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**THE SCIENTIFIC TALKS OF ESSENTIAL ISSUE, INVOCATION, PERSPECTIVES, INCLINATIONS
AND FEATURES OF THE CLINICAL PHARMACISTS GLOBALLY**

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**სამეცნიერო საუბრები კლინიკური ფარმაცევტების გლობალური პერსპექტივების, გამოწვევებისა
და დამახასიათებელი თავისებურებების შესახებ**

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რეზიუმე

კვლევის მიზანი იყო კლინიკური ფარმაცევტების პროფესიის, მსოფლმხედველობისა და ხასიათის სპეციფიკის თავისებურებების შესწავლა მთელს მსოფლიოში. კლინიკური ფარმაცევტები უზრუნველყოფენ პაციენტის მოვლის თანმიმდევრულ პროცესს, რაც უზრუნველყოფს პაციენტზე ზრუნვის შესაბამისობას, მკურნალობის ეფექტურობასა და უსაფრთხოებას. კლინიკური ფარმაცევტები კონსულტაციებს უწევენ ექიმებს და სხვა ჯანდაცვის პროვაიდერებს, რათა მათ შეიმუშაონ და განახორციელონ მკურნალობის გეგმა, რომელიც შეიძლება შეესაბამებოდეს სამედიცინო ჯგუფის მიერ დასახულ პაციენტის საერთო მკურნალობის მიზნებს. კლინიკური ფარმაცევტები იყენებენ სპეციალიზებულ ცოდნას მედიკამენტების მეცნიერული და კლინიკური გამოყენების შესახებ, მათ შორის წამლის მოქმედების, დოზირების, გვერდითი ეფექტებისა და წამლების ურთიერთქმედების ჩათვლით, ჯანდაცვის გუნდის სხვა წევრებთან თანამშრომლობით. კლინიკური ფარმაცევტები ეყრდნობიან თავიანთ კლინიკურ გამოცდილებას წამლების რაციონალური გამოყენების გზით. კლინიკური ფარმაცევტი ეყრდნობა ეთიკურ და პროფესიულ დამოკიდებულებებს პაციენტებთან, რათა უკეთ დააკმაყოფილოს თითოეული პაციენტის ფარმაცევტული საჭიროებები და სურვილები. კლინიკური ფარმაცევტები ჰგვანან ლიცენზირებულ, განათლებულ ექიმებს, რომლებიც პრაქტიკას ასრულებენ ყველა სახის ჯანდაცვის დაწესებულებაში და ორიენტირებული არიან წამლების ინტეგრირებულ მართვაზე. ეს სპეციალიზებული ფარმაცევტები ყურადღებას ამახვილებენ მედიკამენტების ოპტიმალურ გამოყენებაზე, დოზირებაზე, მონიტორინგზე, წამლის გვერდითი ეფექტების გამოვლენასა და ხარჯების ეფექტურობაზე პაციენტისათვის ოპტიმალური შედეგების მისაღწევად. კლინიკური ფარმაცევტები მთელს მსოფლიოში სულ უფრო მეტად იპყრობენ ყურადღებას, როგორც ამბულატორიული, ასევე სასწრაფო და გადაუდებელი სამედიცინო დახმარების ჯგუფის მნიშვნელოვანი წევრები. სტატია აღწერს კლინიკურ ფარმაცევტთა საქმიანობის რეალურ და პოტენციურ სფეროს მთელს მსოფლიოში.

INTRODUCTION. Clinical pharmacists work directly with physicians, other healthcare professionals, and patients to ensure that medications prescribed to patients contribute to the best possible health outcomes. Clinical pharmacists work in healthcare settings, where they communicate frequently and regularly with physicians and other healthcare professionals, which contributes to better coordination of care. Clinical pharmacists are educated and trained in many direct patient care settings, including medical centers, clinics, and many other healthcare facilities. Clinical pharmacists are often granted patient care privileges by collaborating physicians and/or healthcare systems, which allows them to perform the full range of drug decision-making functions within the team. medical condition of a patient. These privileges are based on the clinical pharmacist's demonstrated knowledge in pharmacotherapy and on his clinical experience record. This specialist knowledge and clinical experience is usually acquired through residency training and specialist certification.

