

TREATMENT INTERVENTIONS BY CLINICAL PHARMACISTS IN A DIABETIC SAFETY NET POPULATION (B1), Rory O'Callaghan, USC School of Pharmacy, Los Angeles, CA (rory.ocallaghan@usc.edu) IRB approved.

Diabetes is a growing epidemic in the United States, accounting for nearly 20% of national health care costs. As the economy struggles the demand for safety net clinic services is also rising. These clinics serve a predominance of ethnic minorities with a high prevalence of diabetes. Studies have demonstrated an association between clinical pharmacy services and improved diabetes control; however most studies provide limited details on the specific types of treatment interventions made by clinical pharmacists. The primary objective of this study is to describe the types of interventions made by clinical pharmacists in a diabetic safety net population previously shown to have improved clinical outcomes when compared to a usual care cohort. The secondary objective is to estimate the economic impact of these interventions by determining potential cost-savings to the health care system. This is a retrospective analysis of 222 diabetic adults receiving clinical pharmacy services in safety net clinics from January 1, 2004 through December 31, 2006. Data regarding specific pharmacist interventions will be collected from an electronic medical record and grouped into pre-defined discrete categories. The cost-savings of these interventions will be approximated using a standardized cost analysis software program specific to underserved populations in our metropolitan area. Results

and conclusions will be presented upon completion of data collection and analysis.