

## INTRODUCING OVER THE COUNTER COUNSELING

Natasa Bakic-Miric

A pharmacist in today's world has a great responsibility – to help and educate patients about diverse ways for effective self-treatment. Whereas self-care is becoming increasingly popular among patients today the availability of over-the-counter medications makes it possible for patients to treat numerous conditions on their own but still under the supervision of a healthcare provider. During the pharmacist-patient encounter, the pharmacist's obligation is to evaluate the patient's medical condition, provide proper advice and counsel the patient on the proper course of treatment to be taken. Also by employing effective over the counter (OTC) counseling as the most proper means in a pharmacist/patient communication process and, accordingly, rapport building in the OTC area, the pharmacist needs to demonstrate high energy, enthusiasm, respect, empathy, know-how of sensitive intercultural issues alongside personal appearance, body language, eye contact that all together make his/her personal "signature". Accordingly, apart from patient education, the primary objective of OTC counseling becomes to educate pharmacists on basic principles used in assisting patients in the selection of over-the-counter (OTC) products, provide examples of proper communication techniques for effective patient counseling concerning the OTC products (i.e. dosage, administration technique, storage, food and beverage interaction, monitoring etc) where the pharmacist plays the key role in helping patients maximize their pharmaceutical care. *Acta Medica Medianae* 2009;48(1):41-45.

**Key words:** pharmacist, patient, self-care, over the counter counseling, communication, OTC products

---

Faculty of Medicine University of Nis, Serbia

Contact: Natasa Bakic-Miric  
 Department of Preclinical Subjects (English language)  
 Faculty of Medicine  
 Dr Zoran Djindjic 81 Blvd.  
 18000 Nis, Serbia  
 Phone: +381184226644 ext. 208  
 E-mail:natasabakicmiric@yahoo.com

### Introduction

The purpose of this paper is most simply to introduce the concept of over the counter (OTC) counseling. More specifically, it also serves to familiarize pharmacists in Serbia (where OTC counseling has yet to be put into practice) with the key features of OTC process since, as Ferreri notes, one of the pharmacist's greatest responsibilities is to help patients understand ways to treat themselves (1). In recent years the development of pharmaceutical information and support of self-care have been among the most important training and development areas in pharmacies. Moreover, the unique position of pharmacies within society has provided easy access for the general public to seek help for minor health problems. Accordingly, pharmacists as health professionals can help the public to maintain good health, to avoid ill health and make the best use of medicines (2). The role of

pharmacists has become not only to educate patients on medication use, but also monitor their patient's health to ensure that the patient is getting the full benefits of the drug which makes the pharmacist's role in the healthcare team even more important, that is, a checkpoint in medical care (14).

### OTC counseling questions

To begin with, patients themselves start conversations about OTC medications with their pharmacists in numerous and diverse ways. This first contact immediately initiates an assessment of patients' self-care worries and drug-related needs. Moreover, as Ferreri indicates, counseling patients about self-care and nonprescription drugs is not the same and cannot follow the same procedure as for prescription drugs. Also, as Prihastuti Puspitasari et al. recognize, most guidelines provide recommendations to pharmacists how to educate and counsel patients on both prescription and nonprescription medicines (3). That is why OTC counseling requires much more exploratory open or close-ended questions on the part of the pharmacist which are especially useful to clarify information gathered about the patient's condition (1). As Ferreri indicates open-ended questions are usually asked when the patients

are counseled about prescription medications because it allows gathering the most abundant amount of information. These questions usually start with who, what, how, why or where. For example:

"Which of the prescription medications do you take on regular basis?"

"Which of the nonprescription and herbal medications do you use?"

"What types of conditions do you routinely see your doctor for?" (1)

Some other questions are also possible:

"Have you ever experienced any side-effects after taking the OTC medication?"

"Have you taken this OTC medication before?"

On the other hand, in Ferreri's opinion, closed-ended questions, which start with the words will, can, do or did are to be used only if the open-ended questions do not get the response the pharmacist is trying to receive and/or are not effective because they can be usually be answered with a simple yes or no. For example:

"Do you take vitamins?"