Aims of the study was to analyze and determine the peculiarities of specificities of invocation, outlook and character of the clinical pharmacists globally.

Research methodology: The main question of this article was to research and analyses the specificities of invocation, outlook and character of the clinical pharmacists globally. We have searched and analyzed PubMed, Web of Sciences, Clinical key, Tomson Routers and Google Scholar mostly, using search terms bases, including the words to research and analyses specificities of invocation, outlook and character of the clinical pharmacists globally. In addition to the desired subject understanding. Then, each article was discussed and an abstract of the total information gathered during the process was provided, aiming at easy understanding of the public. To establish these outcomes, over two hundred articles were investigated. We brought together all published data to comprehensively examine the effects in a systematic review, to define the roll out of the study of the research and analyses of specificities of invocation, outlook and character of the clinical pharmacists globally.

RESULTS AND DISCUSSION. Clinical pharmacists often apply their knowledge of drugs to a patient-specific treatment plan and evaluate dosage suitability, side effects, efficacy, and drug interactions. If necessary, the clinical pharmacist can discuss any issue and advise the physician, who is primarily responsible for prescribing drugs to patients, to ensure optimal use of the drugs. To practice, clinical pharmacists must graduate in a recognized area of qualification. The specific requirements for these degrees may differ depending on the country of operation. Subjects that are commonly found in the university's clinical pharmacist program include biology, chemistry, pathology, pharmacology, and socio-behavioral sciences. Most clinical pharmacists in the United States hold a Ph.D. in Pharmacy (Phar.D.) in addition to several years of postgraduate education such as a pharmaceutical residency. They can be certified as a clinical pharmacist through the Pharmaceutical Specialties Council, which is independent of the American Pharmacists Association. Education and certification requirements in other countries may differ depending on the guidelines set by the regulatory authorities. Clinical pharmacists are responsible for providing safe, effective, and timely drug therapy. Through various tasks in the department, they provide support for centralized and decentralized drug use systems, as well as optimal drug therapy for patients with a wide range of medical conditions. Clinical specialist pharmacists are competent in delivering direct patient-centered medical care and integrated operational pharmacy services in a decentralized practice with the participation of doctors, nurses and other hospital staff. These physicians are aligned with targeted multidisciplinary programs and specialized services to ensure drug therapy management within specialized patient care services and to ensure that pharmaceutical care programs are properly integrated across the facility. In these clinical roles, clinical pharmacists are involved in all necessary aspects of the drug use system, while providing comprehensive and personalized pharmaceutical care to patients in their assigned areas [1,2].

Pharmaceutical care services include, but are not limited to, assessing patient needs, integrating age and disease characteristics into drug therapy and patient education, adjusting patient care, and providing clinical interventions to identify, mitigate and prevent adverse drug reactions. Specialist clinical pharmacists serve as department resources and liaison with other departments, hospital staff, or external groups. They also lead clinical research and practice improvement projects as well as quality patient care and compliance initiatives to improve drug use or pharmaceutical practice. Specialist clinical pharmacists provide education and training related to medicines and practice and actively act as mentors for doctoral students and pharmacy residents. Where appropriate, participation in a quality management program is expected to improve services by monitoring processes, analyzing data, implementing interventions to improve and evaluating the effectiveness of those interventions. The responsibilities of a clinical pharmacist may include setting and maintaining long- and short-term goals for a quality management program; track and document quality improvement projects to make progress towards quality improvement goals; as well as consulting and training of personnel on priorities and plans of quality management [3,4].

