Appendix 1. The pharmacist intervention form

<table>
<thead>
<tr>
<th>PHARMACIST INTERVENTION FORM</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>DATE:</strong> / /</td>
</tr>
<tr>
<td><strong>PATIENT:</strong></td>
</tr>
<tr>
<td>Last name:</td>
</tr>
<tr>
<td>First name:</td>
</tr>
<tr>
<td>Age: years / Weight: Kg</td>
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<tr>
<td>Sex:</td>
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</tbody>
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1. **DRUG RELATED PROBLEM (1 choice):**
   - 1. Non conformity to guidelines or contra-indication
   - 2. Untreated indication
   - 3. Subtherapeutic dosage
   - 4. Supratherapeutic dosage
   - 5. Drug without indication
   - 6. Drug interaction
     - To be taken into account
     - Use with caution
     - Combination to be avoided
     - Combination contra-indicated
     - Documented but not in Vidal®

2. **INTERVENTION (1 choice):**
   - 1. Addition of a new drug
   - 2. Drug discontinuation
   - 3. Drug switch
   - 4. Change of administration route
   - 5. Drug monitoring
   - 6. Administration modalities optimisation
   - 7. Dose adjustment

3. **DRUG NAME (INN):**
   - A Alimentary tract & metabolism
   - B Blood & blood forming organs
   - C Cardiovascular system
   - D Dental
   - E Endocrine system
   - F Enzymes
   - G Genito urinary system & sex hormones
   - H Systemic hormonal preparations
   - J Anti-infective for systemic use
   - L Anti-neoplastic & immunomodulating agents
   - M Musculo-skeletal system
   - N Nervous system
   - P Antiparasitic products
   - R Respiratory system
   - S Sensory organs
   - V Various

4. **INTERVENTION FOLLOW-UP:**
   - Accepted
   - Non accepted
   - Non assessable

**DETAILS:** If necessary, give details on any aspects of the detected DRP and describe the intervention, precisely.

**Context**

**Problem**

**Intervention**