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alberta college of
pharmacists



A new beginning!

The beginning of a new year is an exciting time! It's a time to reflect on the year just ended and a time to anticipate what the new year will bring.

In 2005, much of the college's energy was focused on the regulations to the *Health Professions Act* and the *Pharmacy and Drug Act*. We thank you for all the feedback you've provided since we began consulting with you in 2001 about pharmacist prescribing, and particularly during the latter part of 2005 relative to the proposed regulations. Combined with the contributions from external stakeholders, your feedback has led to an improved regulatory framework.

Opinions related to the draft regulations have been diverse. The college and Alberta Health and Wellness (AH&W) continue to consider the merits of all perspectives to find balanced solutions that can best enable the profession to serve Albertans safely, effectively and responsibly.

What can you expect in 2006? The college will continue to meet with AH&W and Alberta Justice as they prepare the final drafts of our regulations. In addition, ACP plans to distribute the proposed standards of practice and standards of pharmacy operations for formal consultation in early 2006. Additional consultation with pharmacists will also occur about the basic principles and the structure of advanced designation as it applies to the privilege of prescribing Schedule 1 drugs. True to our commitment in pursuing this privilege, we will design and deliver an orientation program to help you understand expectations when you accept the responsibilities that accompany the prescribing role.

You can begin to prepare yourself for the new legislation. In November 2005, you received the RxCEL Continuing Professional Development Plan package. Use the plan's self-evaluation tool to examine your current practice and to identify areas where you can benefit from learning opportunities.

As we enter 2006, let's take time to celebrate the cumulative successes of pharmacists who have committed to excellence in patient care, and the leadership that has enabled our profession to move to this exciting time in our history. Let's consider how we can use the emerging opportunities to optimize the use of our knowledge and skills, while working with other health professionals to improve the health of Albertans and the care they receive.

On behalf of Council and the college's staff, we wish you good health and happiness in 2006!

Karen Wolfe
President

Greg Eberhart
Registrar



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Recommended reading

Article on pharmacist prescribing

We recommend you read a recent article called *Pharmacists and Prescribing Rights*; it's an interesting read.

The authors explore eight models of pharmacist prescribing that have been implemented internationally, each varying in their dependency on protocols, formularies and collaboration with physicians.

The authors also discuss issues related to the implementation of pharmacist prescribing, such as pharmacist training and accreditation, liability, reimbursement and documentation.

You can find the article in the *Journal of Pharmacy and Pharmaceutical Sciences* 8 (2): 217-225, 2005, or at [www.ualberta.ca/~csp/JPPS8\(2\)/L.Emmerton/pharmacists.pdf](http://www.ualberta.ca/~csp/JPPS8(2)/L.Emmerton/pharmacists.pdf)

Health Care in Canada Survey

The results of the eighth annual comprehensive national *Health Care in Canada Survey* of the public, physicians, nurses, pharmacists and managers was released by Pollaris at the end of November 2005.

Some interesting findings include the following.

- There is strong support (76 to 96 per cent) for requiring health professionals to work in teams from all respondents except physicians (52 per cent).
- Canadians have concerns about quality, safety and access in the Canadian health system, including wait times for surgical services, potential of errors while being treated in hospital, and preparedness for public health emergencies.

- Fifty-nine per cent of the public felt it was likely or very likely that someone might be subject to a serious medical error while being treated at a Canadian hospital.
- Two priority concerns for pharmacists are their roles in primary health care teams and reimbursement for services other than dispensing medication.
- Forty-five per cent of physicians, and 77 to 95 per cent of others responding to the survey support pharmacist access to lab results and diagnostic tests to verify prescribed medication.
- About two-thirds of physicians believe that formulary restrictions interfere with their ability to provide necessary care, and more than 80 per cent consider a patient's insurance coverage when making prescribing choices.

The complete report can be found at www.hcic-sssc.ca.



Nursing regulations to the Health Professions Act approved

On Nov. 23, 2005 the regulations to the *Health Professions Act* respecting nurses was approved by the Lieutenant Governor in Council.

Among the restricted activities authorized, registered nurses may:

"dispense, compound, provide for selling or sell a Schedule 1 drug or Schedule 2 drug within the meaning of the Pharmaceutical Profession Act."

The regulations go on to state that:

"despite [this] subsection ..., a regulated member ... shall not

distribute, trade or barter for money or valuable consideration, or keep for sale or offer for sale a Schedule 1 drug or a Schedule 2 drug within the meaning of the Pharmaceutical Profession Act but may distribute or give away a Schedule 1 drug or a Schedule 2 drug without expectation or hope of compensation or reward."

In other words, nurses may distribute or give away a Schedule 1 or Schedule 2 drug, but may not sell it.

