

## The Evolving roles of Pharmacists in Critical Care Units

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### Abstract

The field of clinical pharmacy had undergone several phases of advancement in past few decades after overcoming through various challenges in the aspects of education and recognition[1]. Rather than identifying the medication therapy related problems in the pharmacotherapy, the contribution of pharmacists in the management of toxicology cases were defined since 1980's[2]. Lusietto M et .al had identified that the presence of a clinical pharmacist in toxicology team is beneficial in improving the clinical outcomes[3]. Patients on critical care units may receive multiple medications during their stay and it may much difficult to interpret which drug may have caused the insult. In such scenarios clinical pharmacists are able to apply their pharmacy knowledge and suggest appropriate therapeutic interventions. The field of toxicology lacks adequate scientific evidence for the development of guidelines and other resources[4]. In such scenarios clinical pharmacists are able to play as researcher by publishing case reports or series, which may aid in toxicological research. Pharmacist being a professional coming from analytical background are able to perform point of care testing in biological samples which completely aids in prognostication identification of endpoint to particular treatment given[5].

**Received:** September 04, 2022; **Accepted:** September 15, 2022; **Published:** September 29, 2022

### Biography

Avin Mathew is a Critical Care Clinical Pharmacist working at Royal Care Super Speciality Hospital, Neelambur, Coimbatore. He completed his 6 year PharmD Programme from KMCH College of Pharmacy, Coimbatore.

His keen interests include Antimicrobial Stewardship, Toxicology, and Critical Care medication management. He also have much appreciable skills in creating Drug orders sets and protocols in Philips IntelliSpace Critical Care and Anaesthesia® which enhances the safe use of medicines within ICU. His keen interests in the field of toxicology includes, Paraquat poisoning, Aluminium phosphide poisoning and Organophosphorus poisoning.