

Discipline panel recommends remediation

On April 26, 2004 the College conducted a discipline hearing inquiry into the conduct of a pharmacist.

A woman took a prescription to a pharmacy for her frail elderly mother who had recently been diagnosed with renal failure. The prescription was for alfacalcidol 0.25mcg. The physician's handwritten directions for use were ambiguous.

The pharmacist dispensed the prescription with instructions for the patient to take one capsule three times a day. The physician intended that the medication be taken three times a week. The prescription was dispensed without first clarifying dosage instructions on the prescription directly with the prescribing physician. The pharmacist reported that the patient's caregiver agreed to clarify dosage instructions with the prescribing physician herself.

In reviewing the facts of the case, the discipline panel agreed that the pharmacist was negligent in relinquishing the responsibility to verify the alfacalcidol dose to the caregiver.

The panel recognized that there are often pressures in the daily practice of pharmacy that can compromise the performance of a pharmacist's duties. However, this does not excuse the fact that the pharmacist did not follow up with the physician or caregiver to ensure the dosage of the drug was interpreted correctly.

The panel agreed on the following remediation plan aimed at increasing the pharmacist's knowledge about the care of patients in renal failure and improving the pharmacist's professional judgment and decision-making skills. The pharmacist will:

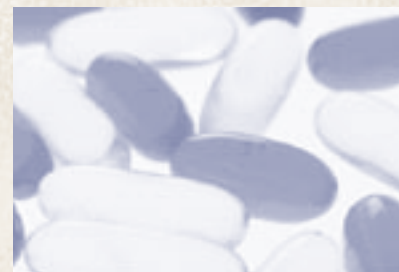
- Participate in a mentorship program for a total 24 days of contact time. The program will include readings, testing and discussion with mentors in all areas of pharmacy practice with a specific focus on:
 - Seamless Care
 - Pharmacological treatment of people with renal failure
 - Pharmaceutical Care principles
 - Ethics, professional judgment and decision-making
- Identify three desired practice outcomes, as described in the Learning and Practice Portfolio Information Guide, one of which must be specific to care of patients with renal failure. This Learning and Practice Portfolio will be assessed against the criterion used for all portfolio assessments in the Professional Development and Assessment Program

The panel noted that - prior to the discipline hearing - the pharmacist embarked on a professional development program to address the noted deficiencies. In recommending the remediation plan the panel acknowledged the pharmacist's otherwise unblemished professional record, remorse for the events that occurred and proactive professional development since the event. In addition, the panel noted the employer supported the pharmacist and the pharmacist's remediation efforts.

CHANGES TO DUPLICATE/TRIPPLICATE PRESCRIPTION PROGRAM

The College of Physicians and Surgeons of BC recently renamed the Duplicate / Triplicate Prescription Program. It is now called the Controlled Prescription Program.

The College of Physicians and Surgeons also removed methylphenidate from the list of drugs monitored by the Controlled Prescription Program. Pharmacists can now use professional judgment to accept prescriptions for methylphenidate written on non-Controlled Prescription Program duplicate forms. Council has approved a resolution to amend the Drug Schedules Regulation by deleting methylphenidate from Schedule IA. This will be formally approved shortly.



CPJ FEATURES ECP

BC's Emergency Contraceptive program is featured in the July/August issue of the Canadian Pharmaceutical Journal. "Provision of emergency contraceptives by pharmacists: British Columbia experience a template for other provinces" provides a clinical review of the issue and describes the impact of the expanded role of pharmacists.

You can download this article from the CPhA site at: <<http://www.pharmacists.ca/content/cpjpdfs/julaug04/July-August-SoonFinalArticle.pdf>>.