

Community Pharmacy NHS Lanarkshire 24th August Update

Are you issuing appliances on the CPUS service? It has been raised during a number of site visits recently that Independent Prescribers are issuing freestyle liber, areochambers etc under Pharmacy First Plus as these are not on the A-Z CPUS list....just a reminder that the products are available on CPUS however do not appear on the [A-Z list](#) as this list does not include Appliances or ACBS products, please refer to Schedule 17 and Schedule 18 of [PGD v32](#) and reference to relevant parts of the BNF, BNFC and/or Scottish Drug Tariff

The Thrush Myth: What Really Causes Breastfeeding Pain? Breast and nipple pain are among the most common reasons women stop breastfeeding. While thrush has traditionally been considered a key cause, current evidence suggests the picture may be more complex. Join the Public Health webinar to explore the latest evidence on breast pain, challenge long-held assumptions about Candida and discuss practical approaches to assessment and management. Register [here](#) for further information and to obtain the joining link

Date: Thursday 3 September 2026

Time: 13:00 - 14:00

MS Teams

Are you submitting your CD34 forms? We are still getting reports that Community Pharmacies are not submitting CD34 forms along with the associated private CD prescription. Private Prescriptions for Schedule 2 and Schedule 3 Controlled Drugs (CDs) should be issued on designated PPCD(1) forms in Scotland. PPCD (1) forms should be accompanied by a CD34 submission form . For a supply of CD34 forms, please email nss.pcfs-businesssupport@nhs.scot or call 01506 705101.

Don't forget about the Dapafliflozin script switches! As communicated in June, some localities have begun to action the below script switch. This switch may impact some MDS patients. Unless stated otherwise, the change should be actioned for the next MDS cycle.

Invokana 100mg Tablets Invokana 300mg Tablets Canagliflozin 100mg Tablets Canagliflozin 300mg Tablets Jardiance 10mg Tablets Jardiance 25mg Tablets Empagliflozin 10mg Tablets Empagliflozin 25mg Tablets Forxiga 10mg Tablets	Dapagliflozin 10mg tablets
Forxiga 5mg Tablets	Dapagliflozin 5mg Tablets

Do you offer MDS? We are currently reviewing the MDS service and require some baseline data and feedback from our community pharmacy sites to support this work. Your input will help inform future discussions on service delivery, remuneration, and communication between primary and secondary care.

If you are unable to access the survey via the link provided, please contact me and I will be happy to share the survey in an alternative format. There is a total of 12 very short questions. **Please complete the survey by the 8th of September 2026.**

<https://forms.cloud.microsoft/e/THVCrDVwhf?origin=lprLink>

Just a final reminder to Drop into Out of Hours tomorrow! The OOHs team at Douglas Street will be hosting another Community Pharmacy OOHs **in person event**. This drop in session ran very well last year & lots of positive feedback. Members of the pharmacy team are invited to drop in, 25th August 6:30-8:30pm. This is a drop in session so you do not need to attend for the full session, OOHs team are also aware CP sites finish at various times and so it is okay to pop along after closing. Nibbles & coffees available. This is a great opportunity to ask the OOHs team any questions you have about the service, discuss any inappropriate referrals, missing scripts, learn what happens behind the scenes when a P2P call is received vs 111 & strengthen relationships between the CP and OOHs team. If plans change on the day and you want to pop along on the night, the OOHs team will be able to accommodate any last minute attendees.

Did you miss this months CPIP newsletter? The latest CPIP newsletter had a focus on respiratory....looking beyond the scope of the

standard NHS Pharmacy First Scotland service e.g. urticarial rash, bacterial chest infection, nasal infection, sinusitis. Please remember, prescribing should now align to the [West of Scotland Formulary](#) . Full newsletter attached. Next month's focus will be skin.

Respiratory	
Allergy	
Pharmacy First	Pharmacy First Plus
Cetirizine Chlorphenamine Loratadine Fexofenadine 120mg (PGD)	Urticarial rash: Oral Treatment: First Line: Ceterizine or Loratidine Second line: Fexofenadine 180mg Topical Treatment: non-specific itch or for symptomatic treatment of hives in urticarial: Menthol 1% in Aqueous cream
Cough	
Pharmacy First	Pharmacy First Plus
No products - There is little evidence to support the use of cough suppressants. - Cough products fall under the guidance of low clinical value and should not be prescribed in NHS Lanarkshire. A number of products are available OTC. - For persistent cough lasting 4-6 weeks, the underlying cause should be established.	Viral infections can be managed via standard PF or OTC. Bacterial Chest Infection Adult Chest Infection: - Amoxicillin - Penicillin Allergy? = Doxycycline - Penicillin Allergy + pregnant? = Erythromycin Child Chest Infection - Amoxicillin - Penicillin Allergy? = clarithromycin
Nasal Congestion	
Pharmacy First	Pharmacy First Plus
Xylometazoline 0.05%/0.1% drops Xylometazoline 0.1% nasal spray Sodium chloride drops	Nasal Infection: - Naseptin - Mupirocin Sinusitis: First line/symptoms < than 10 days. Does not routinely need antibiotics. Standard PF or OTS Pain / Nasal decongestion remedies may be appropriate. Antibiotic required?

