

DEVELOPMENT OF A PHARMACY-DRIVEN PROTOCOL FOR THE MANAGEMENT OF IMMUNOSUPPRESSANT AGENTS USED IN THE HEMATOPOIETIC STEM CELL TRANSPLANT POPULATION (A2), Susie Jiing, Erin Corella, Joseph Bubalo. Oregon Health & Science University, Portland, OR (jiings@ohsu.edu) IRB approved.

The narrow therapeutic drugs used in the hematopoietic stem cell transplant (HSCT) population supports the role of a clinical pharmacist to streamline the variable management of immunosuppressive agents such as cyclosporine, tacrolimus or sirolimus. This is a retrospective evaluation of 70 immunosuppressive drug levels pre and post-implementation of the pharmacy-driven protocol. Data collected includes type and day of transplant, concomitant drugs to effect renal or hepatic function related to toxicity and/or clearance of the agents, appropriateness of drawn levels, documentation of goal trough range, analysis of drug levels, and review of results from the healthcare provider satisfaction survey. A preliminary review of drug levels showed 88% (29/33) were drawn at appropriate trough times, 30% (10/33) were within goal range, 18% (6/33) were within goal range and trending out of goal, 27% (9/33) were not within goal range and trending towards goal, 21% (7/33) were not within goal range and not trending toward goal, and 3% (1/33) were without a documented goal. The pharmacy-pilot protocol and procedures guideline in the management of immunosuppressant agents in the HSCT population will be

reviewed by the Pharmacy and Therapeutics Committee.
Upon approval, additional results will be discussed.