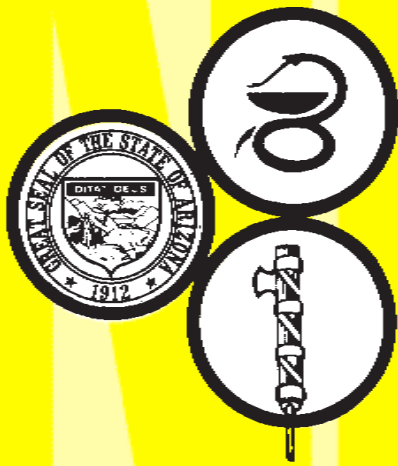


October 2009



Arizona State Board of Pharmacy

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Published to promote voluntary compliance of pharmacy and drug law.

Update on Board Staff

On July 26, 2009, Compliance Officer M. Larry Dick passed away after an illness. The Arizona State Board of Pharmacy staff really misses Larry and his special sense of humor. The Board office received numerous cards and letters of sympathy from pharmacy practitioners that were unanimous in their comments about Larry's ability to be fair in his compliance duties and also commented on his friendly and calm demeanor.

Tamiflu Update

Pharmacists in Arizona may compound Tamiflu® oral suspension according to the directions in the Roche package insert (p19) when it is unavailable from permitted manufacturers or wholesalers. Pharmacists **may not** compound similar products using bulk chemicals from a source other than Tamiflu capsules from Roche.

Biennial Renewal For Licenses and Permits

Starting August 17, 2009, the Board's online renewal system was activated for testing and began accepting renewals for licenses and permits for those few individuals who regularly visit the Web site and who happened to notice that the service was activated. This brief period before renewal letters are officially mailed out allows the Board staff to "work the bugs out" of the system and to monitor any enhancements added since the previous renewal period. (Visit: <https://az.gov/app/pharmacy/index.xhtml>.) This year renewal certificates are being sent via e-mail to the e-mail account provided by the person renewing online. The renewal certificates should arrive within 24-48 hours after a successful renewal is completed. Those licensees who order relief certificates will receive them via regular mail (not e-mail) within 72 hours. The actual statutory period for renewals is the 60 days between September 1 and October 31 each year, but we usually extend the open and close dates of the required period by two weeks on each end for testing and cleanup. This renewal year will be primarily for licensees and permittees whose license or permit ends in an odd number. Also renewing will be individuals whose license or permit ends in an even number, but whose license or permit is new or is being rotated into the odd or even scheme. If your physical address or e-mail address is incorrect, please update it online

during your renewal to ensure prompt delivery. Those persons who prefer to renew via regular United States mail may of course choose this option as always. The following links may be used to access the forms.

- ◆ Licensees: www.azpharmacy.gov/pdfs/generic%20license%20renewal%20fillable.pdf.
- ◆ Permittees: www.azpharmacy.gov/pdfs/generic%20permit%20renewal%20fillable.pdf.

Statewide Rules Moratorium

Dean Wright, who is the Board compliance policy advisor and rule writer, notes that the governor's moratorium on rulemaking may not be lifted until June 30, 2010. Dean has been holding back on working on the quality assurance and pharmacist immunization rules because of the moratorium, but expects to resume progress on these important rules packages soon. It is a time consuming and often thankless task but as most pharmacists know, Dean is very good at it because of his extensive knowledge of the process in Arizona, which is quite complex, and because of his long tenure as a rule writer. He is usually able to speed up the lengthy process considerably and the Board is always pleased with the quality and quantity of his work in this area.

Technician Training

Pharmacy technicians and technician trainees have been licensed in Arizona since 2004. Compliance officers have determined that one of the most important requirements for utilizing technicians is not always complied with, however. Even though pharmacies have had five years of experience with technician licensure, Compliance Officer Rich Cieslinski has noticed a deficiency that appears to be widespread and asked that this compliance reminder be included in this *Newsletter*. Rich and the entire compliance staff ask that all permittees and pharmacists-in-charge review Arizona Administrative Code rule number R4-23-1105. The most common deficiency noted by Rich in regard to this rule is that during annual inspection or consumer complaint investigations pharmacy personnel are routinely unable to locate the required training manual(s). The manuals are required to be on file and presented to the compliance staff for review during annual inspections. According to the rule, the training manuals may be filed either in electronic or hard copy format, must be

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Pharmacy Security and Safety Prove Necessary Component in Pharmacists' Training

Pharmacy robbery – no one ever thinks it will happen to them, but those who have experienced it know it **can** happen to anyone. To address the importance of recognizing actions to follow if faced with a robbery, several boards of pharmacy have included pharmacy safety resources in their state newsletters and on their Web sites. In addition, to keep current licensees aware and up to speed on safety measures, procedures can be directly taught and reiterated in the pharmacy. Likewise, at least one college of pharmacy has begun incorporating pharmacy safety training in its curriculum and recently saw the extreme benefits of doing so.