	Antibiotics can be considered for patients with suspected acute bacterial sinusitis when at least three of the following are present (or if the patient is at high risk of complications): ○ discoloured or purulent discharge (with unilateral predominance) ○ severe local pain (with unilateral predominance) ○ a fever greater than 38 degrees Celsius ○ a marked deterioration after an initial milder form of the illness (so-called 'double-sickening') ○ elevated ESR/CRP (although the practicality of this criterion is limited). Adult: • Phenoxyethylpenicillin • Penicillin Allergy? = Doxycycline • Penicillin Allergy + pregnant? = Erythromycin Child: • Phenoxyethylpenicillin • Penicillin Allergy? = clarithromycin
Nasal Allergy	
Pharmacy First	Pharmacy First Plus
Beclometasone nasal spray Mometasone nasal spray	Fluticasone Furoate nasal spray Azelastine nasal spray

From: Ellen Jo Fowler (NHS Lanarkshire)

Sent: 10 August 2026 15:26

Subject: Community Pharmacy - 10th August Update

Community Pharmacy NHS Lanarkshire 10th August Update

Are you aware of the pharmacotherapy service? All GP practices in Lanarkshire now have access to pharmacists, pharmacy technicians and pharmacy support workers who help with the practice workload and the management of patients' medication. Anyone who takes five or more medications regularly is eligible for a medication review with a clinical

practice pharmacist. NHS Lanarkshire now have a [Pharmacotherapy website](#) for patients which provides a short video on what medication reviews are. **A Digital poster (attached) is also available if you wish to display within your pharmacy to increase awareness of what support is available to patients and managing their meds.**

Consultant Connect Learnings so far....

When seeking advice or referring a patient, it is important to provide clear and concise information from the outset:

- Consultant Connect (CC) receive calls from multiple care settings across the board, it is therefore important that you introduce yourself and state that you are calling from a community pharmacy.
- Confirm your role, for example pharmacist or prescribing pharmacist.
- Clearly explain the reason for your call, such as seeking further clinical advice for a patient currently in the pharmacy.
- Have the patient's CHI number available where possible. If this is not available, be prepared to provide the patient's name and date of birth.

Example Introduction

"Hello, my name is [Name], and I am a prescribing pharmacist calling from [Pharmacy Name]. I am seeking some clinical advice regarding a patient currently in the pharmacy. I am concerned they may be exhibiting symptoms consistent with a possible DVT and would appreciate guidance on the most appropriate next steps."

Case Examples

Patient 1: The patient initially presented with symptoms suggestive of a urinary tract infection and underwent assessment under the UTI PGD. However, during consultation they also reported generalised abdominal pain and bloating, upper back pain, nausea, increased urinary frequency, and dark-coloured urine.

Outcome: On discussion with CC, the patient was asked to attend their local Emergency Department for assessment. (Emergency department was notified patient would be attending)

Patient 2: The patient presented with sunburn sustained six days previously. Examination revealed swelling extending from the knee to

the ankle, with the area noted as being hot to touch. Yellow discolouration of the skin was present, although there was no blistering.

Outcome: Consultant discussed with the CPIP pharmacist & advised a course of flucloxacillin would be appropriate with safety-netting and advice on when to seek further medical attention if symptoms worsened. CPIP issued the prescription and item to patient.

Patient 3: The patient presented with leg pain, swelling, and itching around vein. CPIP had measured a 3cm difference in right leg. Their medical history included treatment for hypertension and fluid retention. They had also recently been on a flight.

Outcome: On discussion with CC, the patient was asked to attend their local Emergency Department for assessment. (Emergency department was notified patient would be attending)

Do you want a Pharmacy First refresh? CPS have arranged an Ask Me Anything / Webinar session, a chance to get a refresher on the service in a format that fits around your working day, and a chance to put your questions directly to CPS. While we would always encourage you to revisit the full specification (available [here](#)), this session is designed to bring you up to speed.

Event details:

- **What:** Pharmacy First Scotland Ask Me Anything / Webinar
- **Date:** Thursday 20th August 2026
- **Time:** 19:30 to 21:00
- **Where:** Microsoft Teams (joining link to follow on Wednesday 19th August)

[Register Here - Pharmacy First Scotland - Webinar](#)

Have you provided your feedback to NHS 24 re the NRT electronic referrals? This is your chance to provide feedback on the referral process before it is rolled out across Scotland. The survey takes approx. 3 mins to complete [Evaluation of NHS 24 Electronic Referrals for Pharmacies – Fill in form](#)

Are you an independent prescriber? Please find attached the April 26 CPIP report with a focus on respiratory.

Are you an IP? Do you have an ECS and Clinical Portal account? All of our IPs should have an ECS/CP account to support safer prescribing decisions when offering the Pharmacy First Plus service. Clinical portal also allows access to further patient details including e.g. renal function. To access this tool please email NHSLanarkshire.PharmacyFacilitation@lanarkshire.scot.nhs.uk

June 2026	Lanarkshire
Number of Clinical Portal accounts	26
Number of times Clinical Portal was accessed	150
Number of users who didn't access Clinical Portal account	10

Have you seen the most recent West of Scotland Regional Formulary update? We are pleased to be able to present two more chapters of the regional formulary. The recommendations for Endocrine and Infection were added to the formulary website and mobile app on 30th July. Unlike traditional BNF style lists, the new formulary uses a condition based structure, aligning medicine choices directly with patient care pathways. Clear sections highlight Adult, Child and Pharmacy First recommendations, making it quicker and easier for staff to find clinically relevant guidance. The formulary is available via a new website at formulary.nhs.scot/west, featuring intuitive navigation, a smart search function, and quick links to resources such as the BNF, SPCs and SMC advice. Access is also available through the NHS Scotland Formulary mobile app, which can be used offline.

Local formularies remain available for chapters not yet launched regionally.

If you have an interest in any of the following areas of prescribing, you can get involved in formulary development by nominating yourself.

- Ear, nose, and oropharynx
- Musculoskeletal and joint diseases
- Nutrition and blood
- Anaesthesia

The newsletter attached includes information on how you can get involved with the development of future chapters. Please discuss this with your line manager in the first instance.

