

Dear Sir/Madam

I completely support OPA's position that pharmacists should be able to refill chronic medications. pharmacists have been helping patient's with chronic conditions to manage

thier medications. help patients adherence and patients elemination of unnessesary medications or supplements taken.

Pharmacists adopted many programs to help elderly patinets and patients with multible conditions to better adhere and be aware of each medication best use. brown bags is an example of phramacists initiated program to help patients with multible chronic conditions better understand and adhere to taking thier medications and eleminate or stop medictaions patients didn't need.

This program is now recognized from the ontario government as MEDS Check witha proper compensation for pharmacists for thier role helping patients all around ontario to better manage thier medications.

Pharmacists in Ontario have always played a significant role in all smoking cessations intiatives/campaign and or studies. in our pharmacy for example we have a smoking cessation clinic done every year to support our patients with this hard but very important task to be smoke free.

Pharmacists always used pharmacy allowences to support clincs like flu shot clinics, smoking cessation, blood pressure, diabeties and blood pressure managing clincs .. etc

through these clincs as a phramacist using my knowledge and expertise. I assess patients and refer them to other health care providers as needed.

As a pharmacist I use my knowledge and profisional judgement to work with physicians to modify priscriptions and manage medications interactions given by multible prescribers.

There was many times when I felt like my hand are tied and I wish I can provide better care for my patients but I' m not able to becuase of some regulations.

Here is an example. one of my elderly patients with multiple chronic conditions. he came to our pharmacy for the diabetic clinc we had for 2 days. When I saw my patient I was

surprised how his skin is so yellow in colour and his eyes too. I suspected he got a high billirubin level and need some lab tests to be done to start with giving the required treatment. contacting his family physician I found that his physician is away for 2 weeks .

The patient ended up in the hospital to get the proper lab tests done and proper care.

many other situations where pharmacists were able to help patient's who don't have family physicians. or helping patients in emergency situations where patients' family physicians away or can't be reached.

Phramacists have been helping and we can help even more if we get the chance. pharmacists with a new scope of practice can be a key solution to help the load of overcrowded waiting rooms at Dr's offices and more important helping patients waiting in emergency rooms in hospital where they are unable to get thier physicians care in a timely manner.

To better meet the needs of ontarians now and in the future, where pharmacist is the most trusting and easy accessible health care profesional. I support the OPA position to let pharmacists respond promptly to thier patients' needs, prevention of disease and promotion of health and wellness.

Regards,
Margreat Gerges
Pharmacist