In addition to the restricted activities authorized for a registered nurse, a regulated member on the nurse practitioner register has been authorized:

"to prescribe a Schedule 1 drug within the meaning of the Pharmaceutical Profession Act; to prescribe parenteral nutrition; to prescribe blood products."

The stated restrictions to all of these authorizations are:

"regulated members must restrict themselves in performing restricted activities to those activities that they are competent to perform and to those that are appropriate to the member's area of practice ... and a regulated member who performs a restricted activity must do so in accordance with the standards of practice adopted by the Council."

Nurse practitioner prescribing is virtually unchanged. Under current Alberta legislation, nurse practitioners have been authorized for some time to prescribe Schedule I drugs within their competencies.

Note that neither the current nor the new authorization extends to narcotic and controlled drugs. Authorization to prescribe narcotic and controlled drugs is under federal jurisdiction. We are aware that nurse practitioners have been lobbying Health Canada to have federal legislation changed. We will make you aware of a change if and when it occurs.

A list of registered nurse practitioners is available on our website at pharmacists.ab.ca.

Single-entity pseudoephedrine rescheduled in Alberta

As a result of a Dec. 14, 2005 Order in Council, pseudoephedrine and its salts and preparations (as a single entity) have moved to Schedule 2.

All single-entity pseudoephedrine products must be placed in an area of the pharmacy where there is no public access and no opportunity for patient self-selection.

The drug schedule documents on our website incorporate this new information. You can find them at pharmacists.ab.ca; click on *Alberta Drug Schedules* on the blue bar.

Your professional responsibilities

Remember that *The Standards of Practice—The Pharmacist* apply to Schedule 2 products. You must assess the need for the product, counsel the patient, and document the interaction when appropriate.

The college continues to request that pharmacists restrict the sale of ephedrine and pseudoephedrine products to purchases in which the total quantity of drug sold to an individual through a single transaction is limited to 400 mg and 3600 mg respectively.

NDSAC Recommendations

At their Dec. 4 and 5, 2005 meeting, the National Drug Scheduling Advisory Committee (NDSAC) considered scheduling of ephedrine and pseudoephedrine products.

NDSAC recommended that:

- pseudoephedrine and its salts and preparations in single-entity products be placed in Schedule 2.;
- pseudoephedrine and its salts and preparations in combination products be placed in Schedule 3;
- ephedrine and its salts in single-entity products (in preparations containing no more than 8 mg per unit dose, with a label recommending no more than

continued on page 4



Thank you!

Thank you to all pharmacists who contributed comments and ideas when we solicited feedback on the proposed regulations.

We are aware that a short timeframe from Alberta Health and Wellness gave everyone limited time to read, digest and comment on a large amount of material. We appreciate the participation of Alberta pharmacists in this process, whether in person at the member forums or in written form sent directly to the college office.

We have taken your feedback to Alberta Health and await the department's final draft of the regulations. Stay tuned for progress reports.

Again, thanks for your contributions! Your involvement has been an important part of this process.

Electronic prescriptions—an update

The college office continues to receive calls from members about electronic prescriptions. Neither federal nor provincial health legislation allows electronic prescriptions and electronic signatures.

A joint Health Canada and Canada Health Infoway project is under way to review e-prescribing practices in other countries and provide suggested approaches for overcoming legal and technical barriers to e-prescribing in Canada. Issues related to security and the ability to authenticate a prescription continue to be researched and remain under debate. Until these issues are resolved and the regulatory framework is modified, pharmacists cannot accept e-prescriptions.

Although few pharmacists and prescribers would deny the benefits that could accrue from e-prescribing, this use of technology presently cannot be implemented in Canada. The federal *Food and Drugs Act* and the *Controlled Drugs and Substances Act* do not authorize electronic prescribing. Where prescriptions must be in writing, the prescriber's handwritten signature is required.

Pseudoephedrine *continued from page 3*

8 mg/dose or 32 mg/day and for use not more than seven days, and indicated for nasal congestion) be placed in Schedule 2; and,

- ephedrine and its salts in combination products (in preparations containing no more than 8 mg per unit dose, with a label recommending no more than 8 mg/dose or 32 mg/day and for use not more than seven days, and indicated for nasal congestion) be placed in Schedule 3.

The committee advised that, in areas where there is evidence of abuse or particular concern about abuse, ephedrine and pseudoephedrine products should not be located in a self-selection area of the pharmacy.

If no valid objections to these initial recommendations are received within 30 days of the NDSAC meeting, they will be finalized on Jan. 6, 2006, and the National Model Drug Schedule will be amended accordingly.

Alberta vs NDSAC

In Alberta, we observe the National Model Drug Schedule; however, we require an order in council when a drug is being moved upwards to a schedule that requires more control. Therefore, regardless of the final NDSAC recommendations, the move of single-entity pseudoephedrine products to Schedule 2 will be the only change in Alberta unless others are legislated in the future.

