

Appendix 3. Summary of the probability of avoided adverse drug event and resources associated with the clinical pharmacy interventions, including examples.

Probability of avoided adverse drug event	Categories of resources associated with the interventions
0.03	‘Requesting a lab test’ intervention’. <u>Example:</u> Patient with hepatocellular carcinoma was admitted due to fever. The clinical pharmacist requested vitamin B12 level.
0.1	‘Discontinuation of a medication’, ‘addition of another medication’, ‘switching to alternative medication’, ‘increase in medication duration’, ‘change in medication route’, ‘increase in medication frequency’, ‘change in medication strength’, ‘increase in medication dose’, ‘decrease in medication duration’, ‘decrease in medication frequency’, ‘decrease in medication dose’, ‘requesting a lab test’, ‘requesting a diagnostic test’, ‘addition of a prophylactic agent during hospitalization’. <u>Example:</u> Patient with gastro-esophageal cancer (stage IV) was admitted because of severe nausea and low phosphorus level (0.83 mmol/L). Hence, the clinical pharmacist recommended potassium phosphate 20 mmol intravenous over 6 hours.
0.2	‘Discontinuation of a medication’, ‘addition of another medication’, ‘switching to alternative medication’, ‘increase in medication dose’, ‘increase in medication frequency’, ‘addition of a prophylactic agent during hospitalization’, ‘requesting a lab test’, ‘therapeutic drug

	monitoring', 'increase in medication duration', 'decrease in medication dose', 'addition of a culture test' and 'requesting a diagnostic test'. <u>Example:</u> Patient with acute lymphoblastic leukemia on chemotherapy, had absolute neutrophil count value of 0.3. Therefore, the clinical pharmacist recommended one dose of filgrastim 300 mcg subcutaneously before chemotherapy.
0.3	'Discontinuation of a medication', 'addition of another medication', 'switching to alternative medication'; 'increase in medication dose', 'increase in medication frequency', 'addition of a prophylactic agent during hospitalization', 'requesting a lab test', 'therapeutic drug monitoring', 'decrease in medication duration', 'decrease in medication dose', 'requesting a diagnostic test'. <u>Example:</u> Patient with hepatocellular carcinoma on methotrexate only, therefore the clinical pharmacist recommended to start leucovorin 24 hours after methotrexate dose.
0.4	'Discontinuation of a medication', 'addition of another medication', 'switching to alternative medication', 'increase in medication dose', 'decrease in medication dose', 'addition of a prophylactic agent during hospitalization', 'therapeutic drug monitoring', 'decrease in medication frequency'. <u>Example:</u> Patient with pancreatic cancer was on haloperidol and granisetron together. Hence, the clinical pharmacist recommended to discontinue granisetron and switch to an alternative medication to avoid QTc interval prolongation.

0.5	‘Discontinuation of a medication’, ‘switching to alternative medication’, ‘decrease in medication dose’, ‘addition of a prophylactic agent during hospitalization’. <u>Example:</u> Newly diagnosed patient with light chain multiple myeloma was admitted due to severe hip pain. Patient was on empagliflozin to manage his type 2 diabetes mellitus. The clinical pharmacist recommended to stop empagliflozin and switch to an alternative medication (non-sodium glucose co-transporter inhibitors) to prevent infections.
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