"Do you have high blood pressure?" (1)

As well as:

"Are you a vegetarian?"

"Do you eat fatty food?"

### OTC Counseling Area

As Faulkner and Rantucci note, OTC counseling may also involve sensitive patient issues that require privacy. Therefore, a special room is to be made available within the pharmacy premises so that the pharmacist can discuss sensitive patient issues without others overhearing the subject matter. The pharmacist should not be interrupted during the session, so that he/she can focus entirely on what the patient is saying. This area should be very quiet without the interference of phones, self-owns, computer printers and customer conversations coming from other parts of the facility (5). The counseling area should be a room with a desk and two chairs where the pharmacist should be able to demonstrate the use of medicines, to write down instructions and to store written materials. Often, in the case of OTC medications, the patient-pharmacist encounter initially occurs at the pharmacy counter where the patient asks for a product recommendation for a particular condition. In that case, if the OTC area is occupied, the pharmacist should offer assistance in product selection in as discrete a manner as possible to preserve the patient's privacy (5). Related to the counseling process, Prihastuti Puspitasari et al. state that the pharmacist as a health professional needs to develop an interactive communication process with patients. Pharmacists should make every effort to provide an environment that is private, comfortable and confidential to the patient and/or a care provider. Pharmacists also need to individually tailor their counseling based on patients' understanding, cultural feelings and cognitive abilities (3,5,15).



Picture 1. OTC counseling area  
(Picture courtesy of [www.pharmacy.buffalo.edu](http://www.pharmacy.buffalo.edu) at Yahoo Image results)

### The Pharmacist-Patient Encounter

As Faulkner and Rantucci indicate, the pharmacist has three primary functions during the OTC patient encounter. First, the pharmacist should evaluate, through the interview and observation, the patient's physical complaint and/or symptoms alongside medical condition. Second, the pharmacist must differentiate between self-treatable conditions from those requiring the attention of the patient's health care provider (i.e. a doctor). Third, the pharmacist's obligation is to provide adequate advice and counsel the patient on the proper course of action to be taken (i.e. either no treatment with drug therapy, self-treatment with an OTC product, or referral to a health care provider.) For example, the pharmacist can assist in product selection, taking into account the prescription medicines the patient is already taking, evaluate potential risk factors (i.e. contraindications, warnings, precautions, age, organ function) and counsel the patient about proper drug use (i.e. dosage, administration technique, monitoring parameters, storage) (5,11,13,15). Nevertheless, a proper OTC pharmacist-patient encounter should be carried out in two steps (5, 15):

**Step 1** - Every pharmacist should begin the OTC counseling session by introducing himself/herself by name which identifies him/her as the pharmacist. He/she should try to relax the patient by beginning the session with good oculesics (or eye contact), a friendly smile and a handshake – that is employ basic non-verbal communication equally as important as verbal (4). The pharmacist should also explain that he/she can provide assistance with OTC product selection and explain how to use such medication.

**Step 2** - In order to elicit key information the pharmacist should first and foremost try to obtain relevant information about patient's demographic (e.g. sex, age, pregnant, nursing, weight, allergies, social history etc), disease (e.g. history of present illness, current symptoms, course of illness, past history, other underlying medical conditions) and drug (e.g. current

medication, medication taking history, OTC history etc.) facts (5,6,7,15). The aforementioned information will be of great importance for the rest of the counseling session (in the case of an OTC drug or device) because it will either help determine if any product is indicated or determine if the patient should be referred to a primary care provider (5,8,9,11,12,13,15). Moreover, by using suitable verbal and written communication techniques, the pharmacist should inform, educate, and counsel patients (or their representatives in case that the pharmacist deals with the patient with disabilities, cognitive problems or any sort of impairment) about the following: drug name (generic and/or brand name); route, dosage form, dosage and administration schedule; special directions for preparation and administration as well as precautions to be taken during the process; techniques for self-monitoring of drug therapy; storage; potential drug-drug or drug-food interactions or other therapeutic contraindications and accordingly other information peculiar to the specific patient or drug etc. (5,6,7,8,9,10,15). In addition, it is of vital importance to demonstrate to patients how to use medications in various forms such as inhalers, patches, drops, ointments, lozenges, gargles etc. and ask them to demonstrate making sure that patients understand which route of administration should be used (for example that ointments are not to be used intranasally) thus ensuring that patients have all the necessary instructions in writing and that they understand how to schedule their medications in accordance with meals and other medications.