Methamphetamine

Methamphetamine or meth continues to be a growing problem. Many Alberta communities have been struggling with the social, criminal, environmental and health issues that arise from meth use. Law enforcement agencies agree that any effort to decrease access to meth ingredients is an important, proactive step.

Remnants of blister-pack pseudoephedrine products are increasingly found in home-based labs. Although home-based labs do not produce the vast majority of methamphetamine, their proliferation

continues to create environmental damage, endanger the lives of innocent Albertans, and divert law enforcement efforts from the larger volume labs.

Please remind your staff that any suspicious purchases of methamphetamine ingredients should be reported to the police. Common ingredients and the apparatus used to make methamphetamine were highlighted on the poster distributed with the Jan/Feb 2004 **acp news**. If you require an additional copy of the poster to display for staff information, please contact Pat Barnes at the college office at (780) 990-0321 or 1-877-227-3838 or pat.barnes@pharmacists.ab.ca.

Desloratadine and pramoxine rescheduled

The following changes were effective Oct. 27, 2005:

- **desloratadine** and its salts and preparations (in products marketed for adult use—2 years and older)—unscheduled.
- **desloratadine** and its salts and preparations (in products marketed for paediatric use—under 12 years of age)—remain in Schedule 3.

Pramoxine and its salts (for topical application on the skin) is now unscheduled. This change was effective December 2005.

The drug schedules have been amended accordingly. You can find the revised versions on our website at pharmacists.ab.ca under *Alberta Drug Schedules* on the blue bar.

How do you display and secure schedule 2 and 3 products?

As college representatives visit pharmacies, they often notice irregularities in the placement of schedule 2 and 3 products.

Here are some questions to ask yourself about your pharmacy.

- Are all Schedule 2 products displayed in a non-public area?
- Are all Schedule 3 drugs stored in the professional products department only?
- When a pharmacist is not available, are Schedule 3 products securely stored in a manner that prevents access to them?
- When the pharmacy closes, do you complete a physical check to ensure secure storage?
- Do staff members in your store know where and how Schedule 2 and Schedule 3 drugs are stored and do they understand why?

If you need more information about the conditions of sale for schedule 2 or 3 drugs, or aren't sure what's included in each schedule, more information is available on our website by clicking on *Alberta Drug Schedules* on the blue bar or by going to pharmacists.ab.ca/ab_drug_schedules/. There you will find the *Alberta Drug Schedules* document or the list of drugs by schedule or by generic name.



Call for nominations —council elections districts 1, 3, 5 and 6

Elections will be held for council members in District 1 (former RHAs 13, 14, 15, 16 and 17), District 3 (former RHA 10), District 5 (former RHA 4) and District 6 (former RHAs 6, 8 and 9). One council position is open in each district.

Nomination packages will be mailed to members in these districts on Jan. 20, 2006.

Ideal candidates will be individuals who are motivated to advance public safety and quality care as they apply to pharmacist practice and who have demonstrated leadership skills within their communities or the profession. Council's primary focus is on the well-being of the public through the profession's practice.

Successful candidates will be required to commit a minimum of 12 to 15 days per year over a three-year term. Candidates are eligible for re-election to serve a second term on Council.

When considering an individual who would meet the criteria of a good leader, please review the responsibilities and code of conduct for council members found on our website at pharmacists.ab.ca under *Council at Work* (pharmacists.ab.ca/council_at_work/).

Nominations must be received by the registrar prior to 4:30 p.m. on **Mon., Feb. 27, 2006.**



Call for resolutions

If you want to propose a resolution for consideration at the annual general meeting in June 2006, you must submit your resolution to the college office by 4:30 p.m. on **Tues., April 4, 2006.**

Resolutions must be submitted to the registrar in writing, accompanied by the signatures of 10 voting members in good standing.

Budget and business plan accepted, 2006 fees approved

At their Dec. 8, 2005 meeting, councillors accepted the college's 2006 to 2008 business plan, which includes the 2006 budget.

Council also approved the fee schedule in the plan. The 2006 registration fee for practising pharmacists will be \$650. This figure is the same as projected and communicated to you in January 2005.

A split fee will not be available for the 2006/07 registration year.

Watch for the business plan to appear on our website in the new year.



Congratulations to our award winners!

Congratulations to the following award winners:

- Ron Pohar, M.J. Huston
Pharmacist of the Year
- Donna Galvin, Wyeth
Consumer Healthcare Bowl
of Hygeia
- Tammy Bungard, ACP Award
of Excellence

Watch for details about the winners in a future newsletter.

Deadline extended: W.L. Boddy Pharmacy of the Year

Council has extended the nomination deadline for the W.L. Boddy Pharmacy of the Year award.