On Wednesday, July 8, 2009, Dustin Bryan, a P2 doctor of pharmacy candidate at Campbell University College of Pharmacy and Health Sciences, quickly learned how imperative pharmacy safety training really was when he experienced a pharmacy robbery first hand. Just as Bryan and his fellow employees were preparing to close the store, two gunmen entered the North Carolina pharmacy and approached the counter demanding OxyContin®. They left with bags filled with OxyContin and Percocet®, having a retail value of nearly \$10,000.

Luckily, all employees involved remained unharmed and despite the situation, Bryan was able to remain calm, focusing on lessons he recently learned during his pharmacy management course at Campbell.

Bryan shared his experience in the university's college of pharmacy alumni e-Newsletter. In the article Bryan states, "I crouched down hoping they hadn't seen me so I could get to a safe place in an office behind the pharmacy to call the police. They saw me as I was crawling and made me come to the front of the pharmacy. My mind was running through a class Dr Cisneros taught dealing with a robbery," he explains. "I knew what type of questions the police would be asking from our lecture, and I was asking myself those very questions while the robbery was happening. It was a very intense and scary moment . . . but I am thankful for the class I had and that nobody was hurt during the whole ordeal."

In December 2008, a safety DVD, *Pharmacy Security – Robbery*, accompanied the shipments of the National Association of Boards of Pharmacy® 2009 Survey of Pharmacy Law that were sent to the schools and colleges of pharmacy. The DVD was an educational offering from Purdue Pharma L.P. provided to the schools as part of an initiative to promote pharmacy safety education. Endorsed by National Association of Drug Diversion Investigators, Federal Bureau of Investigation Law Enforcement Executive Development Association, and National Community Pharmacists Association, the 15-minute video contains information that may be critical to preparing pharmacists in the event that they are faced with a robbery.

It was this DVD that Robert Cisneros, PhD, assistant professor at the university, implemented in his pharmacy management

course – the very same course that helped Bryan stay calm during the robbery. Cisneros went a step further by arranging for the head of campus security to speak during the course.

"One of the biggest values of the DVD was pointing out things to focus on during a robbery such as the robber's appearance – clothes, height, weight – and not just focusing on the gun," states Cisneros. He was glad to have received the DVD, explaining that, "it was just the right length, added a lot to the class, and led to great discussions." Cisneros went on to share that he was surprised to learn only 50% of the students in his class this past spring had some form of training on what to do if robbed, though this was a significant increase from the less than 5% who indicated so a few years prior.

Pharmacy robberies may not be avoidable; however, with the proper knowledge, individuals faced with these frightening situations may be better prepared to avoid harm and to assist law enforcement officials in catching criminals before additional robberies occur.

The safety DVD mentioned above may be viewed on the RxPatrol® Web site at www.rxpatrol.org. RxPatrol is a collaborative effort between industry and law enforcement designed to collect, collate, analyze, and disseminate pharmacy theft information. The safety DVD, along with a variety of other non-branded educational materials, is also available through the Purdue Pharma Medical Education Resource Catalog, accessible at www.partnersagainstpain.com under Pain Education Center.

Concerns with Patients' Use of More than One Pharmacy



This column was prepared by the Institute for Safe Medication Practices (ISMP). ISMP is an independent nonprofit agency that analyzes 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 risk reduction strategies that you can put into practice today, subscribe to ISMP Medication Safety Alert!® Community/Ambulatory Care Edition by visiting www.ismp.org. ISMP is a federally certified Patient Safety Organization, providing legal protection and confidentiality for submitted patient safety data and error reports. ISMP is also a FDA MedWatch partner. Call 1-800-FAIL-SAF(E) to report medication errors to the ISMP Medication Errors Reporting Program or report online at www.ismp.org. ISMP address: 200 Lakeside Dr, Suite 200, Horsham, PA 19044. Phone: 215/947-7797. E-mail: ismpinfo@ismp.org.

