



Trainee & Program Details

Training Program

Clinical Pharmacology –
Advanced Training 2026

Training Program Phase *

Specialty Foundation

Date of Learning*

20/02/2026

Learning Capture Details

Type of Learning *

Clinical experiences

Title*

Management of polypharmacy and drug interactions in a complex geriatric patient

Select the primary learning goal *

9: Prescribing

Learning Capture Details

Description of Activity *

During a ward consultation on the General Medicine unit, I reviewed an 83-year-old woman admitted with acute delirium and hyponatraemia. The patient was on 12 regular medications, including multiple psychotropics and antihypertensives. Under the supervision of my consultant, I performed a structured medication review, identified potentially inappropriate medications including duplicate serotonergic agents, and contributed to a deprescribing plan developed in collaboration with the geriatrician and clinical pharmacist. I then presented the case at the weekly clinical pharmacology meeting with guidance from my supervisor on how to structure the presentation.

What did you learn? *

I gained practical experience in identifying high-risk prescribing patterns in elderly patients with multimorbidity. I learned to apply pharmacological reasoning to prioritise medications and recognise adverse drug reactions presenting as delirium. I also developed a better understanding of altered drug metabolism and clearance in ageing, and the importance of aligning pharmacotherapy with functional and cognitive goals of care. Presenting the case helped me practice communicating deprescribing rationale to a clinical team, though I needed significant support from my supervisor in structuring my arguments clearly.

How will you apply this learning in the future? *

I will incorporate structured medication reviews into inpatient consults involving older adults, using tools such as the STOPP/START criteria and the Beers List to guide my clinical reasoning, with supervisor oversight. I will seek feedback from my supervisor on my deprescribing recommendations before they are communicated to treating teams, as I recognise I am still developing confidence in this area. I will also aim to read more about pharmacokinetic changes in ageing to consolidate the knowledge gaps identified during this case.

Assessor Feedback (optional)

Feedback From *

Dr. Michael Tan

Assessor Role *

Consultant Clinical Pharmacologist,
Department of Clinical Pharmacology and
Toxicology

Personal Message

Dear Dr Tan, I've uploaded my reflection on the medicines management in a complex geriatric patient. Your feedback would be appreciated.

Feedback Requested Date

22/02/2026

Feedback *

This is a good reflection on a clinically complex case and it is clear you engaged thoughtfully with the pharmacological principles involved. Your identification of the duplicate serotonergic agents and contribution to the deprescribing plan showed sound clinical reasoning at this stage of training. I was pleased to see you ask for guidance before presenting at the clinical meeting. For future cases, try to document your deprescribing rationale clearly in the medical record at the time, including which criteria you used and what follow-up monitoring is planned. This will become an important habit as you move toward more independent practice.