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Wyoming State Board of Pharmacy

Wyoming State Board of Pharmacy
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Published to promote voluntary compliance of pharmacy and drug law.

Prescription Drug Monitoring Program Update

The Wyoming State Board of Pharmacy established the Prescription Drug Monitoring Program (PDMP) in July 2004, as authorized in the Wyoming Controlled Substance Act (Wyoming Statute 35-7-1060) and as outlined in the Wyoming Controlled Substance Act Rules and Regulations (Chapter 8). The PDMP monitors the prescribing and dispensing of controlled substances. The PDMP has evolved into a valuable tool for law enforcement and for practitioners to use in treating patients, including counseling and monitoring pain contracts. Consequently, both law enforcement and practitioners are generating an increasing number of PDMP profile requests. David Wills has been analyzing data related to the number and origin of requests (this data is available on the Board Web site, *http://pharmacyboard.state.wy.us*). During 2008, the Rx Abuse Stakeholders Task Force in Cheyenne and the Lovell Drug Abuse Task Force both requested more current information through the PDMP. The subject of weekly submission of PDMP data was discussed at several pharmacy meetings beginning in June 2008.

The Board of Pharmacy met in December and voted to change pharmacy reporting requirements for dispensed Schedules II, III, and IV controlled substances, as well as tramadol and carisoprodol, from bi-monthly to weekly, effective January 2009, with full compliance by March 31, 2009. Correspondence was sent to each pharmacy in Wyoming regarding this change. The Board office staff is working with each pharmacy that has not been reporting.

As pharmacies evolve to weekly submission of dispensing data to Atlantic Associates, technical assistance and data submission options are available from Atlantic Associates at 800/539-3370. Forms and general information may be found on the Board Web site, or by calling David Wills, at 307/634-9636.

"Unsolicited profiles" are sent to pharmacies and prescribers when it appears a patient may be doctor shopping. If you receive an unsolicited profile, check your records to ensure your pharmacy actually filled the prescription and the prescriber information was entered correctly. Contact the prescriber if you have concerns. Sometimes there are duplicates listed on the profile; checking duplicates can assist in determining if prescriptions were entered twice due to insurance or other issues and the records can be corrected. Prescribers who receive unsolicited profiles sometimes inform us that they did not write a prescription that appears on the profile, at which time we initiate an investigation for potential forgery.

Checking for Patient Identification

The Board continues to hear that checking for identification when a patient presents with a controlled substance prescription is not consistent. The Wyoming Pharmacy Act Rules and Regulations, Chapter 2, *General Practice of Pharmacy Regulations*, Section 17, *Identification of a Patient*, state:

(a) The pharmacist or employee under supervision must verify the identity of the person presenting a controlled substance prescription to the pharmacy for dispensing. This may be done by visual recognition. If identity is not established by visual recognition, a driver's license or similar photo identification form is considered acceptable documentation. The following information must be recorded on the reverse of the prescription if an ID is utilized: name, type of identification, and identification number.

(b) The name of the person receiving the dispensed drug is to be recorded on the prescription document, patient profile or signature log if an agent and not the patient receives the drug.

Always ask for identification and record the information yourself. Asking the patient to write his or her driver's license number on the prescription is not adequate for identity verification.

797 Task Force Completes Draft Rules

The task force has met monthly to complete review of United States Pharmacopeia Chapter 797 requirements for sterile compounding and has completed draft rules. After approval by the Board of Pharmacy and the governor, these rules will be contained in a new Chapter 17 of the Wyoming Pharmacy Act Rules and Regulations. The Board reviewed the draft rules at its February 2009 meeting and will discuss them again in April, with a public hearing to be held in June. Wyoming pharmacists and technicians have been working to make the rules appropriate for Wyoming institutions. The participation of 14 of the 33 licensed hospitals in Wyoming has been a valuable learning experience and networking opportunity.

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FDA Web Site Upgrades Support MedWatch's Patient Safety Goal

Two recently launched additions to the Food and Drug Administration's (FDA) Web site are intended to support the "Patient Safety" goal that MedWatch shares in public health efforts to protect patients from serious harm and improve outcomes. The entry pages assist health care professionals and patients to locate timely safety information for FDA-regulated human medical products and assist them in making diagnostic and therapeutic decisions.