If you know a pharmacy whose health professionals, by virtue of their practice, have positively impacted the health of their community, and you feel that pharmacy is worthy of the award, please submit your nomination to the college office by **Tues., Jan. 31, 2006.**

The terms of reference and nomination form for the award can be found on our website at pharmacists.ab.ca under *Council at Work*.



Midwife prescribers

The list of midwives currently authorized to prescribe is now accessible on our website (pharmacists.ab.ca). Simply click on the *Prescriber Lists* button on the blue menu bar.

The list will be updated as we receive changes from the midwifery registrar.

The *Prescriber Lists* section of our website has been designed to help you confirm that a prescription has been issued by an authorized prescriber.

A list of substances that midwives may prescribe can be found in the *Midwifery Regulation* on our website under *Provincial Legislation* in the *Practice Reference Library*.



So much to learn, so little time!

CONTINUING PROFESSIONAL DEVELOPMENT (CPD) PLAN

Congratulations to the almost 300 pharmacists who have already participated in one of the workshops on the CPD Plan. You've done the hardest part – getting started!

Keep the momentum going! You will find the plan is a valuable tool for your continuing professional development.

If you weren't able to take part in the fall workshops, watch for notification about more workshops in the spring, or sign up for the print course. You can find more

information in your 2005 Fall Prospectus or on the Office of Continuing Pharmacy Education's website at www.ualberta.ca/pharmacy/conted.

If you've already completed your self-assessment and planned some learning for the coming year – great work! You'll find that you can link your learning to the specific competency area on the new CPD Log. There's now a column on the CPD Log for you to document the competency area to which your learning activity relates.

Learning portfolio tip...

Remember to keep your learning portfolio records for at least two years, i.e., keep the last registration year's records and the current year's, to be prepared in case you are audited.

Of course, you're welcome to keep your records for as long as you like. Your learning portfolio can be a great record of your development as a pharmacist over time.

Also, be sure to keep your learning

portfolio records in a safe, accessible place. Seven hundred pharmacists will be chosen for audits of their learning portfolios this year. The audit is very quick and (almost) painless if you have your supporting documentation filed and ready to send in to the college.



Melatonin update: some products NHP Directorate approved

In June 2004, we advised you that the Natural Health Products Directorate (NHPD) listed melatonin as a natural health product under the *Natural Health Products Regulations*.

At that time no melatonin products had been assigned a natural product number (NPN), therefore we advised you that melatonin was not approved for sale in Canada.

Recently the NHPD approved some melatonin containing products as natural

health products and assigned NPNs to them.

A list of approved NPNs is available on the Health Canada website at www.hc-sc.gc.ca/dhp-mpps/prodnatur/applications/licen-prod/lists/listapprnhp-listeapprpsn_e.html.

Sound-alike drugs

Two commonly used cardiovascular drugs—amiloride and amilazide—can cause confusion among prescribers, pharmacists and patients because of their similar names.

Please use caution when storing and dispensing these products.

Alberta Netcare news

When Alberta's pharmacists and nurses held their joint conference – *The Power of Partnership: Charting New Courses* – in Jasper in June 2005, electronic health records (EHR) were on the agenda. Calgary pharmacist David Brewerton participated in a panel discussion on EHR at the conference, championing the idea of EHR; he is still a leading proponent.

When talking about Alberta Netcare David says, "The concept of electronic health records just made too much sense for me not to get behind it. It saves us time, trouble and frustration; and it's safer for the patient."

Alberta Netcare, the province-wide umbrella over all aspects and functions associated with electronic health records, is moving across the province as all health care providers move to a one-portal system. The system which will be in place by mid-2006, with a target to be fully subscribed by early 2008, will see all pharmacists, physicians, hospital laboratories and other health care facilities and providers sharing appropriate health care records.

David gives the example of a Blue Cross billing that is rejected as 'duplicate drug, other pharmacy.'

"Under privacy and software limitations, that's all we get. It doesn't tell us much. With Netcare we would know right away if the patient has any existing prescriptions." The system flags duplicates, allergies or any unmanaged contraindications.

The system's flagging pays safety dividends. For example, the case of an elderly patient who arrives in an emergency ward and isn't able to remember what medication she is on. "She may say, 'I take a pink one and

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Alberta
Netcare
ELECTRONIC HEALTH RECORD



Health Canada advisories

After the last edition of the newsletter went to print, Health Canada placed the following advisories on its website. You can obtain a copy by using the links below or by calling Misti Denton at the college office at (780) 990-0321 or 1-877-227-3838, or contacting her by e-mail at Misti.Denton@pharmacists.ab.ca.