Perhaps it is not readily apparent, but medication safety could be compromised if patients practice polypharmacy to take advantage of widely publicized programs offering discounted or free medications. With tough economic times, patients may choose to fill or refill their prescriptions at multiple pharmacy



locations to save money, since taking advantage of such offers may cost less than filling their prescription at their usual pharmacy and paying the insurance co-pay.

Normally, when a customer presents a prescription, the pharmacy sends information about the drug and the patient to third-party payers and/or the patient's pharmacy benefit managers (PBM) for reimbursement.

If patients are paying out of pocket for the prescription, the pharmacy can notify the PBM so the medication can be tracked, but notification is not required. In these circumstances, the PBM and insurer may not be made aware that the prescription has been dispensed and no adjudication or drug utilization clinical screening of the prescription will be performed. Normally, medications are screened by the PBM's computer system, which includes all prescription medications regardless of where they were dispensed, and dispensing pharmacists are alerted to drug duplications, drug interactions, and some other unsafe conditions. This checking process will not occur if the prescription is not sent to the PBM. This also has an impact on hospitals that use outside vendors that obtain PBM data through Surescripts in order to populate patient medication profiles upon admissions to the emergency department or hospital. This could decrease the accuracy of drug lists collected for medication reconciliation since these vendors access their information from PBMs and insurers.

For these reasons, patients need to be educated about the importance of sharing insurance information wherever they have their prescriptions filled, even when the insurance is not being billed. Community pharmacists can help by submitting claims to insurance carriers, as cash, to keep an accurate medication profile for the patient. This is especially necessary if the patient is only filling a prescription for a drug on the \$4 list from your pharmacy, but you suspect they may be taking other medications and obtaining them elsewhere. It is also important to expand our efforts to encourage patients to keep a complete list of medications, herbals, nutritional supplements, vitamins, and prescription drugs and to show this list to every provider of care they visit. Community pharmacies can also update patient medication profiles in their computer systems to include prescription and over-the-counter medications obtained at other pharmacies, including mail-order, and promoting and providing a written copy of this list to the patient upon request.

CDC Announces Get Smart Week to Help Decrease Antibiotic Resistance

Centers for Disease Control and Prevention (CDC) is holding Get Smart Week October 5-11 to emphasize CDC's public health effort to decrease antibiotic resistance, including how pharmacists can become involved. Because antibiotic resistance is one of the world's most pressing public health problems, CDC launched the Get Smart Web site to teach about the potential danger of antibiotic resistance and what can be done to prevent it.

The Web site contains patient education materials, updated guidelines for health care providers, campaign materials, and additional resources, including information in Spanish, to help increase the public health awareness of antibiotic resistance and the importance of obtaining influenza vaccines in time for the upcoming flu season. As most states now allow pharmacists to immunize, they can help contribute to public health awareness on who should get flu shots and appropriate antibiotic use in the community. The Get Smart Web site can be accessed at www.cdc.gov/getsmart/.

FDA Approves Vaccine for 2009-2010 Seasonal Influenza and H1N1

Food and Drug Administration (FDA) has approved a vaccine for 2009-2010 seasonal influenza in the United States. FDA has also approved four vaccines against the 2009 H1N1 influenza virus. The seasonal influenza vaccine will not protect against the 2009 H1N1 influenza virus. More information is available at www.fda.gov/NewsEvents/Newsroom/PressAnnouncements.

ISMP: Do Not Store Insulin Vials in Open Cartons – Risk of Mix-up High

ISMP warns that storing insulin vials inside their cardboard cartons after the packages have been opened can lead to mix-ups, and potential medical emergencies, if vials are accidentally returned to the wrong carton after being used. The next patient care worker looking for a particular insulin product could read the label on the carton, assume that it accurately reflects what is inside, and end up administering the wrong product. To avoid such a mishap, ISMP recommends that the cartons be discarded, either in the pharmacy before the insulin is dispensed, or when it is received at the nursing station.

