

### **Retrospective Analysis of Prescriptions Ordered at a Student-Run Free Clinic**

#### Retrospective Analysis of Prescriptions Ordered at a Student-Run Free Clinic

Sanya Ahmed<sup>1\*</sup>, Tasmia Promi<sup>1\*</sup>

<sup>1</sup>College of Medicine, Downstate Health Sciences University, Anne Kastor Brooklyn Free Clinic - Brooklyn, NY 11203

\*These authors contributed equally to this work and are presented in alphabetical order

**Background/Objectives:** The Anne Kastor Brooklyn Free Clinic (BFC) is a student-run free clinic affiliated with the SUNY Downstate Health Sciences University which provides healthcare to the uninsured population of Brooklyn, New York. Our objective is to describe and analyze the prescriptions given at BFC between 2020-2021.

**Methods:** De-identified data on patient visits were aggregated from the electronic health record of the BFC from 2020-2021 and organized into a database using Redcap. We analyzed prescriptions per month, prescriptions per patient, and types of prescriptions given at the BFC during this time period. We also describe demographics which affected the number and type of prescriptions given at the BFC.

**Results:** The average number of prescriptions per patient is about one prescription for every two patients (0.53). Patients above 45 years of age require 0.88 prescriptions per patient on average compared to patients below 45 at 0.37. 56% of female patients are prescribed medications compared to 49% of male patients. The most frequently prescribed medications at the BFC are Amlodipine, Metformin, and Atorvastatin. The number of prescriptions per patient at the BFC peaked upon reopening after COVID in October 2020 (1.18). Ex-smokers and light smokers averaged the highest number of medications prescribed with 1.2 and 1, respectively. Non-smokers and moderate smokers averaged under 1 medication (0.8).

**Conclusion:** The community the BFC serves is both economically and socially marginalized. The lack of chronic disease management and decrease in well-being which accompanies aging and tobacco use can account for the disparity in prescriptions.