- **Safety information: Liqiang 4 Dietary Supplement Capsules**
www.hc-sc.gc.ca/ahc-asc/media/advisories-avis/2005/2005_114_e.html
- **Safety information: Genteal Artificial Tears**
www.hc-sc.gc.ca/ahc-asc/media/advisories-avis/2005/2005_118_e.html
- **Safety information: weight loss products from China**
RS Slim & Fit, Xianting Qianzhisu, Menze Qianweisu, Shou Shen Dan-Xiao Nan Wan, Kartien Slimming Herbs Capsules, and Kartien Trimming Formula
www.hc-sc.gc.ca/ahc-asc/media/advisories-avis/2005/2005_121_e.html
- **Safety information: recall of Omron 3-way instant thermometers**
www.hc-sc.gc.ca/ahc-asc/media/advisories-avis/2005/2005_122_e.html
- **Safety information: Shortclean**
www.hc-sc.gc.ca/ahc-asc/media/advisories-avis/2005/2005_124_e.html
- **Safety information: Aquify 2-ml Long-lasting Comfort Drops**
www.hc-sc.gc.ca/ahc-asc/media/advisories-avis/2005/2005_127_e.html
- **Recall: Gen Teal Gel**
www.hc-sc.gc.ca/ahc-asc/media/advisories-avis/2005/2005_128_e.html
- **Safety information: Femara® (letrozole)**
for health professionals
www.hc-sc.gc.ca/dhp-mps/medeff/advisories-avis/prof/femara_hpc-cps_e.html
for consumers
www.hc-sc.gc.ca/dhp-mps/medeff/advisories-avis/public/femara_pc-cp_e.html
- **Safety information: Aranesp® (darbepoetin alfa)**
for health professionals
www.hc-sc.gc.ca/dhp-mps/medeff/advisories-avis/prof/aranesp_hpc-cps_e.html
for consumers
www.hc-sc.gc.ca/dhp-mps/medeff/advisories-avis/public/aranesp_pc-cp_e.html
- **Recall: Euro-ASA 80 mg chewable tablets**
www.hc-sc.gc.ca/ahc-asc/media/advisories-avis/2005/2005_133_e.html
- **Safety information: phosphates solution (oral sodium phosphates)**
for health professionals
www.hc-sc.gc.ca/dhp-mps/medeff/advisories-avis/prof/index_e.html
for consumers
www.hc-sc.gc.ca/dhp-mps/medeff/advisories-avis/public/index_e.html
- **Safety information: discontinuation of Climacteron® Injection**
(estradiol dianthate/estradiol benzoate and testosterone ananthate benzilic acid hydrazone injection in corn oil)
www.hc-sc.gc.ca/dhp-mps/medeff/advisories-avis/prof/climacteron_hpc-cps_e.html

Reporting loss, theft or forgery

You can now access Health Canada's *Loss and Theft Report Form* on the college website in the *Practice Reference Library, Related Links* section. Click on the title **Health Canada – Controlled Substances Loss and Theft Report** under *Medical and Clinical Information*. When you link to the Health Canada website you can also view a guidance document for reporting loss or theft of controlled substances and precursors.

Health Canada expects that individuals working with controlled substances and precursor chemicals will report to the local police immediately when a theft, loss or forgery occurs. In addition, a report must be sent to the Office of Controlled Substances no later than 10 days from discovery of the loss.

The loss or theft report may be faxed immediately to the Office of Controlled Substances at (613) 957-0110, but you are also required to mail the original to:

Compliance, Monitoring and Liaison Division,
Office of Controlled Substances,
Drug Strategy and Controlled Substances Programme,
Health Canada,
A.L. 3502 B,
Ottawa, ON K1A 1B9

Alberta Netcare *continued from page 7*

two white ones;' but that doesn't help the nurse," David comments. "With Netcare, the nurse can pull up the woman's record and know what medications she is on. It just makes a lot of sense."

David notes that one factor affecting the spread of Netcare across the province is the availability of high speed secure Internet. Alberta is tackling that with the installation of Supernet, the high speed Internet infrastructure currently serving 420 communities across the province. Internet service providers are being signed up to connect users with the Supernet.

He adds, "From my conversations with other pharmacists, it seems some of them and some head offices feel it will take time away from dispensing and other duties to look up Alberta Health Care numbers. With pharmacist prescribing and other responsibilities on the horizon, it's important to anyone taking on those responsibilities to have all available data so they can make appropriate decisions. Learning the system is not difficult and help is available if you need it."

David is the first to admit that the system isn't perfect. "It relies on correct data entry, so occasionally you find yourself looking for alternate name spellings, incorrectly typed dates, that sort of thing," he says. "But as more and more pharmacists go on-line, more data is entered, and the system becomes more and more valuable."

The system currently uses Pharmacy Batch to upload prescription information on a daily basis; but eventually the uploading will become real time.

"The key," he adds, "is that Netcare is another tool we can use to make decisions about patient care, using more complete information."