The content and links on the new FDA entry page specifically for health care professionals allows busy doctors, pharmacists, nurses, and other health care professionals to find information to make point-of-care decisions. There is information that is specifically safety-related, such as easy access to reporting adverse events or finding new safety alerts, warnings, and recalls. Users can also find content regarding new approvals information, or access to the current version of the label, or prescribing information in "DailyMed." This page can be accessed through *www.fda.gov/healthprofessionals*.

FDA's other new page is specifically for patients and provides two patient-friendly articles about reporting adverse events and product quality problems to FDA and to the patient's caregivers. These articles are also available to pharmacists in printer-friendly PDF versions that can be downloaded and distributed to patients. FDA relies on properly and timely reporting of serious and unexpected drug and device-related adverse events, use errors, and quality problems. Pharmacists can ascertain and teach their patients to understand the "what, why, and how" to report to FDA and also learn about what happens to each received report and whether it leads to FDA action that may make product use safer for both patients and providers. FDA's patient specific page can be found at *www.fda.gov/consumer/default.htm*.

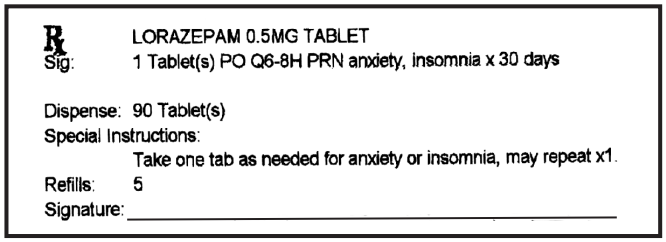
Retail Pharmacies Now Providing Medical Clinics to Improve Public Safety

This column was prepared by the Institute for Safe Medication Practices (ISMP). ISMP is an independent nonprofit agency that works closely with USP and FDA in analyzing medication errors, near misses, and potentially hazardous conditions as reported by pharmacists and other practitioners. ISMP then makes appropriate contacts with companies and regulators, gathers expert opinion about prevention measures, and publishes its recommendations. To read about the recommendations for prevention of reported errors that you can put into practice today, subscribe to ***ISMP Medication Safety Alert!® Community/Ambulatory Edition*** *by visiting www.ismp.org. If you would like to report a problem confidentially to these organizations, go to the ISMP Web site (www.ismp.org) for links with USP, ISMP, and FDA. Or call 1-800/23-ERROR to report directly to the USP-ISMP Medication Errors Reporting Program. ISMP address: 200 Lakeside Dr, Horsham, PA 19044. Phone: 215/947-7797. E-mail: ismpinfo@ismp.org.*

Retail pharmacy corporations have set up medical clinics within pharmacies. These nurse-practitioner or physician-assistant run clinics aim to rapidly diagnose and treat a limited number of health problems. Many also offer vaccination programs. The first pharmacy-based medical clinics were opened in Minnesota as QuickMedx in 2000, later becoming MinuteClinic in 2002. Currently there are approximately 1,000 sites in 37 states representing almost three million cumulative visits.

The emergence of pharmacy-based medical clinics offers a unique set of opportunities to improve the safety in prescribing and dispensing medications. Do you have a clinic opening in your store? If so, consider these safety recommendations:

- Meet the nurse practitioners and physician assistants and introduce them to your staff. Show them how your operation works and invite them in for a tour.
- If you have prescription scanning capabilities, show them how a scanned prescription displays on your monitor. Show them how different prescription blanks scan (eg, colored prescription blanks, blanks with water marks or seals for diversion) and what to avoid using so as not to distort the actual order.
- If they are using a device that allows them to send prescriptions electronically, have them send test prescriptions to you, invite them in to see how their prescriptions display on your computer and send them back test refill requests.
- Work together on any issues that arise, such as conflicting directions and special instructions, where the automatic sig indicates one set of patient directions and then the free text special instructions contradict the sig (see image below).