In many cases, the clinical pharmacist works directly with patients to help them understand the drugs they are taking and to encourage them to take the drugs as directed; The Clinical Pharmacist manages patient lines, clinical areas, and therapeutic programs; Promotes pharmacy services, direct patient

care programs, drug use systems in designated wards and areas of care to ensure that drug use activities meet patient needs, evidence-based best practices and regulatory standards. Develops and implements control measures and restriction / monitoring programs; The clinical pharmacist monitors and evaluates the prescribed pharmacy programs in terms of operational, quality and financial efficiency and regularly compares himself with the best local and national practices; The clinical pharmacist proactively identifies practice issues that need to be assessed and promotes clinical research projects, quality improvement initiatives, or the training of healthcare professionals as needed to advance the practice; Develops and oversees policies and procedures for drug procurement, drug use, drug distribution and drug control; The clinical pharmacist ensures that the pharmacy is an integral part of the health care delivery system and contributes to the improvement and expansion of pharmacy services / programs; Provides direct patient care and clinical practice, including decentralized and service-oriented programs; The clinical pharmacist is well versed in decentralized pharmacy services and clinical pharmacy programs; Works as an active member of a multidisciplinary team and collaborates with healthcare providers in decentralized patient care areas to provide patient-centered care; Identifies high-risk patients and implements measures to improve quality and safety; Makes appropriate, evidence-based, patient-centered drug recommendations; The clinical pharmacist is involved in the management of emergency medical care; Providing a review of medication intake at discharge, approval and counseling as needed; Provides pharmaceutical services throughout the medical center; Owns hospital IT systems and drug ordering systems; Provides accurate, safe, timely and appropriate drug therapy in accordance with the age and needs of the patient; The clinical pharmacist performs critical patient monitoring and reviews the patient profile / chart to identify, prevent, or mitigate drug-related problems, wrong drug or dose selection, sub-therapeutic dose, overdose, drug adverse reactions, drug interactions, drug missing, no indication to treatment, the use of drugs without indications and treatment failure; The clinical pharmacist communicates effectively and appropriately with healthcare providers and caregivers (doctors, nurses, etc.), and ensures the continuity of pharmaceutical care between shifts and between staff; The clinical pharmacist is actively involved in drug management and restriction programs; Participate in the work of pharmacies and distribution of medicines; Clinical Pharmacist maintains competence and actively participates in operations programs, central pharmacies, subsidiary pharmacies and specialty pharmacy areas, as required by the work assignment; Facilitates the process of purchasing, ordering and dispensing specialized drugs, including but not limited to chemotherapy, parenteral nutrition, controlled substances, etc., as appropriate [5-7].

Pharmaceutical care and clinical pharmacology are a professional discipline that combines fundamental pharmacology and clinical medicine. The Clinical Pharmacist offers invaluable support in developing the final prescription with improved patient care and increased safety. Its development began in the early 1950s, largely thanks to the efforts of Harry Gold. The introduction of pharmacists into hospital services began as early as 1957. Pharmacotherapy became more and more complex. The clinical pharmacist has pioneered a new role for pharmacists in hospital services. The role of clinical pharmacists underwent significant changes from the 1960s to the 1990s as their involvement in direct patient care improved. In the early 1970s, federal funding helped significantly expand the clinical pharmacy teaching staff at pharmacy colleges. Pharmaceutical Education has discussed the place of clinical pharmacy in pharmaceutical education. With clinical pharmacists overwhelmed with patient numbers and the emergence of new drugs, doctors are increasingly turning to pharmacists for drug information, especially in institutions. The clinical pharmacist often takes a slightly different approach to drug use and can provide valuable additional information, such as interactions, in the clinician's decision-making process for potential drug changes and monitoring. The concept of pharmaceutical care emphasizes the responsibility of pharmacists to seek the best possible outcomes for patients from a therapeutic regimen. They possess an in-depth knowledge of medicines that is combined with a fundamental understanding of the biomedical, pharmaceutical, socio-behavioral and clinical sciences. Clinical pharmacists follow evidence-based treatment guidelines, advancing science, the latest technology, and appropriate legal, ethical, social, cultural, economic and professional prescriptions to achieve their desired therapeutic goals. Consistently, clinical pharmacists take responsibility and accountability for the management of drug therapy in a direct patient care setting, whether they practice on their own, in consultation, or in collaboration with other

