New guidelines and position statements are being published with increasing regularity from a variety of sources, which impact both clinical and practice issues in oncology patient care.

Recent publications affect the management of human epidermal growth factor receptor 2–positive and –negative breast cancer, recognize the effects of obesity on cancer, and standards of practice for clinical pharmacy.\(^1\)\(^,\)\(^,\)\(^2\) Standardization of care is a prominent goal of guidelines in support of optimal patient outcomes, and although these publications offer useful guidance, it is not infrequent that questions arise regarding our performance with the guidelines currently in place. As the American Society of Clinical Oncology and other organizations put quality initiatives into place, there is concern about how practices will be alerted and operationalize them in a timely manner to support patient care.\(^3\)

Most practices will be measured against published guidelines, and there are continuous efforts to create specific, measurable goals in the provision of care for patients with cancer illustrating that guideline-level care is being delivered. Two articles in this issue offer important insights into aspects of patient care and associated opportunities for pharmacists. In the article by Stewart and colleagues, we find that evidence-based care of venous thromboembolic disease recommendations, which have been well publicized through multiple venues, is still not applied consistently in some practices (see “Prescribing of Low-Molecular-Weight Heparin and Warfarin in Patients with Acute Venous Thromboembolism and Active Cancer” on page 110). This article provides baseline numbers, which could be used to support a pharmacy service expansion and assist our busy medical providers in updating venous thromboembolism care. In the article by Huynh and Trovato, we see a timely assessment and discussion of patient education as they follow directions for self-care with the use of targeted antineoplastics (see “Assessment of Patients’ Knowledge and Management of Chemotherapy-Related Adverse Effects” on page 122). In both instances, there is an opportunity for pharmacists to impact patient care and a clear need for additional support for patients.

Investigators also are documenting the readiness of pharmacists to take on more responsible roles as part of improving pharmacists’ clinical practice and emphasizing the need to better define clinical practice.\(^6\)\(^,\)\(^7\) The changing face of healthcare is likely to create many new opportunities, making this a great time to grow your practices. If pharmacists do nothing, it is very likely that other groups of practitioners will step in and fill practice gaps as they appear. The organizations that employ pharmacists have a need for practitioners who can show quality outcomes and the ability to improve patient care. I applaud the efforts of Drs Stewart, Huynh, Trovato, and colleagues, and would encourage other practitioners to step forward and take the opportunity to improve patient care and continue to validate the care currently provided.

As you are assessing opportunities, be sure to take advantage of proven processes in the work that has been previously published by your predecessors in pharmacy. Design your systems so they can be measured and are easily reportable. As you review or develop a service, does it encompass the current consensus statements? Do you have baseline outcomes that you can compare your future results against? Think about these and the other individualized components of your projects as you take these steps forward.
Pharmacists are trained in the performance of quality projects, have increased levels of education and practice skills through residency, and sufficient opportunities in daily practice to make a difference, as shown by the aforementioned articles. Look carefully at your budget and your practice site(s) to see where you can start today. By building quality into every new project, making data and outcomes reportable within increasingly computerized health records, and documenting outcomes, pharmacists can move their practices forward.

Good luck as you move into the New Year.

References