Figure 1. Project ImPACT Collaborative Care Process

Patient identified as being "at risk"

Pharmacist provides overview of service that covers:
- Management of a "silent disease"
- Description of what will be received
- Treatment plan options
- Schedule and value

Therapy Initiated by Prescriber

Patient may learn of risk for CAD in different ways:
- Physician office appointment
- Community screening event
- Patient learns:
- Cholesterol levels
- Treatment options
- Patient signs informed consent

Assessment for Therapy Improvements

Pharmacist confers with physician to establish and obtain:
- Agreement for monitoring
- Guidelines for treatment
- Certificate of Medical Necessity

Pharmacist communicates with patient so that he/she is actively involved in and understands his/her:
- Current health status
- Lipid profile results and level of risk
- Diet, exercise, drug therapy regimens
- Treatment plan and target goals
- Responsibilities for compliance
- Opportunities to improve outcomes

Point Of Care Communication and Technology

Pharmacist communicates with physician:
- Objective results
- Progress notes
- Evaluation of patient therapy/needs
- Plan for optimizing therapy

Patient understands his/her:
- Risk factors
- Cholesterol levels
- Treatment plan
- Target goals
- Progress

Pharmacist provides overview of service that covers:
- Management of a "silent disease"
- Description of what will be received
- Treatment plan options
- Schedule and value

Patient completes:
- Medical history
- Patient learns about:
- Risk factors
- Cholesterol levels
- Treatment plan
- Target goals

Pharmacist communicates with patient so that he/she is actively involved in and understands his/her:
- Current health status
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Patient, Pharmacist, and Physician Collaboration Producing Improved Persistence and Compliance with Optimal Dyslipidemia Therapy

CAD = coronary artery disease; ImPACT = Improve Persistence And Compliance with Therapy.