#### General Communication Tips for Achieving a Successful Rapport in the OTC Counseling Area

When two people are able to relate to each other, they form a mutual bond and respect – rapport. Building a successful rapport is the single most important factor in building a relationship. As the key to successful OTC area relationships, it is important to know that rapport begins to develop right from the very first conversation the pharmacist has with someone. In order to ensure that rapport can be established, the pharmacist needs to demonstrate high energy, enthusiasm, respect, empathy, understanding of sensitive cultural issues right from the start of the OTC counseling session as Faulkner and other authors in the field agree upon. The following part of the paper presents eight key communication tips for achieving a successful rapport in the OTC counseling process (5,6,7,8,13,15).

1. In order to build a successful rapport in the OTC counseling area, the pharmacist should first acquaint with "the audience" and particularly bear in mind the educational, professional, social and cultural background of the patient. This is often difficult when one meets a patient for the first time and perhaps only has a few seconds or minutes for an OTC counseling session (one to two minute maximum duration of OTC session as Ferreri suggests). Despite of the short time span, the pharmacist should always ask a patient to demonstrate his/her understanding of how to use the medicine and ask the patient to review what he/she knows

about the product and its use prior to leaving the OTC area.

2. Being an effective communicator is not easy because a person who considers himself/herself to be one chooses words carefully in order to avoid misinterpretation. An effective communicator does not use ambiguous words, nonspecific language or tries to be over-verbal because verbosity is open to various interpretations or rather misinterpretations, and very often leads to misunderstanding whereas being specific with instructions is a guarantee for successful OTC communication. Every pharmacist who indulges in the OTC counseling process has to bear in mind that simplicity and brevity are probably two of the most important key elements of effective OTC communication and unfortunately precisely the ones that pharmacists as health professionals sometimes unintentionally forget. Therefore, the pharmacist should make sure to communicate at a level that the patients will understand and not confuse them with information or underestimate their intelligence.
3. Being selective in providing the patient with information is another in line of key features of OTC counseling. The pharmacist should only mention the most significant side-effects of a medication and instruct the patient how to recognize them because he/she rarely has time to list all of them.
4. Sensitivity in dealing with patients is one of the priorities in the OTC session. Some people may dislike or even distrust taking medication. Nevertheless, it is important not to scare patients but use a voice that is comforting, not patronizing or nervous. Instead, a pharmacist should put a smile in her/his voice, even when talking on the telephone. Vocalics (or voice patterns) are noticeable over the phone as well.
5. The pharmacist should try to empathize with the patient's situation and put him/herself in patient's shoes. By acknowledging what is being heard, the patient will know that he/she is being listened to and in, although, a short course of the OTC session offered a possible way for help in treatment with the OTC drug even if it means for the pharmacist not to recommend OTC drug to be purchased.
6. The pharmacist should be a good listener in order to obtain information that may reveal valuable information about medication-taking habits because most people while in the OTC area or behind the counter usually overlook to ask important questions about OTC medications.
7. Pharmacists play a key role in helping patients maximize their pharmaceutical care. Therefore, monitoring drug therapy is another important element in the pharmaceutical care because the pharmacist's responsibility does not end when the patient walks out of the pharmacy. Moreover, the positive outcome of a drug therapy may depend on the monitoring to make sure the patient is using the medication correctly, meaning that side-effects have not interrupted therapy and that clinical appointments for necessary examinations and laboratory tests are made and met (5, 15). A simple but

responsible thing to do is to provide patients with the pharmacy phone number, so they can contact their pharmacist if they experience problems with medications (e.g. negative side-effects such as nausea, vomiting, diarrhea) or have questions because it is virtually impossible for the community pharmacist to do any sort of long-term monitoring with hundreds of patients each day. Although not super heroes, pharmacists are ideally tailored to follow individuals on OTC medications and help them obtain proper follow-up. Also, as a part of the healthcare team, the pharmacist can act as a support system in disease management programs (14).