- Ask prescribers to include the indication for use whenever they write or call in a prescription.
- Educate them that it is your policy to read back the entire prescription order to them after transcribing it in the pharmacy including spelling the medication name. Let them know you will be using "cock-pit" language, for example, "one six" for "16."
- Ask them to include both the generic and brand names on all written orders for medications with look-alike and/or sound-alike names.
- Share with them ISMP safety tools (eg, List of Error Prone Abbreviations, List of Confused Drug Names) found at *www.ismp.org/Tools*.

- Let them know you will dispense measuring devices every time they order a liquid medication.
- Let them know that safety is your priority when filling prescriptions, and invite them to be part of your safety team.

FDA Launches Web Sites on Promotion of Medical Products

On September 3, 2008, FDA launched two new Web sites to provide information for consumers and industry about how FDA regulates the promotion of medical products. Pharmacists can obtain useful information regarding prescription drug advertising regulations as well as refer their patients who may have questions to the site.

The "Advertising Prescription Drugs and Medical Devices" Web site provides a "one-stop shop" portal to information on FDA regulation of medical product promotion. Pharmacists access relevant laws, regulations, and guidances. This site can be found at *www.fda.gov/oc/promotion/*.

The direct-to-consumer Web site, "Be Smart about Prescription Drug Advertising: A Guide for Consumers" is designed to educate consumers about how to view such advertising to help inform their discussions with health care providers, and consequently to help improve patient's understanding and medical care. This site was created in collaboration with EthicAd, an independent, nonprofit organization dedicated to helping consumers, health care professionals, and the pharmaceutical and advertising industries with direct-to-consumer advertising for prescription drugs. More information can be found at *www.ethicad.org*.

The direct-to-consumer site provides interactive example ads for fictitious drugs to illustrate the different requirements for the various types of ads. It also includes a list of questions patients should ask themselves when they see a prescription drug ad. This list can be printed for patients to use while discussing questions with their health care providers. This site can be found at *www.fda.gov/cder/ethicad/index.htm*.

FPGEE Returns to Computer-based Format

As advancements in secure testing technology forge ahead, the push for more electronically based systems and less use of the traditional paper-and-pencil mechanisms continues. With this in mind, NABP will soon be returning the Foreign Pharmacy Graduate Equivalency Examination® (FPGEE®) to a computer-based format, eliminating the paper-and-pencil examination.

The FPGEE is the third computerized examination to be developed by NABP, after the North American Pharmacist Licensure Examination® (NAPLEX®) and Multistate Pharmacy Jurisprudence Examination® (MPJE®). The new computerized FPGEE will debut at the April 14, 2009 administration.

The computerized FPGEE examination will continue to be administered one day in the spring and one day in the fall; however, instead of limiting the available testing locations to three sites, applicants will be able to choose from more than 200 Pearson VUE testing sites located within the continental United States. In addition, it is anticipitated that applicants will be able to schedule their test sites electronically 48 to 72 hours after having been accepted to take the FPGEE.

The NABP test vendor, Pearson VUE, will administer the computerized FPGEE as it does with the NAPLEX and the MPJE. Demonstrating a record of solid customer service combined with a secure and consistent test center network, Pearson VUE is committed to providing a reliable and professional testing environment for applicants on behalf of NABP.

The FPGEE is one component of the Foreign Pharmacy Graduate Examination Committee™ (FPGEC®) certification process. In addition to passing the examination, FPGEC applicants are required to have certain documents submitted from educational and licensure institutions that present their educational backgrounds and licensure and/or registration to practice pharmacy. Applicants must also pass the Test of English as a Foreign Language ™ (TOEFL®) and the Test of Spoken English™ (TSE®), or the TOEFL Internet-based Test (iBT). The FPGEC certificate allows foreign graduates to partially fulfill eligibility requirements for licensure in the 50 United States and the District of Columbia where the certification is recognized.

To prepare for the FPGEE, NABP recommends that applicants take the Pre-FPGEE®, the official FPGEE practice examination written and developed by NABP. This practice examination is designed to help familiarize applicants with the FPGEE by exhibiting the types of questions provided on the actual examination as well as providing a score estimate.