FDA Takes Actions on Pain Medications Containing Propoxyphene

FDA announced in July that it will require manufacturers of propoxyphene-containing products to strengthen the label, including the boxed warning, emphasizing the potential for overdose when using these products. FDA will also require manufacturers to provide a medication guide for patients stressing the importance of using the drugs as directed. In addition, FDA is requiring a new safety study assessing unanswered questions about the effects of propoxyphene on the heart at higher than recommended doses. Findings from this study, as well as other data, could lead to additional regulatory action. In its July 7 denial of a citizen petition requesting a phased withdrawal of propoxyphene, FDA said that, despite "serious concerns . . . , the benefits of using the medication for pain relief at recommended doses outweighs the safety risks at this time." Additional information can be found at www.fda.gov/NewsEvents/Newsroom/PressAnnouncements/ucm170769.htm.

revised periodically, be signed by the pharmacist-in-charge, and be readily retrievable by the pharmacy personnel on duty at the time of the compliance visit.

Disciplinary Actions

Notice: Before making a prescription-dispensing or other decision pursuant to information in this issue, you are encouraged to verify the current condition of a license with the appropriate licensing agency (Board).

Pharmacists

Abramchick, Hyman (S012245) – Suspension terminated. Five-year probation imposed. Effective July 9, 2009.

Babington, Ronald (S013760) – \$500 fine to be paid within 90 days and eight continuing education (CE) hours. Effective September 10, 2009.

Birkholz, Terri (S007029) – \$2,000 fine to be paid within 90 days and eight CE hours. Effective September 10, 2009.

Bristol, Jr, Ernest (S013963) – \$2,000 fine to be paid within 90 days and six CE hours. Effective September 10, 2009.

Brophy, William (S012173) – Probation terminated. Effective September 10, 2009.

Callaway, Gerald (S007717) – \$1,000 fine to be paid within 90 days and eight CE hours. Effective September 10, 2009.

Carranza, Robert (S015967) – Five years probation, new five-year Pharmacists Assisting Pharmacists of Arizona (PAPA) contract, 400 hours community service. Effective June 23, 2009.

Choday, Haritha (S015102) – \$1,000 fine to be paid within 90 days and eight CE hours. Effective September 10, 2009.

Cuestas, Melissa (S009200) – \$1,000 fine to be paid within 90 days and eight CE hours. Effective September 10, 2009.

Garden, David (S004518) – Probation terminated. Effective September 10, 2009.

Karn, Kerry (S010907) – Probation terminated. Effective September 10, 2009.

Lederman, Robin (S016982) – \$1,000 fine to be paid within 90 days and eight CE hours. Effective September 10, 2009.

Llamas, Frank (S005978) – \$1,000 fine to be paid within 90 days and eight CE hours. Effective June 23, 2009.

Makai, Gerwyn (S016844) – Suspension terminated. Four-and-a-half years probation imposed. Effective July 14, 2009.

Malik, Faiza (S016827) – \$500 fine to be paid within 90 days and eight CE hours. Effective September 10, 2009.

Miloshoff, James (S016725) – Suspended at least six months and cannot ask for suspension to be lifted until he returns to Arizona full-time. Five-year PAPA contract. Lifting of suspension will begin a five-year probation period in which respondent must complete 400 hours community service. Effective July 14, 2009.

Mullins, Rich (S011395) – Revoked. Effective July 13, 2009.

O'Connor, Daniel (S011401) – \$500 fine to be paid within 90 days. Effective June 23, 2009.

Olshansky, Harold (S008834) – Nine months suspension, followed by one-and-a-half years probation, \$10,000 fine, must retake Multistate Pharmacy Jurisprudence Examination®. Effective June 23, 2009.

Schember, Michael (S016347) – Six months probation, \$1,000 fine, nine CE hours. Effective June 23, 2009.

Sumner, Robert (S010132) – License surrendered. Effective September 10, 2009.

Waugh, Robert (S013300) – Six-month probation, \$1,000 fine, nine CE hours. Effective June 23, 2009.

Whitehead, John (S008573) – \$500 fine to be paid within 90 days and eight CE hours. Effective September 10, 2009.

Woodburn, Mark (S012314) – \$2,000 fine to be paid within 90 days and six CE hours. Effective September 10, 2009.

Technicians

Fornelli-Vertrees, Sarah (T003607) – Probation terminated. Effective July 9, 2009.

Kendrick, Brandon (T011274) – Revoked. Effective September 10, 2009.

Disciplinary Actions – Board of Pharmacy (Actions Since the July 2009 Newsletter)

Disciplinary Actions – Other Boards

Arizona Medical Board (MDs)

Bartschi, Carlin G. (MD 9497) – License revoked. Effective 35 days after August 5, 2009, unless respondent petitions for rehearing or review.

