

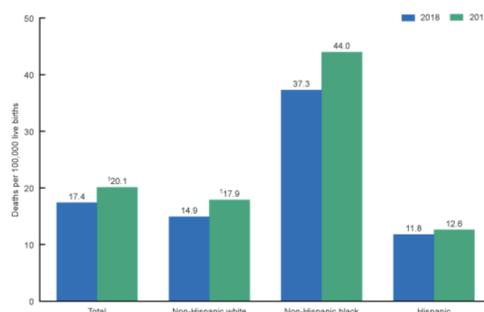
Maternal Care: A Qualitative Study of the Role of the Pharmacist

Student authors: LaShonda Frye, Caitlin Dreher, Moji Awe, Stephanie Frierson Rios

Faculty Mentor: Tisha Felder, PhD, MSW

BACKGROUND

Figure 1. Maternal mortality rates, by race and Hispanic origin: United States, 2018–2019



- Maternal mortality continues to increase in the U.S.
- Pharmacists have minimal representation in obstetrics and maternal care.
- The inclusion of a clinical pharmacist in the hospital multidisciplinary team in the obstetrics setting could help reduce medication errors and improve medication safety.
- The objective of this study is to explore ways that pharmacists can contribute their expertise in treating pregnant and postpartum patients in the hospital setting.

PROPOSED RECRUITMENT METHODS

- Obtain approval from the University of South Carolina Institutional Review Board.
- Recruit ~20 licensed healthcare professionals (e.g., OB-GYN, nurses, doulas) across the U.S. that work with pregnant and postpartum patients in the hospital setting.
- Forward a study invitation via email with key contacts, leaders and professional organizations focused on maternal care.

Pharmacists are an under-utilized resource that can improve the state of maternal care.



From February 1st, 2018 through May 31st, 2018, a study was conducted where a pharmacist was hired to be a dedicated inpatient maternal-fetal medicine clinical pharmacy specialist.

During that time frame, the pharmacist provided more than

1000

direct clinical interventions to improve patient care.

Rosenbloom JI, Sabol BA, Chung C, et al. Improving medication error identification with an inpatient maternal-fetal medicine pharmacist. *American Journal of Obstetrics and Gynecology*. 2019;220(6):602-603. doi:10.1016/j.ajog.2019.03.007

PROPOSED RECRUITMENT METHODS (cont.)

- Schedule eligible participants to participate in qualitative interview via phone/Zoom at their convenience.

PROPOSED DATA COLLECTION

- We will conduct a 20-to-30-minute audio-taped interview using a structured interview guide.
- We will ask health care professionals to share how they work with pharmacists and their perspectives on pharmacists' involvement with pregnant or postpartum patients in the hospital setting.

PROPOSED DATA ANALYSIS

- Each participant's audio file will be transcribed verbatim.
- We will develop a preliminary codebook and two team members will code all transcripts.
- Using the transcripts, we will identify patterns and relationships between codes and themes using the constant comparison method.³
- The entire team will discuss and reach consensus on the final themes.

ACKNOWLEDGMENTS

- This project is supported by the UofSC SMART Program (CD, MA) and UofSC Honors College SURF Program (MA).

REFERENCES

1. Rosenbloom JI, Sabol BA, Chung C, et al. Improving medication error identification with an inpatient maternal-fetal medicine pharmacist. *American Journal of Obstetrics and Gynecology*. 2019;220(6):602-603. doi:10.1016/j.ajog.2019.03.007
2. D'Ambrosio A. U.S. Maternal Mortality Rate Climbs in 2019. *Medical News*. <https://www.medpagetoday.com/obgyn/pregnancy/91888>. Published April 1, 2021. Accessed July 23, 2021.
3. Glaser BG, Strauss AL. *The discovery of grounded theory: Strategies for qualitative research*. Transaction Publishers; 2009.