8. Finally, the pharmacist's "signature" comprises personal appearance, body language, eye contact and a smile together with the legibility, spelling, grammatical correctness and choice of language of written instructions. Professional-style clothing and a nametag that identifies a person as a pharmacist add up to the pharmacist's personal "signature" and build-up patient's trust and confidence.

### OTC Counseling Example

Mrs. Jones is obviously distressed. She has just learned from her primary care provider that she has skin cancer. The pharmacist steps from behind the counter and moves Mrs. Jones to a more private OTC area. In the OTC area, Mrs. Jones indicates that the doctor was confusing when she talked about the possible side effects of the medication. The pharmacist goes over the possible side effects and explains what she should do if they occur. The pharmacist observes that Mrs. Jones looks confused. So, he stops and asks her if she understands, Do you understand my instructions clearly Mrs. Jones? She says she does. Even though she replies that she understands, the pharmacist provides a more thorough, detailed explanation. After this explanation, Mrs. Jones's facial expressions reveal that she understands. At one point during the conversation, the pharmacist placed his hand on Mrs. Jones's hand, looked into her eyes and said in a definitive tone, I want to help you through this. The pharmacist makes sure that his body movements and facial expressions are in accordance with his words. That is, when he says he is concerned he looks concerned. During the conversation, the

pharmacist varies his tone, rate and volume. For example, the pharmacist noticed that Mrs. Jones tended to whisper the word cancer. Therefore, he also lowered his voice whenever he used the word. The pharmacist used a soft, calm and even tone throughout the conversation as a means of comfort (14).

### Conclusion

In the 21st century, as stronger and more powerful medications are reaching OTC status, patients will need advice and counseling from pharmacists more than ever. In the world of pharmacy, OTC counseling is obligatory and it is the pharmacist's task to be sure the patient knows the name of the drug, what it is for, how and when it is to be taken, how to minimize possible interactions with other drugs (prescription or OTC), foods, beverages and its storage. Throughout the counseling process with the patient, the pharmacist must have a know-how of verbal, nonverbal and intercultural communication and troubleshoot possible problems and obstacles that might occur during the communication process such as failure to obtain easily available information; failure to seek clarifications, neglect of covert and overt cues provided verbally or in any other way by the patient, frequent interruptions, failure to let the patient talk spontaneously, poor reassurance etc. Likewise, monitoring is an important element in the pharmaceutical care concept as well, especially when the patient is followed-up throughout the treatment. Finally, personal appearance (professional style clothing and a nametag), body language, eye contact, awareness of the educational, professional, social and cultural background of the patient and a smile of a pharmacist plus legibility, spelling, grammatical correctness and choice of language of written instructions all comprise the pharmacist's "signature" or pharmacist's personality making each of these elements a reflection of professional ability that help build patient trust and achieve effective OTC counseling. Lastly, as a point of note, it would be appropriate to say with a plea to the readers not to take what has been included in this paper as defining definite OTC counseling because this paper should serve as both an invitation to and preparation for further reading, understanding and studying OTC counseling.