For more information about the current Alberta Netcare and its deployment, or about how to sign up, visit www.albertanetcare.ca.

—from *Alberta Health and Wellness*

CPSA introduces new resource to standardize methadone treatment

In the fall of 2004, the College of Physicians and Surgeons of Alberta (CPSA) established an expert group of physicians to develop consensus standards and guidelines for methadone maintenance treatment in Alberta. Their work has resulted in the development of a resource that will guide physicians and other health care providers in using methadone as a possible treatment method for opioid dependent patients.

The new *Standards and Guidelines for Methadone Treatment in Alberta* will improve patient care by increasing consistency of treatment, allowing implementation of a quality assurance mechanism, reducing illicit drug use, and encouraging more physicians to take opioid dependent patients into their practices. This clinical practice resource also establishes a process of ongoing support to individual practitioners.

Following comprehensive stakeholder consultations, the final document was approved by the CPSA's Council and can now be viewed at www.cpsa.ab.ca/collegeprograms/methadone_standards.asp. The consultation summary is also available at this website.

To implement the standards and guidelines, education sessions will be delivered in Edmonton on Jan. 28, 2006 and in Calgary on Feb. 6. Although priority registration will be given to physicians, other health care disciplines, including pharmacists, may be interested in attending.

Details and registration information for the sessions are available at www.cpsa.ab.ca/collegeprograms/methadone_program.asp

or by contacting Chris Mayberry, opioid dependency treatment coordinator, at (780) 412-2698 or cmayberry@cpsa.ab.ca.

—from the *College of Physicians and Surgeons of Alberta*

Investigation into professional conduct

The following ACP investigating committee decision has been summarized due to space considerations. A copy of the full decision is posted on the college website at pharmacists.ab.ca under *Complaint Resolution*. You can also obtain a copy by contacting Misti Denton at the college office at (780) 990-0321 or 1-877-227-3838 or Misti.Denton@pharmacists.ab.ca.

A summary of the investigating committee report in the conduct of Andrew Wong, registration #3344

On May 6, 2005, an investigating committee conducted a hearing into the conduct of Andrew Wong. The hearing arose as a result of a letter of complaint from the College of Physicians and Surgeons of Alberta (CPSA).

The hearing concerned a series of letters sent by Mr. Wong to at least seven physicians registered with CPSA. The letters sent to each of the physicians advised that "we are in the process of setting up an international pharmacy to serve United States patients who cannot afford the higher price of medications in the United States." It further stated:

We require the help of Canadian physicians to review patient charts along with their United States physician's prescriptions and then issue a prescription under Canadian licensure for our Canadian pharmacies to dispense from.

The letter also stated:

Remuneration is generous and is paid to your account monthly. If you are interested in participating in this venture please call me at [phone number deleted] and we will meet for further discussions.

The physicians contacted by Mr. Wong were physicians for whom he frequently filled prescriptions. He wished to recruit them to co-sign prescriptions for an American company that had contacted him regarding Internet pharmacy operations.

None of the physicians who were sent the letter contacted Mr. Wong. One of the physicians contacted CPSA who advised the member that such activity by physicians would be considered by CPSA's Council as potentially conduct unbecoming and the CPSA forwarded the letter as a matter of complaint to ACP.

Based on this conduct, the Investigating Committee inquired into the following matters:

- whether Andrew Wong, as a member or as a licensee or either of them, conducted himself in a manner that:
 - was detrimental to the best interests of the public;
 - harms or tends to harm the standing of the profession of pharmacy generally;
 - breaches Principle VI of the *Code of Ethics Bylaw* and, in particular, guidelines 2 and 7 of that principle; or
 - breaches Principle VII of the *Code of Ethics Bylaw* and, in particular, Guideline 1 of that principle.

The hearing proceeded on the basis of an Agreed Statement of Facts and Joint Submissions on Penalty on behalf of the college and Mr. Wong.

Additional agreed facts and admissions considered by the Investigating Committee included the following.

- Mr. Wong had not proceeded with further attempts to solicit physicians to co-sign American prescriptions since being contacted by ACP.
- The CPSA position is that any physician who reviewed patient charts of American patients along with their US physician's prescription, and then issued a prescription to a Canadian pharmacy to dispense, would be engaging in conduct that might be considered as conduct unbecoming.
- Mr. Wong admitted the matters set out in the Notice of Hearing constituted unprofessional conduct on his part. He and his legal counsel acknowledged that "he made a mistake, it was mistake in judgement and he feels there is no doubt it is unprofessional." Mr. Wong was apologetic about his conduct.

continued on page 10



Destroying deleted e-mail

Did you know that your membership e-mail account automatically saves a copy of a deleted mail message? As a result the *Deleted Items* folder can fill quickly, and you may have problems deleting items from your *InBox*.

