

Implementation of Telepharmacy in the Pharmaceutical Services The Professional Guide describes considerations for the development and implementation of Telepharmacy across various settings, including goals, healthcare benefits, required tools, and major strategies for implementation.(48) It was for this reason that telepharmacy was adopted to resolve pharmacist shortages and extend pharmaceutical services to areas of need. The study suggests that efforts to reduce resistance to smartphones, provision of digital support, and establishment of strong pharmacist–patient relationships are important in promoting telepharmacy in such an area to realize its maximum effect.(43) It services for telepharmacy in acute care can be grouped into two general categories: hospital pharmacy services on–site 24/7, complemented by on–site telepharmacists enhancing order review efficiency; and a first–after–hours–service where medication order reviews were performed by on–site pharmacists without any telepharmacists. However, there are only a few randomized controlled studies regarding the clinical effectiveness of telepharmacy in cardiovascular conditions, with strong evidence limited to telemonitoring for hypertension and diabetes. Although not yet fully established, the complete clinical efficacy and cost–effectiveness of telepharmacy could present a unique opportunity to improve screening and care in cardiovascular conditions by its inclusion in healthcare models. The identified studies were categorized into three major areas of pharmacy practice: (1) supporting clinical services, (2) remote education and management of special pharmacies, and (3) prescription and reconciliation of drug therapies. Additional studies are needed to better define the impact of tele–ICU pharmacists on ICU and hospital length of stay and morbidity and mortality rates.(44) In this study The scorecard to implement Telepharmacy consists of 50 indicators distributed across five areas of interest: general aspects, 18; pharmacotherapeutic follow–up, 12; home drug delivery, 15; patient information and education, 2; coordination with the care team, 3.(42) Due to the aging of the population and geographical difficulties, an experimental trial of telepharmacy is being carried out in remote areas, including Toyone village, in Japan. Researchers screened the titles and abstracts, followed by reviewing full texts that fit into inclusion criteria. The data extracted included the details about the study, pharmacists' interventions delivered through telepharmacy, and the benefits arising from its implementation. Issues related to implementation include managing various electronic health records, different practices in hospitals, and communication with staff onsite. Pharmacists' roles and actions were classified based on the International Pharmaceutical Federation's COVID–19 guidelines.(41) Such critical care pharmacy expertise is being extended to several sites with limited resources during non–traditional hours and has proven clinical and financial benefits. This exploratory study interviews four elderly patients receiving telepharmacy in a depopulated mountainous area. In the patients' view, telepharmacy can help them resolve access issues and improve convenience, from medical examinations to obtaining medications. In such 24 x 7 setups, a telepharmacist augmented the speed at which medication orders were processed; median turnaround times improved by an average of 50–70%. Various technologies, models of care, and interventions are used to provide services for different populations with numerous conditions, including cardiovascular disease. Original research relating to the implementation of telepharmacy during the COVID–19 pandemic was the main scope.(49)