### References

1. Ferreri S. Out From Behind the Bench: Quick and Effective OTC Counseling. Hosted at [http://www.pharmacytimes.com/issues/articles/2004-12\\_1755.asp](http://www.pharmacytimes.com/issues/articles/2004-12_1755.asp); Last accessed March 23rd, 2009.
2. Kansanaho H, Isonen-Sjölund N, Pietilä K, Airaksinen M, Isonen T. Patient counselling profile in a Finnish pharmacy. *Patient Education and Counseling* 2002; 47(1):77-82.
3. Herborg H, Sørensen EW, Frøkjær B. Pharmaceutical care in community pharmacies: practice and research in Denmark. *Ann Pharmacother* 2007;41(4):681-9.
4. Bakić-Mirić N. Verbal and nonverbal communication with patients know-how. *Acta Facultatis Medicae Naissensis* 2006;4: 197-201
5. Faulkner M. Enhancing the pharmacist's role in OTC product selection and patient counseling. *ACPE lesson provided through an educational grant from Bayer, Medical Information*, 2006: 1-17
6. Erickson AK. Rx-to-OTC switches offer golden counseling opportunities. *Pharmacy Today* 2002; 8:1: 3-5.
7. McDonough RP. Interventions to improve patient pharmaceutical care outcomes. *J Am Pharm Assoc* 1996; 36(7):453-65.

8. Hepler CD, Strand LM. Opportunities and responsibilities in pharmaceutical care. *Am J Hosp Pharm* 1990; 47:533-43.
9. Soller RW. Evolution of self-care with over-the-counter medications. *Clin Ther* 1998; 20 (suppl C):134-40.
10. Stearns SC, Bernard SL, Fasick SB, Schwartz R, Konrad TR, Ory MG, et al. The economic implications of self-care: the effect of lifestyle, functional adaptations, and medical self-care among a national sample of Medicare beneficiaries. *Am J Public Health* 2000; 90(10):1608-12.
11. Bradley C, Blenkinsopp A. Over the counter drugs: The future for self-medication. *BMJ* 1996;312:835-7.
12. Brass EP. Changing the status of drugs from prescription to over-the-counter availability. *N Engl J Med* 2001; 345:810-6.
13. Landis NT. Lessons from medicine and nursing for pharmacist-patient communication. *Am J Health Syst Pharm* 1996; 53: 1306-14.
14. Bakić-Mirić Nataša. English in Pharmacy. Nis: Medical School, University of Niš; 2007.
15. Rantucci MJ. Pharmacists talking with patients: A guide to patient counseling. Philadelphia: Lippincott Williams & Wilkins; 2007.

## UPOZNAVANJE SA SAVETOVANJEM PREKO PULTA

*Nataša Bakić-Mirić*

Farmaceut u današnjem svetu ima veliku odgovornost – da pomogne i nauči bolesnika kako da se sam efikasno leči. Dok je samolečenje izuzetno popularno kod bolesnika danas, dostupnost lekova koji se uzimaju bez recepta omogućava bolesnicima da, iako sami leče pojedina stanja, ipak budu pod nadzorom farmaceuta. Tokom susreta između farmaceuta i bolesnika, obaveza farmaceuta jeste da pravilno proceni medicinsko stanje bolesnika, pruži odgovarajući savet i posavetuje ga o pravilnom toku lečenja. Takođe, adekvatno savetovanje preko pulta (SPP) u praksi predstavlja najbolje sredstvo komunikacije između farmaceuta i bolesnika. Shodno tome, pri ostvarivanju odnosa u SPP prostoriji u okviru apoteke, farmaceut mora da pokaže energiju, entuzijazam, poštovanje, saosećanje, poznavanje osetljivih interkulturalnih pitanja koji zajedno sa izgledom farmaceuta i neverbalnom komunikacijom - čine njegov lični 'potpis'. Shodno tome, pored edukacije bolesnika, glavni cilj savetovanja preko pulta ogleda se i u edukaciji farmaceuta, koji tako uče osnovne principe koji pomažu bolesnicima u odabiru lekova bez recepta. Takođe, primena adekvatne savetodavne tehnike komunikacije u vezi sa lekovima koji se uzimaju bez recepta (kao što je doza, način administracije, čuvanje, interakcija sa hranom i pićem, monitoring itd.) pruža farmaceutu ključnu ulogu u interakciji sa bolesnikom čime se ostvaruje maksimum u farmaceutskom lečenju. *Acta Medica Medianae* 2009;48(1): 41-45.

**Ključne reči:** farmaceut, bolesnik, samostalno lečenje, savetovanje preko pulta, komunikacija