You can deal with the situation by:

- destroying messages using the *Destroy Selected* button, rather than the *Delete Selected* button. Using the destroy button will permanently delete messages without storing a copy in the *Deleted Items* folder; or
- cleaning out your *Deleted Items* folder periodically.

To delete all of the messages in any folder or your *InBox*, simply click on the X in the green title bar above the message area. This will add a check mark to every message in your list. Then click on the *Destroy Selected* button. All selected messages will be destroyed at once.

Have you signed onto the college e-mail?

If you haven't signed onto the college's e-mail system, it's time to do it now!

Call Misti Denton in our office if you are unable to sign on.

The college increasingly uses the e-mail system to send messages to pharmacists on a timely basis. You could be missing out! Sign on now.



BC triplicates: don't send to BC

If you dispense a triplicate prescription written in BC, it is no longer necessary to send a copy of the prescription to the College of Physicians and Surgeons of British Columbia.

Since the PharmaNet system was introduced in BC, CPSBC no longer does any manual data entry and no longer need the copies of triplicates.

Based on the agreed facts and admissions the Investigating Committee determined that Mr. Wong breached Principle VI of the *Code of Ethics Bylaw* and, in particular, guidelines 2 and 7 of that principle.

Principle VI: A pharmacist acts with honesty and integrity

Guideline 2 Pharmacists obey the laws, regulations, bylaws and standards that affect the practice of pharmacy, not only in letter, but in spirit.

Guideline 7 Pharmacists do not enter into any arrangement with a prescriber of drugs that could reasonably be perceived as affecting the prescriber's independent professional judgement in the prescribing of drugs.

The Investigating Committee determined that this breach constituted unprofessional conduct on the part of Mr. Wong.

The Investigating Committee ruled that Mr. Wong did not breach Principle VII of the *Code of Ethics Bylaw* and, in particular, Guideline 1 which states:

Principle VII: A pharmacist preserves high professional standards

Guideline 1 Pharmacists do not condone unethical conduct by colleagues, co-workers or other health professionals, and report to the appropriate authorities any unprofessional behaviour.

The Investigating Committee felt that because a physician did not respond to Mr. Wong's request to enter into an arrangement, he did not actually condone unethical conduct. Further to this, Mr. Wong's letter to the physicians stated: "We will work with you to develop guidelines under which you feel comfortable reviewing these charts and prescriptions." The Investigating Committee felt that it may have been possible for a procedure to be developed that would have been acceptable to CPSA and would not breach their policies.

The Investigating Committee made the following orders:

- a letter of reprimand be issued to Mr. Wong;

- Mr. Wong was to pay the costs of the investigation and hearing within 60 days after receipt of the written decision; and,
- the decision was to be published in **acp news** with the member's full name included. The name of Mr. Wong's pharmacy may be excluded from the publication.

Adverse reaction newsletter and *Due Quarterly* notice

You can now access the October 2005 *Canadian Adverse Reaction Newsletter* (CARN) from the *Safety Advisories* section of our website at pharmacists.ab.ca/news_events/safety_advisory.aspx

In this issue:

- intrathecal baclofen: pump system incidents
- statins and memory loss
- chloral hydrate and potassium chloride: medication incident
- New MedEffect e-Notice and Web site
- case presentation: Ayurvedic medicines: lead contamination
- as well as a summary of advisories.

The CARN is available via free electronic subscription. To subscribe go to the Health Canada website at www.hc-sc.gc.ca/dhp-mps/medeff/subscribe-abonnement/index_e.html

Also, the October 2005 issue of the *DUE Quarterly* newsletter is now available on our website in the *News and Events* section at: pharmacists.ab.ca/news_events/quarterlyNewsletter.aspx

This issue features drugs that impact nutritional intake, Part 1: Non-CNS drug-related nausea and vomiting. The January 2006 issue will present Nutritional intake, Part 2: CNS drug-related nausea and vomiting.

Our office receives a limited supply of these two publications. If you would like a hard copy, please contact the college office.

...from the faculty

The Nov. 24 annual **Faculty Awards** event celebrated the excellence among its undergraduate and graduate students and faculty members. Special guest speaker Lori-Ann Meunzer, Olympic gold medalist, addressed the guests, indicating she has a special connection to the academic gold medal. She was a close friend of Brenda Miller who received the then Alberta Pharmaceutical Association gold medal in 1976. The pair worked out together and Brenda spearheaded fund-raising efforts that enabled Lori-Ann to compete at international events. After Brenda's death in 2002, Lori-Ann received Brenda's gold medal. She wears it in every race; she said it is a memento of a friend who believed in her. Previous gold medal recipients in attendance were Mary Bell ('45, '46), Andy Stanley ('47), Rosemarie Kaplan ('68) and Lee Vosburgh ('69).

