician, specialist physician, nurse practitioner, physical therapist, or dietician) as suggested in the consultation summary documentation and/or scanned documentation to another provider that is logged into the Meditech electronic charting system. May also include referrals to community support services (for example, Alzheimer Society First Link, Meals on Wheels).
Seamless care ^d	Pharmacist performs medication reconciliation and/or medication review for patients who are transitioning back to the community from the hospital, restorative care unit, or alternate level of care designation in an acute care hospital. This also includes transfer of patients among continuing care facilities and/or from the community. Includes communicating with the patient's community pharmacy regarding changes to blister-packed medications or initiation of blister-packing for a patient, verifying dispensing history, coordinating home deliveries, requesting safety engineered diabetic devices or other supplies required for MAP services, and/or reconciling medication information from multiple community pharmacies.
Administer injection ^d	Pharmacist administers subcutaneous insulin injection.

ACE = angiotensin-converting enzyme, ARB = angiotensin receptor blocker, MAP = Medication Assistance Program.

^aOther activities that were conducted at initial consultations included mental health assessments (such as the Depression Rating Scale questionnaire, Geriatric Depression Scale, Cornell Scale for Depression in Dementia, and Hamilton Depression Rating Scale), evaluation of blood sugar readings and subsequent insulin adjustments, and packaging old, unused, or expired medications for appropriate disposal to promote safer medication use in the home.

^bThese clinical activities could be classified as an intervention or a recommendation.

^cThis clinical activity was classified only as a recommendation.

^dThese clinical activities were classified only as interventions.

Appendix to: Gill J, Duteau E, Bungard TJ, Kuzyk D, Danilak M. The role of home care pharmacists in the Edmonton Zone: a retrospective study. *Can J Hosp Pharm.* 2023;76(1):56-62.