healthcare professionals. Their functions include comprehensive drug management (ie, prescribing, monitoring and adjusting drugs), non-drug counseling, and coordination of care. Interdisciplinary collaboration enables pharmacists to provide direct patient care or telecommuting in a variety of clinical settings, including disease management, primary care, or specialty care. A clinical pharmacist can take responsibility for chronic or acute diseases related to the endocrine, cardiovascular, respiratory, gastrointestinal, or other systems. Clinical pharmacist researchers generate, disseminate and apply new knowledge to drive improvement. In the healthcare system, clinical pharmacists are experts in the therapeutic use of drugs. A clinical pharmacist usually provides patients and healthcare professionals with drug treatment reviews and approvals. Clinical pharmacists are the primary source of scientifically reliable / scientifically logical information and advice on the safe, appropriate and economical use of medicines. They obtain a medical history and medication history, check for medication errors including prescribing, dosing and administering errors, identify drug interactions, track adverse reactions, suggest individual dosing regimen, advise patients, etc. They also provide information on medication use. and medical devices such as an inhaler, insulin pen, eye drops, nasal sprays, etc. [10-12].

There are both ethical and practical imperatives to addressing health inequalities associated with chronic disease management for people with social difficulties, and existing programs often do not adequately meet the needs of these people. This leads to low participation rates, suboptimal chronic disease management and higher utilization of health services. Unlike acute conditions, chronic conditions require ongoing care and treatment outside of health care settings, in the community or in primary health care settings in terms of medication use, lifestyle management and behavior change in health. Typically, this is a multi-pronged intervention that includes a review of drug therapy, patient education for treatment, monitoring of medication, immunization, self-care, and support. disease, and / or prescribing authority. Patients who take a lot of medications due to chronic disease are at high risk for drug duplication, interactions, or ADRS, which can lead to longer hospital stays and higher costs. To improve the safety and efficacy of therapeutic agents, these patients must meet special needs for appropriate drug use. Research has shown that integrating pharmacists into outpatient clinics can improve chronic disease management and optimal medication use. Additionally, involving a pharmacist in patient care can help reduce inappropriate medication use, especially in the elderly. The study shows that the proportion of patients receiving the wrong drug drops considerably after review and optimization of the drug by a team including a pharmacist. Compared to conventional treatment, pharmacist-directed care was associated with a similar frequency or frequency of office visits, emergency room or emergency department visits, as well as hospitalizations and adherence, increases in the amount or dose of drugs received and improvements in study glycemic choices, blood pressure, and lipid target achievement. Another recent study shows that a telemedicine-based chronic disease management program involving clinical pharmacists resulted in statistically significant improvements in diabetes and hypertension outcomes as well as clinically significant improvements in lipid control and withdrawal smoking [8,9].

The practice of the pharmacy has changed a lot in recent years. Professionals can directly contribute to patient care to reduce drug-related deaths, promote health and prevent disease. Medical organizations around the world are under tremendous pressure from the growing demand for patients. Unfortunately, cure is not always possible, especially in this era of chronic disease, and the role of doctors is limited to controlling and relieving symptoms. The growing number of patients with chronic conditions is associated with high morbidity, health care costs and the burden on physicians. The clinical pharmacy took over the medical care, which the doctors partly refused. Overwhelmed by the number of patients and the emergence of new drugs, doctors are increasingly turning to pharmacists for information about drugs, especially in institutions. After the pharmacists were transferred to the counting and dispensing of drugs, they carried out institutional reviews of drug use and acted as consultants for all types of healthcare facilities. In addition, when clinical pharmacists are active members of the healthcare team, they increase efficiency by: Providing the necessary feedback on drug use and dosage. Work with patients to resolve medication problems and improve adherence [10-12].