Also at the awards event, the faculty announced the **London Drugs/Brenda Miller Memorial Scholarship in Pharmacy**. The \$20,000 endowment will annually award a pharmacy student with a \$1,000 scholarship.

Three other pharmacy award winners were recognized on Nov. 23 when they received UofA **Academic All-Canadian Awards**. Sara Houlihan (field hockey), Kristen Rowntree (track and field) and Michelle Smith (basketball) all achieved 80 per cent or higher in the 2004/05 academic year while they were members of the Golden Bears and Pandas athletic program.

Over 70 friends and colleagues of Professor Nancy Rae gathered at the Faculty Club on Oct. 25 to help celebrate her **retirement**. Ms Rae dedicated 20 years to teaching UofA pharmacy undergraduates in the clinical aspects of the profession. Nancy was presented with a print of the pharmacy building and a gift to help support her golf endeavours.

On Nov. 15, the **Pharmacy Alumni Association** hosted a successful continuing education event. Dr. Murray Brown from Wyeth Consumer Healthcare gave a presentation on the OTC industry in Canada.

acp xPresses and News

acp xPress

Oct. 14 & 20

- Changes to regulations workshop

Oct. 15

- Draft HPA regs available

Oct. 18

- Draft PDA regs available

Oct. 28

- Formal consultation for regulations – give us your feedback!

Nov. 16 & 23

- Member forum in Lethbridge re proposed regulations

acp news

(issued on the college website since Oct. 7, 2005)

External:

Oct. 12

- October issue of Adverse Drug Reaction Newsletter on website

Nov. 2

- Faculty seeking pharmacist practice lab facilitators

Nov. 18

- DUE Quarterly available on website

Operations:

Oct. 13

- Nominate a colleague for award recognition

Oct. 24

- Reminder: award nomination deadline Oct. 31

Nov. 3

- Award deadline extended

Nov. 9

- Got ideas/suggestions for ACP's website?

Nov. 29

- Council meeting Dec. 7 and 8

Practice Issues:

Oct. 11 to 20

- Regulations workshops registration

Oct. 15

- Draft HPA regulations now available

Oct. 18

- Draft PDA regulations now available

Nov. 9

- We need your feedback on the proposed regulations

Nov. 15

- Letter from the president

Nov. 15 & 23

- Membership forum re proposed regulations – Lethbridge

Nov. 18

- Restricting pseudoephedrine and ephedrine

Nov. 24

- ACP still seeks your input!

Dec. 6

- Nursing regulations approved

Dec. 15

- Pseudoephedrine rescheduled
- Pramoxine rescheduled

Drug Information:

Oct. 25

- Health Canada warning: Liqiang 4

Oct. 27

- Desloratidine products for adults schedule change

Nov. 7

- Genteal Artificial Tears - recall

Nov. 9

- Health Canada warning: weight loss products from China

Nov. 10

- Omron 3-way instant thermometers – recall

Nov. 17

- Health Canada warning: Shortclean

Nov. 18

- Aquify 2-ml Long-lasting Comfort Drops – recall

Nov. 21

- Gen Teal Gel – recall

Nov. 28

- Health Canada warning: Femara (letrozole)

Nov. 30

- Health Canada warning: Aranesp (darbepoetin alfa)

Dec. 5

- Euro-ASA – recall

Dec. 7

- Health Canada warning: phosphates solutions

Dec. 16

- Climacteron discontinued

Conference and Annual General Meeting

making a difference

- pharmacists at the forefront of care

June 2 and 3, 2006
The Westin Edmonton Hotel

Join your colleagues as you learn about

- leading change using evidence-based outcomes
- making your practice more satisfying
- disclosing errors, a province-wide approach
- patient safety in your pharmacy
- how you know you're competent

You will also participate in the college's annual general meeting, then join the Canadian Pharmacists Association to hear two keynote presentations:

- Silken Laumen and Pharmacists Without Borders.

Mark your calendars and plan to be there. It'll be a busy learning time!

Recent grads—free conference registration

If you graduated within the past five years, you could be eligible to apply for a New Horizons Award and gain free registration, accommodation and travel expenses for the college's conference on June 2 and 3, 2006 in Edmonton.

The New Horizons opportunity is courtesy of Merck Frosst Canada Inc.

To qualify, you must:

- not have attended an APhA or college conference in the past;
- have been in practice at least one year and not more than five years;
- have made an impact on your community and/or your profession;
- practise pharmacy in Alberta; and,
- continue to be a member of the college in good standing.

The application form is available on our website at pharmacists.ab.ca/news_events/default.aspx?id=5496. Simply fill it in and send it to Lynn Otteson at the college office by **Fri., March 31, 2006**.

Mail to 1200 – 10303 Jasper Ave., Edmonton AB T5J 3N6 or fax to (780) 990-0328.