

## Lynn Trottier award

*Geriatrics honour recognizes student excellence*

An award for a third-year UBC pharmacy student with the highest marks in a geriatric drugs course has been established to recognize Lynn Trottier's contributions to the profession.

Lynn passed away on November 24, 2006. She is survived by her husband Ted, children Mallory and Ben, her parents, and many relatives, colleagues, and friends.

Lynn graduated from the faculty of pharmaceutical sciences at UBC in 1974. After completing a hospital residency program at Lions Gate Hospital, she worked as a clinical pharmacist at UBC Hospital and lectured at UBC (faculty of pharmaceutical sciences) and SFU (gerontology program).

If you wish to contribute to the Lynn Trottier Memorial Geriatrics Award, a cheque can be made payable to the University of British Columbia (Lynn Trottier Memorial Geriatrics Award). An income tax receipt will be issued. Please send to:

Mandy Trickett  
Faculty of Pharmaceutical Sciences  
2146 East Mall  
Vancouver, BC V6T 1Z3

## Daily dispensing idea

*Categorize to help patient compliance*

To assist patients with drug regimen compliance, pharmacists dispensing multiple daily dosages should avoid placing a patient's daily intake of various tablets in one pill bottle.

Instead consider the following:

- Blister packs.
- One pill bottle for each treatment period, e.g., "breakfast" or "before bed."
- One drug per vial, e.g., all Tylenol<sup>3</sup>® in one bottle, and all anti-hypertensives in another.

Regardless of which type of container you choose for dispensing, ensure that all labeling provides the patient with complete dose-related information.

# what went wrong

Dear College:

I was recently in hospital and a nurse told me that the doctor had prescribed insulin for me. I told her that I wasn't diabetic and that I had never used insulin – why had it been prescribed? The nurse investigated and told me that insulin was ordered because it was on my PharmaNet profile.

I don't understand how this is possible. I'm not diabetic and I have never used insulin. I have only bought insulin for my dog. What if I had been injected with insulin in error? There would have been dire consequences, I am sure.

*Infuriated about Insulin*

Community pharmacies are required to process prescriptions for pets on PharmaNet.

### How to use PharmaNet to dispense veterinary prescriptions:

- Use the pet owner's personal health number (PHN). Do not assign a PHN to an animal.
- Use the veterinarian's licence number as the practitioner ID, and V9 as the reference code to identify the prescriber as a veterinarian.

When a prescription is transmitted under a veterinarian's ID, the system knows it is for a pet because it recognizes the "V9" code and does not put it on the owner's PharmaNet medication record. Instead, it is put on a veterinary medication record linked to the owner's PHN. Therefore, when a pharmacy dispenses medications for the owner, the veterinary medications will not appear on the owner's medication history.

Problems arise when other practitioner types are used in error for pet prescriptions. For example, if a physician or pharmacist is used, the system will automatically record the prescription on the owner's PharmaNet medication record, rather than on the separate veterinary profile. As a result, incorrect information and inappropriate DUE messages are returned to all pharmacies dispensing prescriptions for the owner, and the claim

may be paid by PharmaCare, a third-party payer, or added to the individual's PharmaCare deductible.

In this particular case, the pharmacist involved processed the insulin on PharmaNet using his pharmacist ID as the "prescriber ID." The insulin was recorded on the owner's PharmaNet medication record, instead of the veterinary medication record linked to the owner's PHN. When the doctor reviewed the patient's PharmaNet record, the doctor believed the patient was taking insulin prior to hospital admission and prescribed it for the patient.

The pharmacist involved explained this was his usual process for each time he sold insulin without a prescription because he always wanted the patient to be able to receive any eligible PharmaCare benefits for the insulin dispensed. The pharmacist was not aware that this process must not be followed when selling insulin for a pet. The pharmacist now knows that any time a drug (prescription or non-prescription) is sold for a pet and it is transmitted to PharmaNet, only a veterinarian's licence number must be used as the practitioner ID, along with V9 as the reference code.

*Situations like the one described above provide an excellent opportunity to reflect on your personal pharmacy practice and to make sure your pharmacy has a system in place to identify, prevent, manage, and report practice errors and omissions.*