This resource guide is designed for nurses and pharmacists to strengthen their roles in team-based care to better educate and support people living with HIV in order to improve patient outcomes and expand the U=U messaging. Regular communications and care coordination between nurses and pharmacists combine their respective roles and expertise to enhance patient care. Here are some examples and web-based resources.

1. **Team-based care**
   Team-based care helps patients attain their health-related goals. Nurse/pharmacist teams enhance care by ensuring consistent and expanded access to medications and providing education and counseling about medications and self-management. Pharmacists can enhance care by monitoring prescriptions to avoid drug interactions and side effects. Regular communication between pharmacists and nurse care coordinators can identify areas of concern before they become serious patient health problems.

2. **U=U**
   Undetectable=Untransmittable. This is an important goal for people living with HIV and an important message for nurses and pharmacists to share with their patients. Together, they can work with patients to support HIV medication adherence and explore any challenges and barriers to achieving and sustaining undetectable viral load. Professionals’ messaging about U=U is also a powerful way to reduce HIV stigma.

3. **Adherence strategies**
   Treatment adherence means starting HIV therapy, keeping all medical appointments and taking HIV medications exactly as prescribed. Nurses and pharmacists both play an important role in assessing and supporting adherence, including direct patient counseling, case conferences and care coordination for patients experiencing adherence challenges. Nurse/pharmacist communications that assess pharmacy use patterns may indicate adherence difficulties early.
**Polypharmacy**
The use of multiple medicines to treat one or more health conditions is known as **polypharmacy**. Often required to keep people healthy, it is especially important for people aging with HIV. Sometimes, seeing more than one health care provider can cause confusion and serious negative medication interactions. Nurses and pharmacists can monitor polypharmacy by reviewing patients’ medication lists with them (including over-the-counter medications, vitamins and herbal supplements).

**Underinsured patients**
*Underinsured rates* are rising as people with health insurance are facing high direct costs like co-pays and deductibles. This may impact a person’s ability to fill prescriptions or even seek care. Pharmacists and case managers are a good resource for information on various **assistance programs** to cover this gap.

**OTC medications**
Over-the-counter (OTC) medications bought without a prescription include vitamins, herbal supplements and symptom relievers. It is important to include OTC medications in medication lists and to review the lists with patients. Nurses may identify OTC medication use in counseling. Pharmacists are experts in the potential interactions between OTC and prescription medications. Both nurses and pharmacists play a role in educating patients about their OTC medication use. There are **checklists** and **label reading tools** available to assist in this education.

This resource guide is intended as a helpful reminder for nurses and pharmacists to engage in team-based coordinated care. It was developed by ANAC nurses and pharmacists who identified simple strategies and resources. This work was supported through a grant to ANAC from Walgreens.

For more information visit www.nursesinaidscare.org.