Clinical care team in the form of health professionals - physicians, advanced practice registered nurses, other registered nurses, medical assistants, clinical pharmacists and other health professionals -

with the training and skills to provide coordinated care high quality, specific to the patient's clinical condition needs and circumstances. The clinical pharmacist also provides support for group practice. Although the composition of the teams may vary, the responsibility and authority for specific aspects of the treatment rests best with the person best suited to the task. The effectiveness of a team of clinical pharmacists depends on a culture of trust, shared goals, effective communication and mutual respect. The best interests of the patient should be the driving force behind teamwork. The clinical pharmacist does not need to be in the same place as a member of the medical team and therefore the large group of health professionals certainly includes general practitioners in hospitals, clinics and stores. Although this is only an example, patients benefit from collective management through better BP control, and a large proportion of patients achieved controlled BP when the pharmacist was part of the clinic. The team. The composition of dynamic clinical teams is reflected in the multidisciplinary nature of large professional organizations such as the Society for Resuscitation, the Society for Hospital Medicine, the Nutrition Society, and the Society for Neurocritical Physicians. Most of these organizations include clinical pharmacists in leadership positions, including the chair [13-15]

Pharmacists in the Netherlands have significantly reduced prescribing errors and patient-related harm while on the ward compared to basic central pharmacy services. Children's pharmacists in China have shown significant reductions in adverse drug reactions, length of hospital stay, and drug costs compared to a control group of similar patients without a pharmacist. While these are just a few examples, pharmacists around the world, including in Chile, offer patient-centered services. Clinical pharmacy is gaining popularity, and some universities offer training programs for pharmacists to become specialists in clinical pharmacy and pharmaceutical services, which is more focused on patients and medical personnel and differs from the academic degree of the Master of Pharmaceutical Sciences or PhD in Pharmacology [16-18].

The statements have been developed to define the core competencies of pharmacists in a number of countries, as well as the International Pharmaceutical Federation. The Pharmacist Training Proposal for Basic Pharmacist Education and Skills includes provisions that are applicable to clinical pharmacists, in particular for documenting patient information and drug therapy management and follow-up. The skills of clinical pharmacists or advanced and specialized practitioners were also described and summarized. Although in many countries the clinical pharmacist has not compiled a uniform list of competencies for medical practitioners, the statement describes a general framework and training criteria for hospital pharmacists who have completed residency training, which form the basis of the knowledge and skills expected from the medical practitioner and also for clinical pharmacists. Intensive care pharmacists have developed a peer review process and career program that has resulted in the accreditation of an increasing number of medical practitioners. Referral support, interviews, thematic discussions and peer reviews have been incorporated into this rigorous process that serves as a model for other specialized practices [19-20].

The health systems of many other countries have developed similar claims of competence for pharmacists. As a critical care pharmacy specialist, it is difficult to describe a typical day, but usually busy with the elements of a pharmacist's support process during the day. It is believed that the clinical pharmacist will be responsible for all aspects of the administration of the drug. Every day, the clinical pharmacist assesses and evaluates new patients and updates the progress of previous patients, identifies drug-related issues and potential problems, develops a problem list and treatment plan for optimal dosage based on the renal and hepatic function, potential drug interactions and serum concentration. The clinical pharmacist joins the multidisciplinary rounds with the intensive care team and applies the treatment plan by teaching the medical residents the correct order of entry or by entering the orders themselves according to a collaborative practice agreement and by them. documenting in an electronic health record. A major contribution to medication management is identifying therapies that are no longer needed, reducing the cost and risk of adverse events, and supporting antimicrobial stewardship programs with infectious disease physicians and pharmacists. The clinical pharmacist also supervises the performance of quality measures such as the appropriate prevention of venous thromboembolism, the appropriate use of drugs to prevent stress gastritis, the addition of aspirin to increase the levels of troponin associated with I coronary ischemia, and discussing the need for central tubing and urinary catheters. The clinical pharmacist educates the

team on drug-related topics and related literature through tours and didactic discussions. A clinical pharmacist is always available for emergencies and resuscitation, and to answer questions related to medication [21,22].

For each new patient, a member of the pharmacy team compiles a medication history from electronic records, family, patient, local doctors or pharmacies and documents it in the EMR. The clinical pharmacist will then cross-check this list to determine medication-related reasons for hospitalization, such as non-adherence or overdose, and advise on which medications to choose to avoid withdrawal reactions or other adverse events. While the clinical pharmacist has a more limited role in verifying drug orders in the EMR and has little role in the actual distribution of drugs, the clinical pharmacist serves as a liaison with technicians and pharmacists specializing in parenteral products and drugs. Distribution systems to ensure medications are present when needed. Nurses have a formidable task of prescribing drugs, and the clinical pharmacist facilitates this process by providing information on intravenous injection compatibility and teaching unknown treatments [23,24].

