

score ( $r=0.452$ ,  $p<0.018$ ) and IL $\delta$ 1 and WOMAC score ( $r=0.441$ ,  $p<0.021$ ). In responders, we found a moderate negative correlation between PDGF and VAS score ( $r=-0.446$ ,  $p<0.012$ ) and PDGF and WOMAC score ( $r=-0.39$ ,  $p<0.037$ ).

**Conclusion** Results indicated a unique intra-articular PRP injection offers a clinical improvement in patients with hip OA, with a correlation between growth factors and cell concentration and clinical results.

#### REFERENCES AND/OR ACKNOWLEDGEMENTS

No conflict of interest.

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#### A COMPARATIVE STUDY OF THE SATISFACTION OF CLIENTS WITH THE SERVICES OF AN OUTPATIENT PHARMACY IN A TERTIARY HOSPITAL

AC Viney\*, CN García Matillas, S Núñez Bracamonte, E CONESA NICOLÁS, A Lloret Llorca, C Juez Santamaría, MC Mira Sivent, IG Pérez Pérez, MS García Simón, MDM Sánchez Catalicio, MH García Lagunar. *Hospital General Universitario Santa Lucía de Cartagena, Servicio de Farmacia Hospitalaria, Cartagena, Spain*

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**Background** Evaluation of patient satisfaction with outpatient pharmacy services (OPS) is important to help identify areas that require improvement and enhance positive changes in the service.

**Purpose** To analyse the evolution of patient satisfaction with the services of an outpatient pharmacy of a tertiary hospital, and compare the results with those of other OPS.

**Material and methods** A retrospective comparative study of the results of a satisfaction survey carried out on outpatients in 2015, 2016 and 2017 at a tertiary hospital, and a review of results reported by other OPS at the National Congress of Hospital Pharmacy.

The survey consisted of four parts:

- a. general questions (sex, age, frequency of visits).
- b. organisation.
  1. time;
  2. quality of the information given by the pharmacy technician;
  3. hospital staff correctly identified;
  4. privacy;
  5. satisfaction with the services of the pharmacy technicians.
- c. pharmacists.
  1. availability for consultation;
  2. satisfaction with the information given by the pharmacist;
  3. satisfaction with pharmacist care;
  4. time dedicated to the consultation;
- d. overall satisfaction.

Answers of b), c) and d) were scored as follows: 1=very bad, 2=bad, 3=normal, 4=good, 5=very good. There were several free text boxes to add observations. A mathematical adjustment was made for the transformation of the scale from 1–5 to 1–10.

Over the 3 years, improvements were made, such as an appointment calendar, staff identification cards and a parking area for patients.

**Results** One-hundred and eight, 104 and 84 surveys were completed in 2015, 2016 and 2017, respectively. Average scores for each question in 2015, 2016 and 2017 respectively were: b. 1) 6.84; 7.10; 6.67; b. 2) 8.31; 8.37; 8.19; b. 3) 7.80; 8.98; 8.32; b. 4) 7.17; 8.99; 5.57; b. 5) 9.11; 9.53;

8.84; c. 1) 7.70; 9.03; 8.51; c. 2) 8.00; 9.44; 8.91; c. 3) 8.58; 9.58; 9.17; c. 4) 7.45; 9.12; 8.42; and d) 8.29; 9.08; 8.67.

Observations were excessive waiting times, opening hours and location.

The results of six other OPS were reviewed.

**Conclusion** Satisfaction surveys are useful tools to gain knowledge about patients' preferences and needs, and implementing future actions to improve the service. A good maintained score was observed for the services and care given by pharmacy technicians and pharmacists. Waiting times obtained the worst score consecutively. The worst-rated aspects were waiting times and opening hours, coinciding with the results reviewed of other OPS.

#### REFERENCES AND/OR ACKNOWLEDGEMENTS

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#### ABSTRACT WITHDRAWN