

iHuman Reflection

NR 511: Differential Diagnosis and Primary Care Practicum

Week 2



Reflection: *Address the following questions: Review the Healthy People 2030 Health Care Access and Quality Links to an external site. Objective related to prescription medications. Consider how your treatment plan might change for this patient if he did not have insurance coverage for prescriptions. What is the cost of the medication you suggested in your treatment plan? Is there a more affordable alternative? What resources are available to patients in your area who do not have insurance coverage for prescriptions?*

As providers, we must be cognizant of the medications we are prescribing and their cost with insurance and without insurance. Studies from different countries have proved that physicians are often not even aware of the cost of whatever medications they are prescribing (Lurie, I., et al., 2022). I prescribed my iHuman patient amoxicillin, clarithromycin, esomeprazole, and a multivitamin with iron. Amoxicillin is generally an affordable antibiotic, even without insurance. The amount that I prescribed would be about \$33 for the entire 2-week dose. Clarithromycin would be more expensive – about \$124 for the entire course that I prescribed. Esomeprazole can be purchased over-the-counter, so it is generally affordable as well. It would be less than \$15 per month. The multivitamin with iron could also be purchased over-the counter. Depending on the brand, it would be anywhere from \$10 to \$40 per month, so again, pretty reasonable if looking at the lower price point. An affordable alternative to this plan of care would be to skip the clarithromycin and just take the amoxicillin for antibiotics. The amoxicillin, Nexium, and multivitamin would be more reasonable without the additional antibiotic. Nexium and the