Other aspects of my role include developing quality assessment tools and data evaluation. EMR is made more efficient by properly designing control systems that are effective and make it easier to make quality measurements and select preferred treatments. Clinical pharmacists make important contributions to these drug therapy control and surveillance systems. They also report the side effects of medications. Many side effects or incidents are related to systemic problems, and the clinical pharmacist regularly provides advice on possible process improvements when programming intravenous pumps, drug safety systems, or other processes [25].

Hospital pharmacists are drug experts who work in multidisciplinary medical teams to manage drug use in hospitals. Hospital clinical pharmacists are integrated into services and departments and provide clinical pharmacy services to patients at the bedside, with each clinical pharmacist (or team) being responsible for patient care in a specific medical ward or department. Hospital pharmacists provide clinical pharmacy services to patients hospitalized at the bedside as well as in other clinical areas such as emergency departments and outpatient clinics, as well as physicians and nurses. Most of them work in hospitals, however, innovations in the practice of hospital pharmacy have led pharmacists to work in community health services, nursing homes, rehabilitation centers and medical clinics. general. Roles may vary depending on the organization and clinical needs of the hospital pharmacy. Most hospital pharmacists provide clinical services in their area of specialization; however, they can apply their skills to other roles including pharmacy managers, purchasing managers, hospital pharmacy consultants. Educational roles are also prevalent, such as giving lectures to pre-registered trainees, making presentations to other medical staff, or providing educational support to pharmacy students [26].

Clinical pharmacists play a key role in drug delivery and patient health monitoring in various healthcare settings. They dispense prescribed medicines to patients and help doctors and other healthcare professionals with medicines. Their responsibilities include helping diagnose, selecting appropriate drugs, monitoring patients' health, checking for side effects of drugs, etc., making appropriate vaccinations, etc. Since these specialists are experts in the clinical effects and composition of drugs, including their chemical, biological and physical properties, they protect the health of the population, ensuring the purity of drugs and the correct dosage of drugs. They use special protective equipment such as masks, gloves, etc. when handling sterile or potentially hazardous pharmaceuticals. Clinical pharmacists work in a variety of environments such as hospitals, clinics, nursing homes, community health centers, pharmacies, pharmacies, etc. They work full time. They may need to work evenings, nights, weekends and holidays [27].

Likewise, pharmaceutical care and clinical pharmacy are closely related concepts, although there are differences between professional development structures that determine specificity. For example, the British Clinical Pharmacy Association states that clinical pharmacy includes the theoretical knowledge and understanding, practical skills, values and attitudes needed by pharmacists to promote healthcare and pharmaceutical services to individual patients and populations. The European Association for Clinical Pharmacy defines that as the health specialty that characterizes the activities of clinical pharmacists and the provision of health services, clinical pharmacists promote and develop rational and appropriate

pharmacotherapy, the rational use of pharmaceutical manufacturing and medical devices. Although the American College of Clinical Pharmacy abbreviated it describes and reports that clinical pharmacy is a problem area of modern pharmacy with the knowledge, evidence and practical skills of rational drug therapy using drugs. The practice of clinical pharmacy includes knowledge of pharmacotherapy, pharmaceutical care and first aid; it combines leadership in health care with specific therapeutic knowledge, understanding, cognition, learned habits and assessment to ensure rational and optimal treatment outcomes for patients [28].

CONCLUSIONS. A clinical pharmacist is trained to work directly with patients in a healthcare system such as hospitals or clinics. Because the clinical pharmacist has detailed knowledge of drugs and their effects, and because the clinical pharmacist has extensive experience with patients, physicians often give clinical pharmacists significant control over prescribing drugs and monitoring patients. Among other things, clinical pharmacists are responsible for selecting the right drugs, monitoring patients, diagnosing potentially untreated illnesses, consulting with the patient about the effects of drugs, and ensuring patients adhere to prescribed drug regimens. Clinical pharmacists are people who help patients recover from illness or lead healthy lives. The doctor diagnoses and prescribes medications in general terms, but the clinical pharmacist helps make specific decisions. For example, if a patient has an adverse reaction to a particular drug, the clinical pharmacist will recommend alternative treatments. The clinical pharmacist will also help select the best drug combinations for the patient's condition.