Bayham, Wilbur (MD 2694) – Non-disciplinary – Respondent's practice is limited in that he shall not practice medicine in the state of Arizona and is prohibited from prescribing any form of treatment including prescription medications, until respondent applies to the Board and receives permission to do so. Effective April 13, 2009.

Borjeson, Robbi (MD 24093) – License revoked. Effective September 9, 2009.

Chattman, Martin S. (MD 7618) – Decree of censure and practice restriction for 10 years with set terms and conditions. Respondent is prohibited from prescribing, administering, or dispensing any controlled substances. Effective August 5, 2009.

Fankhauser, Grant (MD 37503) – *Interim Consent Agreement for Practice Restriction* – Respondent shall not practice clinical medicine or any medicine involving direct patient care, and is prohibited from prescribing any form of treatment including prescription medications, until respondent applies to the Board and receives permission to do so. Effective February 4, 2009.

Hochane, Sam (MD 32092) – *Interim Consent Agreement for Practice Restriction* – Respondent shall not practice clinical medicine or any medicine involving direct patient care, and is prohibited from prescribing any form of treatment including prescription medications, until respondent applies to the Board and receives permission to do so. Effective June 22, 2009.

Lee, Justin M. (MD 41535) – *Interim Consent Agreement for Practice Restriction* – Respondent shall not practice clinical medicine or any medicine involving direct patient care, and is prohibited from prescribing any form of treatment including prescription medications, until respondent applies to the Board and receives permission to do to. Effective August 25, 2009.

Molina, John W. (MD 20789) – Non-Disciplinary – Physician's practice is limited in that he shall not practice medicine in the

state of Arizona and is prohibited from prescribing any form of treatment including prescription medications until physician applies to the Board and receives permission to do so. Effective August 17, 2009.

Smith, William Murray (MD 11497) – Non-Disciplinary – Physician's practice is limited in that he shall not practice medicine in the state of Arizona and is prohibited from prescribing any form of treatment including prescription medications until Physician applies to the Board and receives permission to do so. Effective August 31, 2009.

Sosa-Roche, Jose A. (MD 18643) – Request for license inactivation with cause and order inactivating license with cause. Effective June 29, 2009.

Teague, Robert (MD 3925) – *Interim Findings of Fact* – Respondent's license to practice allopathic medicine in the state of Arizona is summarily suspended pending a formal hearing. Effective June 23, 2009.

Tolman, Kenneth J. (MD 36900) – License surrendered to the Board. Effective August 5, 2009.

Yeh, Albert Szu Yun (MD 32323) – *Interim Consent Agreement for Practice Restriction* – Respondent shall not practice clinical medicine or any medicine involving direct patient care, and is prohibited from prescribing any form of treatment including prescription medications, until respondent applies to the Board and receives permission to do so. Effective July 20, 2009.

Naturopathic Physicians Medical Board (NMDs)

Eastman, Carole (NMD 04-789) – Voluntary – Respondent shall not prescribe, administer, or dispense anabolic steroids, any estrogen blockers, any fertility drugs, or any appetite suppressant drugs. Respondent may prescribe and dispense DHEA 7-Keto for medical conditions, but not for bodybuilding purposes. Effective August 28, 2008.

Board of Osteopathic Examiners (DOs)

Arnold, Lloyd (DO 0641) – *Interim Consent Agreement for Practice Restriction* – For the first 30 days, respondent shall only refill once any prescription for a given chronic pain patient. By the 45th day, respondent's practice shall be restricted in that he shall no longer prescribe any Schedule II medications or Schedule III hydrocodone combinations and morphine combinations to any patient, nor shall such medications be prescribed by any health care practitioners supervised or employed by respondent at his practice. Effective August 7, 2009.

Gloskowski, Aaron (DO 4405) – Respondent placed on probation for five years with set terms and conditions. Effective June 29, 2009.

Regulatory Board of Physician Assistants (PAs)

Langley, Jennifer (PA 2433) – *Interim Findings of Fact* – License to perform health care tasks as a physician assistant in the state of Arizona is summarily suspended pending a formal hearing. Effective July 8, 2009.

Mitchelson, Robert (PA 3097) – Respondent is placed on probation for 10 years with stayed revocation. Respondent shall not prescribe, administer, or dispense Fioricet[®]. Effective August 19, 2009.

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The *Arizona State Board of Pharmacy News* is published by the Arizona 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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