

**December 2006**

***Pharmacists and Pharmacy Technicians License Renewals***

Renewal applications for pharmacists and pharmacy technicians were mailed November 1<sup>st</sup> to the address of record. **Pharmacists will need to pay special attention to the renewal applications.** Starting with 2007 renewals, pharmacists will **NOT** provide copies of CE certificates with their renewal application. Instead pharmacists will report the number of hours of CE obtained January 1, 2006 to December 31, 2006 on the renewal. The pharmacist renewal application will have instructions regarding this change and the random CE audit that will be conducted by the board. The type of CE that will be accepted changed in December 2005 and increases the opportunity for obtaining CE from other than an ACPE approved provider. It is recommended you review Chapter 6, *“Continuing Pharmaceutical Education Regulations”*.

Pharmacy technicians are still required to mail copies of their CE certificates with their renewal application.

Renewal applications postmarked after January 2, 2007 are subject to a late fee.

The board is considering “on-line” license renewal for pharmacists starting with the 2008 renewals. Look for additional information in future newsletters.

Contact the board’s office if you have any questions.

***Golden Certificate -- 50 Years of Service***

Congratulations to the following pharmacists who have completed 50 years of service in 2006 as a licensed pharmacist in Wyoming! The Board of Pharmacy recognizes these pharmacists and is grateful for their years of service to the pharmacy profession.

**George Barker** (date of original licensure – 11/30/1956), **Floyd Harnagel** (date of original licensure – 2/10/1956), **Paul Kosakewich** (date of original licensure – 5/25/1956), **John O’Flannigan** (date of original licensure – 6/12/1956), and **Nancy White** (date of original licensure – 6/12/1956).

### ***Controlled Substance Prescriptions***

Effective January 1, 2007 all controlled substance prescriptions written by practitioners in Wyoming must be on security paper. A written prescription would include any typed, computer generated or hand written CS prescription. Controlled substance prescriptions issued by a practitioner in Wyoming are not to be honored if written on paper other than security paper and signed after January 1, 2007. Security features at a minimum must include erasure protection on green or blue background; if scanned or copied, “void” is displayed prominently throughout the document; and the security features of the paper must be listed on the prescription blank.

All Wyoming practitioners have been made aware of this change in law by notices mailed in August 2005, April 2006, and October 2006. The board’s web site has information on this change in law, including an excerpt from Chapter 6, WY Controlled Substance Act, Rules and Regulations as well as a current listing of approved vendors for security paper.

### ***Long Term Care Pharmacy Services***

New rules were adopted and signed into law in December 2005 which addresses pharmacy services in long term care facilities. “Long term care facility” is defined as any skilled or intermediate care nursing home, board and care home, or any patient behavioral health facility subject to regulation and licensure by the department of health. It does not include any adult day care facilities, home health agencies, or assisted living facilities.

A pharmacy providing pharmaceuticals to a long term care facility is required among other items to provide the following services:

- Dispensing drugs for residents in packaging consistent with the drug distribution system required by the facility's policies and procedures.
- Providing a 24-hour emergency service either directly or by contract with another pharmacy.
- Developing a drug recall procedure that protects the health and safety of residents.

A pharmacist providing consultant services to a long term care facility is required among other items to provide the following services:

- Assist the long term care facility in developing policy and procedures including:
  - The packaging of prescription drugs provided by a pharmacy to residents.
  - Storage, administration, and record-keeping
  - Inspection of drug storage areas
  - Destruction or recycling of unused patient medication
  - CE for nursing personnel regarding medication administration
- Patient drug regimen review at least monthly.

If you are providing pharmacy services or serve as a consultant pharmacist to a long term care facility, we recommend you review Chapter 15, WY Pharmacy Act, Rules and Regulations.

*A Prospective Pharmacist is a Proactive Pharmacist*, by Nancy Taylor, PharmD Candidate

How often do you take the time to do a prospective drug use review on your patients? Do you look at their profile for each prescription or just those for controlled substances? Your answers may depend on your practice setting. According to the Wyoming Pharmacy Act Rules and Regulations, chapter nine, section four, a pharmacist "shall" review the patient's profile for

each prescription to determine the therapeutic appropriateness of the medication.<sup>1</sup> In an ideal world this is done for each and every prescription that crosses the input station, but in reality it is often skipped or used in a limited capacity. Through input from my colleagues in current practice situations, all institutional settings perform a prospective drug use review on their patients but not all retail settings do.<sup>2</sup> Why is this? They are required by law but they do not do it. Is it a time constraint they work against? Is it the computer system they have? Is the task delegated to someone else? Is it the work flow pattern? Are these just crutches used as excuses for not performing a simple task that can better the lives of patients?

As pharmacists, we take an oath to protect the public and look out for our patient's best health. With polypharmacy so strong in this day and age, it is our responsibility to be proactive in our patient's healthcare. Taking a few minutes to review your patient's profile and to visit with your patient can help you catch a potential problem. Communication with your co-workers is essential too; the entire staff should know the patients they serve. Read the following scenario and then ask yourself, what you should have done?

*A patient brings a prescription to the window for Oxycontin® 20mg. The technician takes the script and asks the patient if they have taken this medication before and the patient answers "no". The patient has insurance but says they will pay cash and so it is entered into the system. The prescription is filled and verified, the patient counseled, and then the patient leaves. The patient overdoses that night and dies. The pharmacy is then contacted concerning the death and asked for a profile of all the patient's medications. The profile shows this patient was no stranger to controlled substances and had recently just had a prescription filled for another drug in the same class as Oxycontin®.*

Would have checking the patient profile before filling the prescription prevented the overdose, who knows, we cannot be sure. Would the pharmacist have thought twice about filling it if they had reviewed the profile? Probably. Could the pharmacist have taken a proactive step and contacted the doctor? Yes. Would the pharmacist do a prospective drug use review from now on? One would hope so.

Think about your practice setting and put yourself in our fictional pharmacist's shoes and decide what you would have done and what you will do in future. We are in the business of saving lives so be proactive in your patient's healthcare and be prospective in their drug use.

### **References**

1. Wyoming Pharmacy Act, Rules and Regulations. Chapter 9. Section 4(a)
2. 2007 PharmD Candidates. Personal Interview Questionnaire. 2006.

***Alcohol or Drug Problem? Confidential Assistance is Available***

**Call George Vandel at (307) 472-1222**

**WPAP's website: <http://wpapro.org>**

If you are concerned about yourself or a colleague, please call the Wyoming Professional Assistance Program (WPAP) to discuss your concerns anonymously. We assist impaired pharmacists and pharmacy technicians to get the help they need without necessarily jeopardizing their licenses.

### ***Special Notice about This Newsletter***

The *Wyoming Board of Pharmacy News* had been designated as the official method of notification to pharmacists and pharmacy technicians licensed by the Wyoming Board of Pharmacy. Please read these newsletters and keep them for future reference. These newsletters

will be used in hearings as proof of notification. Newsletters are available for review on the Board's web page (<http://pharmacyboard.state.wy.us>).