Additional information on the FPGEE as well as the Pre-FPGEE is available in the Examination Programs section on the NABP Web site at *www.nabp.net*.

Updated 2009 Survey of Pharmacy Law Now Available

The NABP 2009 *Survey of Pharmacy Law*, providing a concise research source for key regulatory questions in pharmacy practice for all 50 states, the District of Columbia, and Puerto Rico, is now available.

The *Survey* updates, graciously provided by the state boards of pharmacy, consist of four sections including a state-by-state overview of organizational law, licensing law, drug law, and census data. Also, a new question in Section VII, "Issuance of Initial Pharmacist Licensure," asks whether or not states require criminal history record checks for initial licensure as a pharmacist.

To order the *Survey*, visit the NABP Web site at *www.nabp.net* and download an order form; the *Survey* costs $20.

All final-year pharmacy students receive the CD-ROM free of charge through the generous sponsorship of Purdue Pharma LP.

More information on the *Survey* is available by contacting customer service via phone at 847/391-4406 or via e-mail at custserv@nabp.net.

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The task force welcomes comments from anyone. The draft rules can be obtained from the Board office or from the very able leader of the task force, Tim Seeley. The Wyoming Pharmacy Association Web site, at *www.wpha.net*, also has a section of reference material regarding sterile compounding.

Change in Pharmacist-in-Charge

When a change in pharmacist-in-charge (PIC) occurs, an inventory of all controlled substances must be completed with the incoming pharmacist and the outgoing pharmacist. Both pharmacists should sign the inventory. The date and time (beginning of business or close of business) the inventory was taken, and the name and address of the pharmacy should be documented on the inventory. One copy of the inventory remains on file in the pharmacy and one copy is mailed to the Board of Pharmacy.

2009 Pharmacy Inspections

The following will be the major focus of the 2009 pharmacy inspections:

1. Perpetual inventory with documented quarterly reconciliation.
2. Continuing random drug audits of a controlled substance.
3. Identification and address verification for controlled substance prescriptions.
4. Documentation of records in pharmacies administering immunizations.
5. Patient counseling and medication errors.
6. Checking patient profiles and drug use reviews in compliance with the Wyoming Pharmacy Act Rules and Regulations, Chapter 9, *Patient Counseling and Prospective Drug Use Review Regulations*.
7. Verification that all licensed pharmacy personnel hold current Wyoming licensure and that the current license is displayed in the pharmacy.
8. Verification of compliance with weekly reporting of controlled substance prescriptions under the PDMP.
9. Verification of power of attorney if the pharmacy has had a change of PIC during the past year.
10. Proper documentation of transfer of prescriptions by the receiving pharmacy and the transferring pharmacy.
11. Verification that controlled substance prescriptions are on security paper with appropriate security features.

Pharmacists Celebrating their Golden Anniversary of Wyoming Licensure

During calendar year 2008, the following pharmacists completed their 50th year of continuous licensure in Wyoming. They will be honored at the 92nd Annual Convention of the Wyoming Pharmacy Association in June 2009.

Celebrating 50 Years of Continuous Licensure in Wyoming

Mr Duane R. Barsness, RPh
Mr William D. Boulden, RPh
Mr Frederick F. Carroll, RPh
Col. (Ret.) William F. Carroll, RPh
Mrs Marilynn H. Mitchell-Deiss, RPh
Mr Thomas J. Murphy, RPh
Ms Carolyn D. Penny, RPh
Dr Marlo G. Prugh, RPh, DDS
Mr Ralph S. Seney, RPh
Mr John L. Squeri, Jr, RPh
Mr Clifford C. Stuart, RPh
Mr Charles F. Thorne, Jr, RPh
Mr Ross L. Tyler, RPh
Mr John H. Vandel, RPh
Mr Ronald C. Wilson, RPh

Congratulations and thank you for your service to our profession.

The *Wyoming State Board of Pharmacy News* is published by the Wyoming State Board of Pharmacy and the National Association of Boards of Pharmacy Foundation, Inc, to promote voluntary compliance of pharmacy and drug law. The opinions and views expressed in this publication do not necessarily reflect the official views, opinions, or policies of the Foundation or the Board unless expressly so stated.

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