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**НАУЧНЫЕ РАЗГОВОРЫ О СУЩЕСТВЕННОМ КАЧЕСТВЕ, ПЕРСПЕКТИВАХ, НАКЛОНЕНИЯХ И
ОСОБЕННОСТЯХ КЛИНИЧЕСКИХ ФАРМАЦЕВТОВ В МИРЕ**

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РЕЗЮМЕ

Цель исследования состояла в том, чтобы проанализировать и определить особенности специфики призвания, мировоззрения и характера клинических фармацевтов во всем мире. Клинические фармацевты обеспечивают последовательный процесс ухода за пациентами, который

обеспечивает актуальность, эффективность и безопасность ухода за пациентами. Клинический фармацевт консультируется с врачами пациента и другими поставщиками медицинских услуг для разработки и реализации плана лечения, который может соответствовать общим целям лечения пациента, поставленным медицинской командой. Клинический фармацевт применяет специализированные знания о научном и клиническом применении лекарств, включая действие лекарств, дозировку, побочные эффекты и лекарственные взаимодействия, при выполнении своей деятельности по уходу за пациентами в сотрудничестве с другими членами команды здравоохранения. Клинические фармацевты обращаются к своему клиническому опыту для решения проблем со здоровьем путем рационального использования лекарств. Клинический фармацевт полагается на ваши профессиональные отношения с пациентами, чтобы адаптировать их рекомендации для лучшего удовлетворения потребностей и желаний каждого пациента. Клинические фармацевты подобны лицензированным врачам с высшим образованием и подготовкой, которые практикуют во всех типах медицинских учреждений с упором на комплексное управление лекарствами. Эти специалисты-фармацевты сосредоточены на оптимальном использовании лекарств с акцентом на дозировку, мониторинг, обнаружение побочных эффектов и экономическую эффективность для достижения оптимальных результатов для пациентов. Клинические фармацевты во всем мире все чаще привлекают внимание как важные члены бригады амбулаторной и неотложной помощи. В данной статье описывается реальная и потенциальная сфера деятельности клинических фармацевтов по всему миру.

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THE SCIENTIFIC TALKS OF ESSENTIAL ISSUE, INVOCATION, PERSPECTIVES, INCLINATIONS AND FEATURES OF THE CLINICAL PHARMACISTS GLOBALLY

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SUMMARY

Aims of the study was to analyze and determine the peculiarities of specificities of invocation, outlook and character of the clinical pharmacists globally. Clinical pharmacists ensure a consistent patient care process that ensures the relevance, efficiency and safety of patient care. The clinical pharmacist consults with the patient's physicians and other health care providers to develop and implement a treatment plan that can meet the patient's overall goals of care set by the medical team. Clinical Pharmacist Applies specialized knowledge of the scientific and clinical use of drugs, including drug action, dosage, side effects and drug interactions, in the performance of their patient care activities in collaboration with other members of the health care team. Clinical pharmacists look to their clinical experience to address health problems through the rational use of drugs. Clinical pharmacist relies on your professional relationship with patients to tailor their recommendations to better meet the individual patient's needs and wants. Clinical pharmacists are like licensed physicians with advanced education and training who practice in all types of healthcare settings with an emphasis on integrated medication management. These specialist pharmacists focus on optimal medication use with an emphasis on dosing, monitoring, side effect detection, and cost effectiveness to achieve optimal patient outcomes. Increasingly, clinical pharmacists around the world are gaining attention as important members of the ambulatory and emergency care team. This article describes the real and potential scope of practice of clinical pharmacists around the world.

Keywords: Specificities, invocation, outlook, character, clinical, pharmacists, globally.

